

SC372504

Registered provider: The Senad Group Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This children's home is registered to provide care for up to 39 children and young people aged from five to 19 years who may have learning disabilities, Prader-Willi syndrome or autism spectrum conditions.

Children live in one of five houses. There is an independent special school on the same site. This inspection focused solely on the residential children's home.

The manager is suitably qualified and experienced. He registered with Ofsted in January 2017. There were 17 children living in the home at the time of the inspection.

Inspectors saw and spoke with several children.

Inspection dates: 30 September and 1 October 2025

Overall experiences and progress of children and young people, taking into account **good**

How well children and young people are helped and protected **good**

The effectiveness of leaders and managers **good**

The children's home provides effective services that meet the requirements for good.

Date of last inspection: 6 November 2024

Overall judgement at last inspection: outstanding

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
06/11/2024	Full	Outstanding
27/11/2023	Full	Outstanding
20/07/2022	Full	Good
17/08/2021	Full	Outstanding

Inspection judgements

Overall experiences and progress of children and young people: good

Children make significant progress with their behavioural, emotional and mental health needs. The staff nurture the children. They are positive adult role models, who teach children a wide range of life skills. When needed, staff find new and creative ways to support the needs of children. As a result of this nurturing and dynamic approach, children thrive and enjoy positive outcomes. However, not all staff have consistently used language that affirms a child's identity and avoided terms that may feel stigmatising.

Children have targets that are both achievable and provide challenge to help children develop. Progress for some children has been to walk up a mountain with staff. For others, this has been performing ballet in front of an audience. More children are gaining skills and becoming independent with personal care tasks. The children's voices are embedded throughout these targets to allow them to have a say on what level of help they need.

Feedback from family and professionals is overwhelmingly positive. They give recognition to the positive relationships children have with staff and say that children's views, wishes and feelings are listened to and acted on. One professional told inspectors, 'I always think about if somewhere is good enough for my own children, and [name of children's home] absolutely is.'

Staff promote and encourage children to have healthy lifestyles. For some children, and because of their disability and complex healthcare needs, this can be challenging. Staff support children to take part in a wide range of physical and sporting activities. These promote improved physical health, self-confidence and skills. Healthcare practice is good.

Staff have extensive knowledge of children's individual communication needs. They have various tools to support effective communication, with some staff using sign language. Children usually have several ways to communicate their needs to staff and to their peers, which promotes their voice being heard. However, some children do not always have access to their systems of communication, and this is a missed opportunity for those children to voice their views, wishes and feelings.

The environment of the homes where children live has seen continuous improvement. This is creating an improved, welcoming, safe and nurturing space for the children to live in. More recent improvements include fresh decor, comfortable furnishings and personalised touches that reflect the children's interests and promote a sense of inclusion. Children have bedrooms that they can personalise.

How well children and young people are helped and protected: good

The manager takes all allegations against staff seriously and responds to them effectively. This includes sharing information with professionals, including the local authority designated officer, in line with safeguarding guidance. Children are provided with a response that is written in a child-friendly manner and which outlines the actions taken to keep them safe. This ensures that children understand their concerns have been taken seriously and acted on.

Physical restraint is used as a last resort. Managers assure themselves that each incident of restrictive practice is proportionate and in line with each child's plans and assessments. Debriefs are carried out with staff to check their well-being and to identify any lessons for improved practice. When needed, practice is adapted to ensure that children remain safer. Debriefs are attempted with children after each intervention. A strength of this home is listening to children and their co-production in the care they receive.

Staff continually build on their knowledge of the children and the most appropriate way to support them and keep them safe. All the children have detailed risk assessments and behaviour support plans. These documents provide staff with the necessary guidance on how to meet the children's needs on a day-to-day basis and ensure they remain safe. However, for one child, some staff were not always fully aware of the risk assessment for the child.

Managers work closely with a team of therapists in supporting children to understand their emotions and feelings. Therapists support children to develop their communication and their language skills. Children, where appropriate, are involved in their own shared assessment of risk. This demonstrates the trusting relationships children have with staff and means that some children are actively involved in their care planning.

Complaints are well managed, demonstrating a thorough, transparent and child-centred approach. Complaints are acknowledged promptly and investigated objectively, and documents clearly show a sharing of information throughout the process. Outcomes of complaints are given and follow-up actions are taken to prevent recurrence.

There is a robust medication process in place. When minor medication errors have been identified, managers have ensured that action is taken in response. This has strengthened procedures that are in place. Staff receive extra training and support to improve their practice. This means that there is a reduced risk of further errors. However, oversight of the medication process has not been consistent. A serious medication breach occurred, meaning that a child was able to gain access to a controlled drug, undetected by staff. This has meant children have been put at risk of accessing a substance that would be harmful to their health and well-being.

The effectiveness of leaders and managers: good

The residential team is well established and highly effective. The head of care provides steadfast leadership of his team. The team is aspirational for all children. The team has an excellent team morale and a sense of shared ownership. This ensures a continued and dynamic improvement across the homes.

Staff are skilled and experienced in supporting vulnerable children. For new staff, a thorough induction equips them for the role, followed by a wide range of essential training. This provides staff with the knowledge and skills to be able to deliver bespoke care to meet children's individual complex care needs.

Staff feel supported by the managers and enjoy working in the home. There is a strong ethos of teamwork and supporting each other to meet the needs of the children. The staff receive regular supervision in line with the home's policy. The staff have opportunities to reflect on their development and consider further opportunities. Managers hold regular team meetings, and there is a culture of group reflection.

Staff receive regular and focused supervision. As part of this supervision, staff are reminded of their safeguarding responsibilities and are upskilled on a regular basis. Their knowledge and competence of keeping children safer are evaluated. Alongside this, they complete all mandatory training coupled with any child-specific training as required.

Managers ensure that staff go through a thorough safer recruitment process. This means that only adults that are deemed safe get to care for children who are vulnerable and who have complex care and health needs. Once employed, new staff have a robust and wide-ranging induction, which includes an introduction to safeguarding, initial physical intervention training and child-specific training.

Managers monitor all areas of care practice through a variety of quality assurance systems. This helps the managers to ensure that timescales are met for a range of activities that relate to the running of the home. Independent scrutiny is integral to the quality assurance systems. However, on one occasion, managers have not informed the regulator about a serious incident involving the care of children.

What does the children’s home need to do to improve? Statutory requirements

This section sets out the actions that the registered person(s) must take to meet the Care Standards Act 2000, The Children’s Homes (England) Regulations 2015 and the ‘Guide to the Children’s Homes Regulations, including the quality standards’. The registered person(s) must comply within the given timescales.

Requirement	Due date
<p>The protection of children standard is that children are protected from harm and enabled to keep themselves safe.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that the home’s day-to-day care is arranged and delivered so as to keep each child safe and to protect each child effectively from harm. (Regulation 12 (1) (2)(b))</p> <p>This relates to children having access to a medication that could be harmful to their health and well-being.</p> <p>This relates to staff not following medication administration processes.</p> <p>This relates to some staff not being aware of children’s safeguarding plans.</p>	<p>3 November 2025</p>
<p>The registered person must notify HMCI and each other relevant person without delay if—</p> <p>a child is involved in or subject to, or is suspected of being involved in or subject to, sexual exploitation;</p> <p>an incident requiring police involvement occurs in relation to a child which the registered person considers to be serious;</p> <p>there is an allegation of abuse against the home or a person working there;</p> <p>a child protection enquiry involving a child —</p> <p>is instigated; or</p> <p>concludes (in which case, the notification must include the outcome of the child protection enquiry); or</p>	<p>3 November 2025</p>

there is any other incident relating to a child which the registered person considers to be serious.
(Regulation 40 (4)(a)(b)(c)(d)(i)(ii)(e))

The registered manager has not informed the regulator of a serious event.

Recommendations

- The registered person should ensure that the home works in partnership with relevant people as appropriate to ensure that each child is provided with support (appropriate to their age and understanding) to communicate their views, wishes and feelings and participate as fully as possible in all aspects of their care planning and daily care. This may include the use of and support to use communication aids, equipment and/or any necessary language support. ('Guide to the Children's Homes Regulations, including the quality standards', page 22, paragraph 4.6)
- The registered person should ensure that when communicating about children, staff use language that affirms a child's identity and dignity and avoid terms that may feel stigmatising. ('Guide to the Children's Homes Regulations, including the quality standards', page 62, paragraph 14.4)

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people, using the social care common inspection framework. This inspection was carried out under the Care Standards Act 2000 to assess the effectiveness of the service, how it meets the core functions of the service as set out in legislation, and to consider how well it complies with The Children's Homes (England) Regulations 2015 and the 'Guide to the Children's Homes Regulations, including the quality standards'.

Children's home details

Unique reference number: SC372504

Provision sub-type: Residential special school

Registered provider: The Senad Group Limited

Registered provider address: Senad Group Ltd, 1 St. Georges House, Vernon Gate, Derby DE1 1UQ

Responsible individual: Mark Ryder

Registered manager: Matthew Cousins

Inspectors

Simon Hunter, Social Care Inspector

Zoey Lee, Social Care Inspector

Eleanor Quanbrough, Social Care Inspector

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