

# 2671361

Registered provider: Solent Child Care Limited

Full inspection

Inspected under the social care common inspection framework

## Information about this children's home

The home is owned by a private provider and offers care and accommodation for up to 2 children who experience social and emotional difficulties.

At the time of the inspection, 2 children were living in the home. No children have moved in or out of the home since the last inspection.

The manager registered with Ofsted in May 2023.

For the purpose of this report, staff are referred to as adults, which is part of the ethos of this home.

### Inspection dates: 10 and 11 February 2026

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

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

The effectiveness of leaders and managers **outstanding**

The children's home provides highly effective services that consistently exceed the standards of good. The actions of the children's home contribute to significantly improved outcomes and positive experiences for children and young people who need help, protection and care.

**Date of last inspection:** 18 March 2025

**Overall judgement at last inspection:** outstanding

**Enforcement action since last inspection:** none

## Recent inspection history

Inspection date	Inspection type	Inspection judgement
18/03/2025	Full	Outstanding
20/02/2024	Full	Good
08/06/2022	Full	Good

## Inspection judgements

### Overall experiences and progress of children and young people: outstanding

Children have extremely positive relationships with adults who are attuned to their every need and show them that they are loved and valued. Both children have lived in their home since 2022, and this stability has enabled them to make exceptional progress from their starting points. Children trust adults and they are happy and relaxed in their presence. The children have a strong sense of belonging in the home and their photographs, artwork, toys, books and posters are visible in communal areas, as well as their bedrooms. The children said they live in a 'ten-out-of-ten' home and their parents and social workers agree.

Adults support children to make excellent progress with their education. One child was unable to read and write when they joined the home. Now, they have transitioned to secondary school with these skills. Adults have instilled a love of reading and writing in children by encouraging them to read books or complete crosswords before bed. Another child has experienced some exclusions. However, adults always support them to return to school and they have become increasingly motivated to engage in education. More recently, adults have received communication from school praising the child and their efforts.

The children are encouraged to participate in hobbies and activities that have boosted their resilience, self-esteem and social skills. One child has attended gymnastics for several years and has recently taken to rugby. Adults enjoy cheering them on and they have won some awards. Another child has started martial arts and they are exhibiting a natural skill in this sport. Adults are supporting them to work through the grading system. The children told Adults that they wanted to embark on mountain climbs, which adults arranged, and they have successfully completed two climbs. Adults are impressed with the children's determination and commitment to this goal.

Adults have a strong understanding of children's emotional and physical health needs, and they respond appropriately to any emerging health concerns. This includes taking children to the GP and seeking specialist input. Adults talk with children about their health needs helping them to understand the purpose of appointments and exploring any worries. They support children to learn about their diagnosis in creative ways. Adults use child-friendly metaphors and language to help children understand what is happening to their bodies and the impact this has on their presentation to help them better manage what they are feeling.

The registered manager and adults are committed to strengthening relationships between children and their parents, providing this is safe. They travel long distances to take children to visit their families and they prepare children in advance by talking about travel plans, who they will see and what they will do. This approach helps children to manage their feelings, which are sometimes overwhelming. The registered manager has strongly advocated for children to have quality family time in the community or at family

homes, rather than in institutional settings. Consequently, children's family time has increased but this is on their terms and at their preferred pace.

The registered manager and adults help children to process their lived experiences aiming to improve their emotional wellbeing and self-narrative. They arranged for one child to participate in 'life story work.' This allowed them to safely explore decisions made by professionals, family dynamics and prior placement moves. This newfound clarity has allowed the child to detach negative experiences from their identity. It has also resulted in them being able to spend more time with their family, including meeting her younger sisters. The company's clinical psychologist was determined to complete this work with the child, despite the absence of funding.

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

Adults have an in-depth understanding of children's lived experiences and how this impacts their presentation, behaviour and emotional wellbeing. They support children to reflect on their behaviours and help them to devise new perspectives and coping strategies. Adults have developed personalised interventions that take account of children's individual characteristics and needs. Sometimes, they consult with children and use their input to inform interventions.

When children are distressed and exhibit unsafe behaviours, adults respond with empathy and care. They use appropriate de-escalation strategies that are therapeutically informed. Adults only use physical interventions as a last resort and only when it is necessary and proportionate to reduce risk and keep everyone safe. After incidents, adults talk with children exploring their views and feelings. These conversations are age-appropriate, empathetic and meaningful. Adults listen to children and take account of their views, while reiterating healthy boundaries.

Sometimes Adults will restrict children's movements when they are emotionally unsettled or displaying unsafe behaviours. Their actions are appropriate and clearly recorded in incident records. However, leaders and managers have not always interpreted them as low-level physical interventions and have not recorded them as such.

When children raise concerns about adult's behaviour, leaders and managers follow established safeguarding protocols and alert social workers. However, they do not always inform Ofsted in accordance with regulatory requirements, limiting the regulator's oversight of practice within the home.

### **The effectiveness of leaders and managers: outstanding**

Leaders and managers ensure that children receive high standards of individualised care that takes account of their emerging needs, difficulties and behaviour. They are ambitious for children and create avenues for them to receive the right support at the right time. For example, managers have sourced training for the team to increase their understanding of one child's sensory experiences. They took this learning forward by exploring sensory preference and tools with the child, listening to his views and wishes.

The registered manager and adults have positive relationships with partner agencies while being tenacious advocates for the children. They confidently challenge decisions made by professionals if they perceive them to fall short of their duties towards the children. For example, the registered manager challenged the reasons for one child's school exclusions and prompted social workers to reconsider family time plans. Social workers praised the home; one said they wanted to replicate the high standards of care across other children's homes.

The registered manager is a nurturing and caring practitioner who values adults and ensures that they have opportunities to strengthen their knowledge and skills. For example, the clinical psychologist visits the home on a monthly basis to explore therapeutic interventions with the team. This is visible in adults interactions with children demonstrating that their learning is integrated into practise. The registered manager ensures that adults receive timely supervisions and leads critically reflective discussions with them.

Adults have positive views about the ethos, culture, and values in the home. They feel supported to fulfil their caring roles to a high standard. The registered manager encourages adults to think creatively. This has prompted innovative ideas that spark children's interest and engagement in their care. Adults have confidence in the registered manager and they are very complimentary about her leadership style and ability to motivate them.

## 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, 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 registered person must ensure that—</p> <p>within 24 hours of the use of a measure of control, discipline or restraint in relation to a child in the home, a record is made which includes—</p> <p>the name of the child;</p> <p>details of the child's behaviour leading to the use of the measure;</p> <p>the date, time and location of the use of the measure;</p> <p>a description of the measure and its duration;</p> <p>details of any methods used or steps taken to avoid the need to use the measure;</p> <p>the name of the person who used the measure ("the user"), and of any other person present when the measure was used;</p> <p>the effectiveness and any consequences of the use of the measure; and</p> <p>a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure; (Regulation 35 (3)(a)(i)(ii)(iii)(iv)(v)(vi)(vii)(viii))</p> <p>In particular, the registered manager must ensure that any physical touch used to restrict children's movements, when they are showing signs of resistance, is interpreted and recorded as a physical intervention.</p>	<p>27 March 2026</p>
<p>The registered person must notify HMCI and each other relevant person without delay if—</p>	<p>27 March 2026</p>

there is an allegation of abuse against the home or a person working there;  
(Regulation 40 (4)(c))

In particular, when a child makes an allegation about adults that work in the home, the registered manager must share this information with Ofsted via the notification portal, regardless of whether they think the allegation is substantiated or not.

## **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:** 2671361

**Provision sub-type:** Children's home

**Registered provider:** Solent Child Care Limited

**Registered provider address:** 9 St Georges Yard, Castle Street, Farnham, Surrey GU9 7LW

**Responsible individual:** Kirsty Sheppard

**Registered manager:** Sarah Savine

### **Inspector:**

Tara Webb, Social Care Regulatory Inspector

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Piccadilly Gate  
Store Street  
Manchester  
M1 2WD

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