

# Adel Beck Secure Children's Home

Registered provider: Leeds City Council

Registered provider address: East Moor Lane, Leeds LS16 8EB

Full inspection

Inspected under the social care common inspection framework

## Information about this secure children's home

This home is owned and managed by a local authority and is approved by the Secretary of State to restrict children's liberty.

The home provides care for up to 24 children aged between 9 and 17 years. Care is provided for up to 14 children placed by the Youth Custody Service and 10 children under section 25 of the Children Act 1989 who are placed by local authorities.

Admission of any child under Section 25 of the Children Act 1989 who is under 13 years of age requires the approval of the Secretary of State.

The commissioning of health services in this home is the statutory responsibility of NHS England under the Health and Social Care Act 2012. Education is provided on site in dedicated facilities.

The manager registered with Ofsted in 2007.

At the time of this inspection, 18 children were living in the home.

### Inspection dates: 20 to 22 January 2026

<b>Overall experiences and progress of children and young people, taking into account</b>	<b>good</b>
Children's education and learning	good
Children's health	outstanding
How well children and young people are helped and protected	good

The effectiveness of leaders and managers      good

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

**Date of last inspection:** 21 May 2024

**Overall judgement at last inspection:** good

**Enforcement action since last inspection:** none

## Recent inspection history

<b>Inspection date</b>	<b>Inspection type</b>	<b>Inspection judgement</b>
21/05/2024	Full	Good
20/06/2023	Full	Good
27/09/2022	Full	Requires improvement to be good
06/10/2021	Interim	Sustained effectiveness

## Inspection judgements

### **Overall experiences and progress of children and young people: good**

There is a calm and settled atmosphere throughout the home. Children speak positively about the care they receive from staff and appear comfortable around the home. One child said that they do not know where they would be without the staff at the home. Staff demonstrate a strong understanding of each child's individual needs and this helps them to build positive and meaningful relationships with them.

Children's case managers and key workers know them well. Individual intervention sessions take place regularly and focus on topics tailored to each child's needs. Group sessions are also held to support discussions among children. These sessions are well attended and provide a forum for children to explore a range of topics, develop their understanding and improve their communication skills, including the ability to listen to and accept the perspectives of others.

Staff support children to raise concerns and make complaints. This helps them to understand the process and have their views recorded. Managers respond appropriately and promptly, addressing issues in a way that children can understand and confirming outcomes with them. This reinforces that their concerns are taken seriously. Furthermore, children also have regular meetings with staff where they are asked for their views and can make suggestions.

Leaders and managers, and the resettlement team, have developed links with providers of children's homes. An event was held at the home, giving providers the opportunity to learn more about the environment and meet the children. Feedback from the event was positive, with providers reporting that they gained a better understanding of secure settings and enjoyed the experience of meeting the children. Strengthening these links has directly supported the identification of a placement for a child, who is now in the process of moving to their new home.

Staff support children to spend time in the community taking part in meaningful activities. Group activities have been introduced and received positively. These are jointly organised by the resettlement team and education staff, demonstrating a creative and proactive approach to engaging children. For one child, outings have been used to support their religious and cultural needs.

Family members are positive about the support that their children receive. They said that staff know the children well and are supporting them to make progress.

### **Children's education and learning: good**

Educational leaders have developed a well-considered, coherent curriculum plan. In the mornings, children follow a programme covering core national curriculum subjects, including mathematics, English, food studies and physical education. In the absence of

formal science lessons, scientific concepts are introduced through subjects such as food, where children learn about nutrition and its impact on the body, and through physical education, where they explore how cells develop and reproduce. Due to staffing constraints and sickness, which are now being addressed, leaders have prioritised subjects that children enjoy and engage with, supporting the development of their confidence in education.

Children benefit from a welcoming and calm learning environment where they develop positive relationships with their peers and staff. Teachers and support staff work effectively together in lessons and model positive behaviours. For example, in art, staff and children engage in painting alongside each other. Staff know the children well, and these positive relationships help children engage fully in their learning by communicating with them in a mature and encouraging manner.

Staff assess children on arrival to identify what they already know and can do. Most lessons are differentiated to meet individual children's needs, ensuring tasks are accessible and support progress. Children attend well and engage positively in their learning. Children say that their engagement is significantly better than in their previous educational settings, and are happy and proud to talk about their learning and the knowledge they are acquiring. Children are set targets, but for a few, these targets are not precise enough to ensure they make the rapid progress of which they are capable.

The education team understands the importance of ensuring that every child has a clear transition plan, whether they are preparing to move into the community or to another centre. The recently introduced school trips are a great learning asset. Leaders remain committed to doing the right thing for children.

The standard of work in vocational subjects such as art and electrical studies is high. Children take pride in their achievements. In contrast, children's books in English and mathematics are poorly presented. It is difficult to identify what children are learning or to see evidence of progress, despite most pupils achieving qualifications over time.

Leaders have an accurate and regularly reviewed school development plan. Each term, the headteacher provides an update to the education management committee, outlining progress against priorities. Recent challenges, including long-term staff absence, have affected the quality of the core curriculum. Leaders recognise these issues and are taking steps to improve the curriculum offer. Although the management committee is committed, education leaders would benefit from a more critical evaluation of current practices.

### **Children's health: outstanding**

Children benefit from extended on-site health cover to better support their health needs, particularly their mental health. This enables children to access healthcare and support at times that suit them, for example outside of education, so that their learning is not

disrupted. Health staff are also able to spend more time with children in their own living spaces, helping to build positive and trusting relationships.

On admission, all children receive an initial health assessment. Further assessments are carried out within agreed timescales by child and adolescent mental health services (CAMHS), substance misuse practitioners, and through a full physical health evaluation. Neurodiversity assessments are also completed, ensuring a holistic understanding of each child's health needs and enabling appropriate measures to be put in place to support them.

Healthcare planning for children includes forensic CAMHS risk assessments. These are particularly important for children who have previously exhibited violent or sexually harmful behaviours. These inform discussions within the multidisciplinary team about how to implement care and support measures for children while they live at the home and to prepare them for the future.

Children's healthcare plans clearly detail children's needs and circumstances, including the expected length of stay at the home. These plans are realistic and identify achievable healthcare engagements targets for children, within the timescales of their placement. As a result, children are only expected to undertake therapeutic work that can be completed during their placement. This ensures that the most important and significant pieces of work are finished before they leave the home, allowing children to move forward and prepare for their next stages of their therapeutic work.

Regular neurodiversity assessment meetings provide an opportunity for health staff to discuss individual children and plan assessment processes to diagnosis, 'a gateway to assessment'. With access to clinical psychologists, speech and language therapists and occupational therapists, this process ensures that previously unmet needs can be assessed and, where appropriate, diagnosed for autism, attention deficit hyperactivity disorder and even learning disabilities. Health staff continually demonstrate that they carefully consider children's unique characteristics. This means that the relevant and most essential health practitioners and services take part in the assessment process, engaging with children in a positive way.

Clinical psychologists at the home are proactive in ensuring that children receive appropriate support when preparing for discharge. For example, if a child is identified as eligible for support through the Dynamic Support Register (DSR), psychologists contact the relevant social worker to arrange comprehensive Care, Education and Treatment (CET) reviews either before or on the day of discharge. This ensures that children are appropriately included on their local area's DSR and continue to receive the support they need. This increases the success of the children's next placement.

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

Children thrive in a safe environment because of the trusting relationships that staff build with them. Children said that they are well cared for and that they feel safe and that they can talk to staff for support whenever they want.

Children benefit from living in a well-maintained, safe environment. Children's bedrooms are personalised and their communal living spaces are homely. This provides a comfortable environment for children. Maintenance and security checks are routinely carried out across the home to keep children safe and secure.

Children have individual written risk assessments that are reviewed regularly and include all pertinent information. These are fluid documents that provide staff with an up-to-date assessment of risks to children's safety. Staff know how to support children well and how to keep them safe.

There is a strong focus from the senior leadership team and staff on keeping children safe. Allegations are responded to promptly and thoroughly when there are concerns about staff practice, including effective partnership working with local authority designated officers and placing local authorities.

Children are physically held in line with regulations and only when the legal criteria are met. There is a strong emphasis on staff implementing safe physical restraint practices. However, some practice shortfalls are not consistently identified through managers' review processes. For example, children who are not involved in the incident remain in the same area, with no action taken by staff to remove them to another area to promote children's privacy and dignity.

On most occasions, single separation and managed away practice is appropriately used and recorded. However, the decision-making and the details of the circumstances when all children were unlawfully held in one single separation event, to ensure their safety and the safety of staff, is not clearly evidenced.

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

The long-standing manager has an in-depth understanding of the children and their individual needs. A strong, child-centred ethos underpins the service and is consistently modelled by the manager, whose clear passion for children's progress and wellbeing is evident in day-to-day practice. This approach positively influences staff, with the manager's expectations and values effectively embedded and reflected in staff practice, ensuring that children receive consistent, nurturing and aspirational care. Furthermore, the manager acts without delay when shortfalls in practice occur.

Training extends beyond mandatory requirements, with bespoke sessions and regular refreshers delivered by suitably qualified professionals. This ensures that staff are well equipped with the skills and knowledge needed to meet children's increasingly complex

and changing needs. The workforce development lead is creative and has a well-planned approach to staff development, ensuring that training is appropriately pitched and enables staff to understand, apply and build on their learning effectively.

Leaders demonstrate effective professional challenge by strongly advocating for the children's needs. The registered manager used clear, well-evidenced information to oppose an extension of a child's order, resulting in the order not being extended and the local authority being directed to source a suitable placement. This ensured the secure setting was not used as a holding placement and supported positive outcomes for the child.

The independent advocate engages with children through informal discussions to ensure their views, wishes and feelings are heard, recorded and acted upon. Furthermore, they represent children's voices during meetings effectively.

Supervision sessions are held regularly and provide staff with an opportunity to reflect on their wellbeing and set targets for professional development. However, sessions do not routinely focus on children's experiences, progress or safeguarding concerns. As a result, opportunities to link staff practice directly to outcomes for children are missed.

## What does the secure children's home need to do to improve?

### Recommendations

- The registered person should ensure that education leaders implement a robust workforce contingency plan to manage staff absences effectively, so that the quality and continuity of teaching, particularly in core subjects, are maintained. ('Guide to the Children's Homes Regulations, including the quality standards', page 53, paragraph 10.8)
- The registered person should ensure that education leaders are tracking and monitoring children's progress to ensure that children can make rapid and sustained progress that enables them to achieve their aspirations. ('Guide to the Children's Homes Regulations, including the quality standards', page 26, paragraph 5.2)
- The registered person should ensure that supervision sessions are reflective, focused on staff practice, and responsive to the needs of the children for whom they are responsible. ('Guide to the Children's Homes Regulations, including the quality standards', page 61, paragraph 13.2)
- The registered person should ensure that management reviews of physical interventions are used to identify lessons learned and to improve staff practice so that it meets each child's individual needs. This includes ensuring that children who are not involved in an incident are promptly moved to another area. ('Guide to the Children's Homes Regulations, including the quality standards', page 49, paragraph 9.59)
- The registered person should ensure that staff consistently assess and review risks to each child and the arrangements in place to protect them. Where there are safeguarding concerns, the child's placement plan, agreed between the home and the placing authority, should clearly set out how identified risks are managed on a day-to-day basis. Where single separation is used, and particularly where its use would be unlawful, management decision-making should be clearly evidenced. ('Guide to the Children's Homes Regulations, including the quality standards', page 42, paragraph 9.5)

### 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'.

## Secure children's home details

**Unique reference number:** SC033457

**Provision sub-type:** Secure Unit

**Registered provider:** Leeds City Council

**Registered provider address:** Merrion House, Merion Centre, Leeds LS2 8LX

**Responsible individual:** Benjamin Finley

**Registered manager:** Francis N'Jie

## Inspectors

Gemma McDonnell, Social Care Inspector

Leanne Lyon, Social Care Inspector

Debbie Foster, Social Care Inspector

Hayley Lomas, Further Education and Skills

Danial Carrick, Care Quality Commissioner

Jo Stephenson, Regulatory Inspection Manager, Quality Assurance Manager

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