What We Do

The Regulation and Quality Improvement Authority (RQIA) is the independent body that regulates and inspects the quality and availability of Northern Ireland’s health and social care (HSC) services. We were established in 2005 under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to drive improvements for everyone using health and social care services.

Through our programme of work we provide assurance about the quality of care; challenge poor practice; promote improvement; safeguard the rights of service users; and inform the public through the publication of our reports. RQIA has three main areas of work:

- We register and inspect a wide range of independent and statutory health and social care services.
- We work to assure the quality of services provided by the HSC Board, HSC trusts and agencies - through our programme of reviews.
- We undertake a range of responsibilities for people with mental ill health and those with a learning disability.

We inspect and report on the following four domains:

- Is care safe?
- Is care effective?
- Is care compassionate?
- Is the service well led?

RQIA registers and inspects a wide range of health and social care services. These include: nursing, residential care, and children’s homes; domiciliary care agencies; day care settings/centres; independent health care; nursing agencies; independent medical agencies; residential family centres; adult placement agencies; voluntary adoption agencies, school boarding departments and young adult supported accommodation (inspected only).
The Four Domains

**Is care safe?**
Avoiding and preventing harm to service users from the care, treatment and support that is intended to help them.

**Is care effective?**
The right care, at the right time in the right place with the best outcome.

**Is the service well led?**
Effective leadership, management and governance which creates a culture focused on the needs and the experiences of service users in order to deliver safe, effective and compassionate care.

**Is Care Compassionate?**
Service users are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.
How We Will Inspect

We will inspect every boarding department on an annual basis, this will be an announced inspection.

During our inspections we will inspect and report on the following four domains:

- Is care safe?
- Is care effective?
- Is care compassionate?
- Is the service well led?

When we inspect a boarding department, we aim to:

- Seek the views of the boarders who use the service, or their parents
- Talk to the principal, the head of boarding and other key staff on the day of the inspection
- Examine a range of records including incidents, complaints and policies related to boarding
- Provide feedback on the day of the inspection to the principal and head of boarding on the outcome of the inspection; and
- Provide a report of our inspection findings and outline any areas for quality improvement where failings in compliance with regulations and/or standards are identified.

Our inspections are underpinned by:

- The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Children Order (Northern Ireland) 1995
- Inspection of Premises, Children and Records (Children Accommodated in Schools) Regulations (Northern Ireland) 2000
- Children Order Guidance and Regulations Volume 7
- The Department of Health, Social Services and Public Safety's (DHSSPS) Quality Living Standards for Services: Children Accommodated in Schools with Boarding Departments
What We Look For When We Inspect

To help us to report on whether the care is safe, effective and compassionate and whether the service is well led, we will look for evidence against the following indicators. The evidence listed for each indicator provides examples of what may be reviewed and should not be considered exhaustive.

<table>
<thead>
<tr>
<th>Is Care Safe?</th>
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<td>Avoiding and preventing harm to service users from the care, treatment and support that is intended to help them.</td>
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**Indicator S1**
There are, at all times, suitably qualified, competent and experienced persons working in the service in such numbers as are appropriate for the health and welfare of service users.

**Examples of Evidence**

**Staffing**

- An annual training programme is in operation which includes safeguarding and relevant issues such as bullying and child sexual exploitation
- There are robust human resource policies and procedures in place to ensure:
  - the deployment of staff who have requisite skills and experience and qualities to undertake their duties
  - there are always sufficient numbers of staff available to meet the needs of the boarding department
  - staff demonstrate compliance with professional codes of practice

**Recruitment and Selection**

- Enhanced Access NI checks are received prior to new staff commencing work
### Indicator S2
The service promotes and makes proper provision for the welfare, care and protection of service users.

#### Examples of Evidence

**Safeguarding**

- Staff are knowledgeable about and have a good understanding of safeguarding and bullying
- All suspected, alleged or actual incidents of abuse are fully and promptly referred to the appropriate agencies for investigation in accordance with written procedures and records maintained
- Co-operating to Safeguard Children and Young People in Northern Ireland, 2016 and the Area Child Protection Committee (2005) Regional Child Protection Policies and Procedures are available at the boarding department and there is a child protection policy in place to meet the needs of the boarding department
- A designated child protection teacher is in place
- There is a strategy in place for the prevention of bullying and written policies and procedures for countering any incidents of bullying as they occur
- There are written policies and procedures in place in respect of safeguarding, allegations of misconduct, incidents, whistle blowing and the reporting/management of serious adverse incidents. These policies are included in the induction/training manual for staff
- There is a record of staff attendance at mandatory safeguarding training
- Investigations into allegations or suspicions of harm are handled fairly, consistently and quickly in a way which safeguards the boarders and the person making the allegation whilst the same time appropriately supporting the staff member who is the subject of the allegation
- Written records are created and available in respect of any investigation including outcomes and subsequent action taken by the boarding department. A register of all incidents and the response from the boarding department is maintained

### Indicator S3
There are systems in place to ensure that unnecessary risks to the health, welfare or safety of service users are identified, managed and where possible eliminated.

#### Examples of Evidence

**Management of Health Care Needs**

- Each boarding department has a matron or other designated person(s) who provide routine medical attention to the boarders
- An up to date medical record is maintained for all boarders

### Indicator S4
The premises and grounds are safe, well maintained and suitable for their stated purpose.

#### Examples of Evidence

**Environment**

- The boarding department is clean, clutter free, warm and pleasant
- There are no obvious hazards to the health and safety of the boarders
## Is Care Effective?

The right care, at the right time in the right place with the best outcome.

### Indicator E1

The service responds appropriately to and meets the assessed needs of the people who use the service.

#### Examples of Evidence

**Records**

- An up to date individual record is maintained for each child accommodated in the boarding department
- Recordings are in line with professional codes of practice

### Indicator E2

There are arrangements in place to monitor, audit and review the effectiveness and quality of care delivered to service users at appropriate intervals.

#### Examples of Evidence

- Monitoring and review mechanisms are in place to identify and redress areas of non-compliance with the standards and guidance for boarding schools
- Where relevant staff members have been trained in and understand how to work with boarders who experience particular vulnerabilities or have more complex needs

### Indicator E3

There are robust systems in place to promote effective communication between service users, staff and other key stakeholders.

#### Examples of Evidence

- The boarders have an effective feedback mechanism through which they can communicate with the staff about their experience at the school and redress any grievances
- Staff meetings are held on a regular basis, issues arising within the boarding department are discussed and minutes are retained
- Staff communicate in a timely and effectively way with the boarders
- Learning from complaints/incidents/near misses is effectively disseminated to staff
## Is Care Compassionate?

Service users are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

<table>
<thead>
<tr>
<th>Indicator C1</th>
<th>There is a culture/ethos that supports the values of dignity and respect, independence, rights, equality and diversity, choice and consent of service users.</th>
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</table>
| **Examples of Evidence** | **Discussion with staff members and observation of interactions demonstrate that boarders are treated with dignity and respect**  
**There is evidence of staff awareness of children’s rights**  
**Staff at the boarding department are aware of acting in the best interests of the boarders**  
**Staff make positive relationships with the young people in the department and generate a culture of openness and trust**  
**The boarders know how to contact helpline services** |

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<tr>
<th>Indicator C2</th>
<th>Service users are listened to, valued and communicated with, in an appropriate manner.</th>
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| **Examples of Evidence** | **There are arrangements in place for involving the boarders in making informed decisions**  
**There are arrangements for providing information in alternative formats/interpreter services, if applicable**  
**The boarders feel their views are valued and have been considered as part of decision making processes in the department** |

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<tr>
<th>Indicator C3</th>
<th>There are systems in place to ensure that the views and opinions of service users, and or their representatives, are sought and taken into account in all matters affecting them.</th>
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| **Examples of Evidence** | **The RQIA questionnaire responses support the view that compassionate care is in place**  
**Boarders are encouraged to approach any member of the boarding department staff with their personal concerns, needs and wishes on an informal basis** |
Is the Service Well Led?

Effective leadership, management and governance which creates a culture focused on the needs and the experiences of service users in order to deliver safe, effective and compassionate care.

**Indicator L1**
There are management and governance systems in place to meet the needs of service users.

**Examples of Evidence**

**Governance Arrangements**

- There are governance arrangements in place such as:
  - clearly identified lines of professional accountability
  - effective systems to monitor and report on the quality of care experienced by boarders in the department
  - Policies and procedures in place to protect boarders and to safeguard their rights and welfare in line with regional child protection procedures
  - effective systems for identifying any escalation in risk to individual boarders including bullying and mental health

**Complaints**

- The department has a complaints policy and procedure in accordance with the standards
- Records are kept of all complaints and these include details of all communications with complainants, the result of any investigation, the outcome and the action taken
- Information from complaints is used to improve the quality of care at within the boarding department
- Staff know how to receive and respond to complaints
- Arrangements are in place to audit complaints to identify trends and enhance the boarding experience

**Equality of Opportunity for Young People**

- The home is aware of equality legislation and recognise and respond to the diverse needs of young people
- The home collects equality data on young people
- Staff are trained to effectively engage with the diverse range of young people
- The home manages and monitors equality issues raised by young people or their relatives/representatives as required

**Incidents**

- The department has an incident policy and procedure in place
- Incidents are effectively documented and where necessary investigated in line with the standards and guidance

**Indicator L2**
There are management and governance systems in place that drive quality improvement.

**Examples of Evidence**

**Quality Improvement**

- There is evidence of a systematic approach to the review of the boarding experience, in order to make changes that improve quality, and add benefit to the department
- The Head of Boarding encourages continuous improvement within the department. Improvement activity is focussed on enhancing the boarding experience
### Indicator L3
There is a clear organisational structure and all staff are aware of their roles, responsibility and accountability within the overall structure.

**Examples of Evidence**
- There is a defined organisational and management structure that identifies the lines of accountability, specific roles and details responsibilities within all areas of the department
- Staff are aware of their roles and responsibilities and actions to be taken should they have a concern about the welfare or safety of a boarder
- The Principal and Head of Boarding understand their role and responsibilities as outlined in the standards and guidance

### Indicator L4
The registered person/s operates the service in accordance with the regulatory framework.

**Examples of Evidence**
- The Principal and Head of Boarding respond to regulatory matters (e.g. reports and quality improvement plans)
- There are clear and documented systems in place for the management of records in accordance with the standards and guidance

### Indicator L5
There are effective working relationships with internal and external stakeholders.

**Examples of Evidence**
- There is a whistleblowing policy and procedure and staff are aware of this
- Arrangements are in place for staff to access the Head of Boarding and Principal
- There are arrangements in place to support staff (e.g. staff meetings, appraisal and supervision)
- Discussion with staff confirmed that there are good working relationships and that senior staff are responsive to suggestions/concerns
Inspection Reports

Our inspection reports will reflect the findings from the inspection. Where it is appropriate, a Quality Improvement Plan (QIP) will detail those areas requiring improvement to ensure the service is compliant with the relevant regulations and standards. Where either no requirements or recommendations result from the inspection this will be reflected in the report.

It should be noted that inspection reports should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in a service. The findings reported on are those which came to the attention of RQIA during the course of the inspection. The findings contained within inspection reports do not exempt the service provider from their responsibility for maintaining compliance with legislation, standards and best practice.