The Regulation and Quality Improvement Authority

Children's Home Inspection Report

IN042999

13 December 2024

Information on legislation and standards underpinning inspections can be found on our website https://www.rqia.org.uk/

1.0 Service information

Service Type: Children's Home **Provider Type:** Independent Provider **Located within:** – Southern Health and Social Care Trust	**Manager status:** Registered

Brief description of how the service operates:

This home is registered as a small children's home as defined in The Minimum Standards for Children's Homes (Department of Health) (2023).

The children living in this home have been assessed as having physical and/or intellectual needs/disability and in need of short breaks in residential care.

Since the last inspection, the provider has submitted an application to vary the registration of the service to provide a medium term placement in addition to short breaks for a time limited period.

Children and young people will be referred to collectively as young people throughout the remainder of this report.

2.0 Inspection summary

An unannounced inspection took place on 13 December 2024 between 10.00 a.m. and 4.00 p.m. The inspection was conducted by a care inspector.

The inspection assessed progress with all areas for improvement identified during the last care inspection and to determine if the home had the necessary arrangements in place to deliver safe, effective and compassionate care and if the service was well led.

Three areas for improvement identified at the last care inspection were assessed; and the inspector concluded compliance had been achieved in relation to two areas. One area for improvement in relation to staff supervision arrangements was restated for a second time. Two new areas for improvement were identified in relation to a registered manager's application and short break review minutes.

The inspection process also included assessment of an application to vary the registration of the service. The application sought to temporarily change the registration of this service to provide a medium term placement in addition to short breaks for a time limited period. Discussions with the management team provided assurance that governance arrangements

were effective, and staffing levels were safe and appropriate for the provision of care, aligned to the intended statement of purpose for this service. The application to vary the registration remained under review at the time of writing this report.

A range of documents were examined to determine if effective systems were in place to deliver safe, quality care. The inspector concluded there was safe, effective and compassionate care delivered in the home and the home was well led by the management team.

The findings of this report will provide the management team with the necessary information to improve staff practice and young people's experience.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

In preparation for this inspection, a range of information about the service was reviewed to help plan the inspection.

A range of documents were examined to determine that effective systems were in place to manage the home and deliver safe care.

RQIA inspectors seek to speak with young people, their relatives/carers, visitors and staff for their opinion on the quality of care and their experience of living, visiting or working in this home.

Information was provided to young people, relatives/carers, staff and other stakeholders on how they could provide feedback on the quality of care and support in this home. This included questionnaires and an electronic survey.

The findings of the inspection were discussed with the manager at the conclusion of the inspection.

4.0 What people told us about the service

The inspector spoke with young people and staff. Young people who were less able to tell us about how they found life in the home were seen to be relaxed in their surroundings, engaged well with staff and took part in activities they enjoyed.

Discussions with staff confirmed that they were aware of their roles and safeguarding responsibilities. They provided a positive view regarding the care provided to young people, and the support and guidance available from the management team.

Staff reflected that there were was good morale amongst the team. Staff provided a view that robust arrangements were in place to provide ongoing guidance and support, and ensure quality care was maintained during the transition period.

No feedback was received by RQIA via questionnaires or electronic survey post inspection.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

Areas for improvement from the last inspection on 22 February 2024		
Action required to ensure compliance with The Minimum Standards for Children's Homes (Department of Health) (2023)		**Validation of compliance**
Area for Improvement 1 **Ref:** Standard 17.11 **Stated:** First Time	The registered person shall ensure that all staff are equipped with the skills and training required to meet the assessed needs of the young people. Action should be taken to address deficits in bank staff's CALMS and Moving and Transferring training.	**Met**
	Action taken as confirmed during the inspection: This area for improvement was met.	
Area for improvement 2 **Ref:** Standard 16.7 **Stated:** First Time	The registered person shall ensure that the manager can receive professional social work supervision.	**Not met**
	Action taken as confirmed during the inspection: This area for improvement was not met and will be stated for a second time.	
Area for Improvement 3 **Ref:** Standard 21.10 **Stated:** First Time	The registered person shall ensure that a record is kept of the results of investigations; action taken and the level of a complainant's satisfaction with the outcome, in order to ensure robust governance of complaints.	**Met**
	Action taken as confirmed during the inspection: This area for improvement was met.	

5.2 Inspection findings

5.2.1 How does the service ensure that there are robust management and governance arrangements in place?

A change in the management team was anticipated, however the inspection findings provided assurance that effective arrangements were in place in the interim to ensure continuity of leadership and stability for staff. The forthcoming absence of a registered manager was notified to RQIA in accordance with the regulations, and clearly described the interim arrangements in place. An area for improvement was identified however, in relation to ensuring an application to register an individual as manager was submitted to RQIA without delay.

In line with The Minimum Standards for Children's Homes (2023), robust human resource policies and procedures should be in place to ensure supervision arrangements for staff are compliant with Department of Health (DOH) policy and guidance, professional codes of practice and employment legislation. The Social Work (NI) Supervision Policy 2024 (DoH) identifies that where social workers are line managed by a different discipline, they must also be provided with professional social work supervision. Discussion with the manager identified that whilst they received regular operational supervision, there was no longer provision in place for the manager to receive professional social work supervision. This area for improvement was therefore stated for a second time.

5.2.2 How does the service ensure young people are getting the right care at the right time?

The service supports young people with diagnosed, complex conditions, behaviours that challenge, and who may also have experienced trauma. Short break reviews are held regularly to ensure that each young person's welfare is safeguarded and promoted in the most effective way throughout the period they are cared for. Important issues and decisions are discussed and agreed within this forum to ensure that the care and support provided by staff continues to meet each young person's assessed needs.

The manager raised concerns about difficulty accessing records of review meeting minutes in a timely way from a Health and Social Care Trust (HSCT), despite ongoing efforts to improve this. Given the importance of good governance and record keeping to support effective communication between the service, and key stakeholders regarding the needs of the young people, it is essential that the service maintains a record of the review meeting to ensure all relevant information can be shared as necessary with the staff team and young people's records are updated. Records of review minutes should be shared with the service within timescales and this matter requires escalation to the provider's senior management representatives, and to the relevant HSCT professionals for urgent resolution. An area for improvement was identified.

The service evidenced that a robust matching process is followed when planning the admission of a young person to the service, ensuring compatibility with other young people. The matching process took into account and considered the needs of the group of young people, staffing levels and skill mix within the staff team. Potential risks and benefits for all young people were assessed, which enabled the service to determine which young people could be cared for at the

same time, and to identify any necessary mitigating actions to support positive outcomes for all young people.

Discussion with the manager provided assurance that group dynamics were appropriately managed to minimise disruption within the home, and ensured each young person received a quality short break, including access to purposeful activities and relaxation time when needed.

5.2.3 Application to vary the registration of the service

The inspection focus sought to assess a variation application to temporarily change the registration of this service to provide a medium term placement in addition to short breaks for a time limited period. The assessment included a desktop review of documentation; an inspection of the premises; discussions with staff and the young people; and sampling of care documentation.

The statement of purpose was reviewed and clearly described the nature and range of services to be provided and addressed all of the matters required by Regulation 4 of the Children's Home's Regulations (Northern Ireland) 2005. The young people's guide was informative and accessible to young people with a learning disability.

The home was well decorated and presented as a comfortable, homely space for young people. The use of festive decorations and music contributed to creating a warm and welcoming environment. Each young person had their own bedroom decorated in a young person centred way. A well maintained outdoor space, featuring accessible play equipment, was also available for the young people to enjoy.

The home was sufficiently staffed with the staffing ratio meeting the assessed needs of young people. Staff were readily accessible to young people when needed. A review of the training matrix provided assurance that the staff team had the necessary skills and experience to deliver the care approach described in the statement of purpose. Staff had access to a comprehensive training programme, including training tailored to the specific behavioural needs of the young people. The staff team including bank staff were compliant with training and refresher timescales, all of which supported staff to deliver safe, effective, and young person centred care that responded to individual needs and supported effective risk management arrangements. The service also dedicated protected time for the staff team to train together to ensure consistency of approach and promote co-ordinated care.

The inspection identified that the variation application to amend the service's registration was a temporary arrangement and steps to return the home to its original statement of purpose were being progressed. It was agreed that progress would be communicated to RQIA in a timely manner with respect to these actions. The application remained under review at the time of writing this report.

6.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with **The Children's Homes Regulations (Northern Ireland) 2005 and The Minimum Standards for Children's Homes (Department of Health) (2023).**

	Regulations	Standards
Total number of Areas for Improvement	1	2*

* the total number of areas for improvement includes one that have been stated for a second time.

Areas for improvement and details of the Quality Improvement Plan were discussed with the manager as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan

Action required to ensure compliance with The Children's Homes Regulations (Northern Ireland) 2005	
Area for improvement 1 **Ref:** Regulation 7 **Stated:** First time	The responsible person shall ensure that an application to register an individual as manager is submitted to RQIA without delay. Ref: 5.2.1
To be completed by: 28 March 2025	**Response by registered person detailing the actions taken:** Acting Registered Manager appointed to role of Childrens Services Manager starting on 03/03/25. They have commenced completing the application form to become Registered Manager on the portal.
Action required to ensure compliance with The Minimum Standards for Children's Homes (Department of Health) (2023)	
Area for improvement 1 **Ref:** Standard 16.7 **Stated:** Second time	The responsible person shall ensure that the manager can receive professional social work supervision. Ref: 5.2.1
To be completed by: 13 April 2025	**Response by registered person detailing the actions taken:** Childrens Service Manager receives operational supervision from the line manager (Assistant Director of Childrens Services). They also receive 4-6 weekly professional Social Work Supervison from a qualified Social Worker..
Area for improvement 2 **Ref:** Standard 13 **Stated:** First time	The responsible person shall ensure that a record of the outcomes/actions of short break review minutes are maintained within the young person's file. Ref: 5.2.2

To be completed by: 28 March 2025	**Response by registered person detailing the actions taken:** Management at the home continue to link with the Trust to ask for outstanding documents, some have been received, but a backlog remains. This is discussed at monthly meetings with the Trust. Acting Registered Manager will link with Operational Management if progress on this issue stalls. Staff attending reviews will note action/ outcomes in the children's file in the interim.

Please ensure this document is completed in full and returned via the Web Portal

The Regulation and Quality Improvement Authority
James House
2-4 Cromac Avenue
Gasworks
Belfast
BT7 2JA

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
@RQIANews