The Regulation and Quality Improvement Authority

Children's Home Inspection Report

IN043005

4 February 2025

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:** Health and Social Care Trust **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 had adverse childhood experiences which has resulted in them requiring residential care. Since the last inspection, the provider has submitted an application to the Regulation and Quality Improvement Authority (RQIA) to vary the registration of this service to change the age range of children accommodated in the home.	

2.0 Inspection summary

An unannounced inspection took place on 4 February 2025 between 10.30 a.m. and 4.30 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 was delivering safe, effective and compassionate care and if the service was well led. The inspection process also included assessment of an application to vary the registration of the service to change the age range of children accommodated in the home.

A range of documents were examined to determine if effective systems were in place to deliver safe, quality care. Discussions with the management team provided assurance that robust governance mechanisms and safe staffing arrangements were in place, aligned to the intended statement of purpose for this service. The application to vary the registration of this service was subsequently approved by RQIA following this inspection.

One area for improvement identified at the last care inspection was met in relation to storage. One new area for improvement in relation to staff training was identified.

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 manager with the necessary information to improve staff practice and children'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 children, 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 children, 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 children, relatives/carers and staff.

Children told us that they liked living in the home and that they had good relationships with staff. Staff were observed actively engaging with children and supporting their daily routines.

Relatives/carers told us that they were satisfied with the care provided and were updated by the staff about any changes to their children's care. They felt supported in their role and valued the support available from the specialist link worker in assisting communication and improving relationships with their children through support, guidance and education.

Discussions with staff confirmed that they felt positive about their roles, how children were being cared for, and support from the management team. An ethos of developing meaningful and secure relationships with children using age appropriate strategies was evident.

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 29 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 11 **Stated:** Second time	The responsible person shall review the storage issue within the office areas of the home and provide RQIA in the QIP response how this will be improved with outline timescales.	**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 children are getting the right care at the right time?

A culture of learning within a home encourages staff to continue to develop professionally in areas of specific interest and strengthen the overall skills and competence within the team improving outcomes for children. Staff training must reflect the needs of children, enabling staff to manage risks effectively. The staff training matrix and discussions with the manager evidenced that the staff team have received an induction and training in relation to key training areas such safeguarding, fire, infection prevention control (IPC), control of substances hazardous to health (COSHH), manual handling, medicines and first aid. Bespoke training had also been provided in the areas of Solihull, Northern Ireland Framework for Integrated Therapeutic Care (NIFITC) and Therapeutic Crisis Intervention (TCI). The training provided gave assurance that staff are skilled and equipped to deliver child centred, safe and effective care and support.

Whilst, it is acknowledged that the staff working in the home have access to guidance on harmful sexualised behaviour; it was not included as a key training area in order to meet the needs of the resident group. Training should be provided to all relevant staff, in line with their role and responsibility, in the area of harmful sexualised behaviour, to ensure that staff are equipped with the skills and training necessary to meet the assessed needs of the children. An area for improvement was identified.

Feedback from staff and the management team indicated effective communication arrangements within the team, ensuring staff were well informed about children needs and agreed interventions through daily handovers, regular supervision and weekly team meetings. The inspector was assured that the manager was committed to promoting a learning and development culture, was improvement focused and championed the importance of openness and reflective practice. The service was also preparing to pilot a plan aimed at the children's education needs and to improve their engagement with the education system. Progress in this area will be reviewed during future inspection activity.

5.2.2 How well are children cared for and protected?

Discussions with the management team and staff highlighted a rights-based approach to supporting children. This approach emphasised empowering children to develop risk competency, and reflect on how their behaviours and actions impact their wellbeing and the wellbeing of others. Partnership working with the Police Service of Northern Ireland (PSNI) was evident. Community policing provided preventative and educative work in the home with the children and future work was planned to support maintaining a good working relationship between staff and the PSNI.

Discussion with the manager provided assurance that the staff team adopt a child centred approach to risk assessment and decision making; and advocate for children to ensure that risk management plans were effective and dynamic to the risks posed. There was evidence of regular multidisciplinary collaboration to support children's holistic needs. Meetings were scheduled to assess needs and risks; and plan appropriate interventions aimed at achieving positive outcomes for the children. Records reflected an individualised and co-ordinated approach, involving relevant professionals to address the needs of the children with a trauma informed approach.

Safeguarding incidents were reviewed. The manager described responses taken and outcomes. Where applicable, the Co-operating to Safeguard Children and Young People in Northern Ireland (2024) policy was followed promptly. Staff spoken to during inspection were aware of their safeguarding role and responsibilities.

5.2.3 Does the service ensure that the home environment meets the needs of the children?

Children's homes should support children to develop the skills they need to thrive and succeed as they mature. Actions that restrict children should have clear justification based on a robust assessment of risk; with clear evidence that the restriction is proportionate; in place for the least amount of time; has a reduction plan in place (as appropriate); and is agreed with the multi-disciplinary team, in consultation with the children and relevant others. A robust review mechanism is also required which considers the effectiveness and impact of the restrictive practice.

A tour of the home noted restrictive practices were in place within the home. Discussion with the manager confirmed that restrictions in the home were underpinned by balancing potential safety risks and supporting the needs and preferences of the children that live there. The appropriate documentation was received post inspection that identified restrictive practices within the home were subject to a robust monitoring process to review and consider the effectiveness of the measures in place as well as considering the impact on the children.

The home was nicely decorated and presented as a comfortable, homely space for children to live; with soft furnishings being utilised to create a welcoming environment. A snug and sensory/games room was available to support the therapeutic needs of the children. There was also ample outdoor space that could accommodate the children's interests and activities.

5.2.4 Application to vary the registration of the home

The inspection process assessed an application submitted by the provider to vary the registration of this service to change the age range of children accommodated in the home. Assessment of the application included a desktop review of documentation; an inspection of the premises by a care inspector; feedback from staff and sampling of care documentation.

The service is registered as a small children's home and lends itself well to providing a therapeutic environment for children within the specified age range. The management team reported that staffing levels were adequate to meet the needs of the service and that staffing ratios would be regularly reviewed in line with the number of children, their individual needs and to mitigate effectively against identified risks, providing stability and consistent care for children and staff. Whilst there were some absences noted in the staff team, assurance was provided that an established group of bank staff were available to support the team. The rota was sampled and provided evidence that the staffing arrangements were consistent with the children's assessed needs.

Since the last inspection, the home had developed a specialist link worker role to establish positive working relationships and provide learning and support to children's families, carers and potential foster carers. Feedback from relatives/carers and discussions with the staff team highlighted that this was a valuable role and contributed to aligning the home with its described objectives, ethos and model of care described in its statement of purpose.

The application to vary the registration of the service was subsequently approved by RQIA.

6.0 Quality Improvement Plan/Areas for Improvement

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

	Regulations	Standards
Total number of Areas for Improvement	0	1

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 Minimum Standards for Children's Homes (Department of Health) (2023)	
Area for improvement 1 **Ref:** Standard 17.11 **Stated**: First time **To be completed by:** 4 May 2025	The responsible person shall ensure that training is provided to all relevant staff, in line with their roles and responsibilities, in the area of harmful sexualised behaviour to ensure that staff are equipped with the knowledge and skills necessary to meet the assessed needs of the children. Ref: 5.2.1
	Response by registered person detailing the actions taken: Manager has been in touch with the training team to explore options for this training and it is in process of being arranged. Likely timescale for all staff to complete this would be by end of June 2025.

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

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