The Regulation and Quality Improvement Authority

Children's Home Inspection Report

IN043802

22 October 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:** Health and Social Care Trust **Located within:** – Belfast Health and Social Care Trust	**Manager status:** Registered
Brief description of how the service operates: The children living in this home have had adverse childhood experiences which has resulted in them requiring residential care.	

2.0 Inspection summary

An announced inspection took place on 22 October 2024 between 10.00 a.m. and 16.00 p.m. The inspection was conducted by two bank inspectors.

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.

This inspection focused upon the arrangements in place to promote the health and wellbeing of the young people; how well the service supported young people to maintain positive health and wellbeing, and young people's access to services to meet their needs.

Review of records and discussion with the young people, staff and management team informed the inspection findings and provided assurance that the staff team adopted a young person centred approach to care.

There was evidence of a committed and caring approach tailored towards each young person's individual needs: staff spoke compassionately about the young people and knew them well. Works had been undertaken within the home since the last inspection to enhance the overall environment.

One area of improvement identified at the last care inspection with respect to recruitment practices was assessed, and the inspectors concluded compliance had been achieved in this area. One new area of improvement was identified with regards to the Statement of Purpose (SoP).

The inspection findings 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 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 inspectors spoke with young people, staff, the manager and deputy manager.

Feedback from young people provided a positive view of the care they received. Feedback included that young people felt safe and cared for within the home, listened to and involved in decisions regarding their care. They had opportunities to attend young people's meetings to discuss their views and opinions and had built positive relationships with both staff and other young people within the home. Observations of interactions between staff and young people demonstrated that young people were relaxed in the company of staff.

Feedback from staff was positive. Staff described there was a safe working environment within which they could express any issues or concerns they may have. Feedback included that the management team always had time to listen and staff felt supported and valued as a result. Induction processes were described as robust and had recently been updated following feedback from staff.

Staff reported effective working relationships with healthcare professionals, and general practitioners in the local area. Staff described these relationships enabled the staff team to promote the health and wellbeing of the young people, and ensure consistent and coordinated care.
However, some challenges were described in relation to accessing services for young people in a timely way upon admission to the home. This is discussed in further detail in section 5.2.1.

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 23 February 2024		
Action required to ensure compliance with The Children's Homes Regulations (Northern Ireland) 2005		**Validation of compliance**
Area for improvement 1 **Ref:** Regulation 25 **Stated:** First time **To be completed by:** 24 May 2024	The responsible person shall ensure there is evidence available to verify that all staff employed in the home are subject to robust safe recruitment practices prior to commencing their role in the home. This evidence should be available to review on inspection. Ref: 5.2.1	**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 promote and protect the health and wellbeing of young people?

Discussion with staff, the management team, and review of records provided assurance that a trauma informed approach to care was promoted within the staff team. The service had commenced the implementation of the Northern Ireland Framework for Integrated Therapeutic Care (NIFITC). The NIFITC Care Plan was in use and was completed and reviewed by staff with the young person. The plan identified goals, actions and the proposed therapeutic and developmental activities to support young people to reach their full potential.

Review of the Statement of Purpose (SOP) identified that this document required updating to ensure the service provided, and the use of NIFITC to inform the planning and delivery of care was clearly described. An area for improvement was identified.

Young people were supported to participate in a range of activities that could contribute to their physical and emotional health. Opportunities to attend leisure facilities were encouraged to promote physical activity. Young people's nutritional requirements and preferences were respected and prioritised; with young people being encouraged to develop menus, shop for ingredients and cook if they wished to do so. This approach not only supports young people to feel respected, valued and encouraged, but also supports young people to take age appropriate responsibility for, and develop independence skills, in relation to their diet and nutrition.

Young people had support from the Looked After Child (LAC) Nurse with regards to health assessment and health promotion, and opportunities to engage in targeted educational sessions were also available. Young people also had access to counselling, therapeutic services, and services specific to their cultural and health needs as required.

Young people were supported to access general practitioner and dental services where required. Whilst registering a young person with a local service could be challenging, young people were able to access necessary services in the event of an emergency. Staff reported they supported young people to understand their rights in relation to healthcare, to understand their own healthcare needs, and to make informed decisions regarding the most appropriate pathways to ensure their health needs were met. Challenges with respect to accessing key healthcare services within the local area had been escalated by the manager to the senior management team, and other relevant public bodies. Progress in this area will be monitored during future inspection activity.

Assurance was provided by the manager that all staff, including agency and bank staff, were subject to the same expectations in relation to their induction, training and supervision requirements. Training was recorded on an up-to-date matrix and staff were encouraged to take ownership of their own training. This approach was supported by oversight and governance in this area by the management team during supervision with staff.

Effective staff support mechanisms were in place and included regular supervision, appraisal, team meetings, psychological support, and reflective practice. These mechanisms supported learning and development for the staff team through reflection upon incidents for example and shared learning across the staff team.

Staff support and wellbeing was embedded within the culture of the service. Discussion with staff and the management team provided assurance the health and wellbeing of staff was a key priority for the service. Staff members had an individual "Well Being Plan" in place. This approach not only promoted a positive culture within the service, and ensured staff felt supported and valued within the team; the approach also supported the management team to identify potential challenges, triggers or stressors amongst the staff team, and enabled them to take timely and responsive action.

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.**

	Regulations	Standards
Total number of Areas for Improvement	**1**	**0**

Areas for improvement and details of the Quality Improvement Plan were discussed with 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 4 **Stated:** First time	The registered person must ensure that the Statement of Purpose is reviewed and updated where necessary to ensure the service provided is clearly described. Ref: 5.2.1
To be completed by: 30 January 2025	**Response by registered person detailing the actions taken:** The Statement of Purpose (SOP) for the Home has been updated by the Registered Manager to reflect the service provided and is available for viewing by all staff. There is a hard copy in the office and also an electronic copy on the shared drive. In addition, there is an on-going working group focusing on all SOPs within the service, to ensure alignment with the Northern Ireland Framework for Integrated Therapeutic Care. Any additional updates required to the SOP will be added following completion of this Task and Finish group.

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

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