



The Regulation and
Quality Improvement
Authority

Children's Home Inspection Report

IN045961

8 August 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: – South Eastern Health and Social Care Trust	Manager status: Not 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.	

2.0 Inspection summary

An unannounced inspection took place on 8 August 2024 between 10 a.m. and 3.30 p.m. The inspection was conducted by a care inspector.

The inspection assessed if the home was delivering safe, effective and compassionate care and if the service was well led.

One area for improvement identified at the last care inspection was carried forward to the next inspection, in relation to competency assessments for staff.

Two new areas for improvement were identified in relation to safe recruitment and the Statement of Purpose.

RQIA were notified on 28 June 2024 that the registered manager was no longer working in the home; and the provider proposed an identified person to carry on the role of manager on an interim basis.

The inspection findings provided assurance that the management arrangements were supporting the delivery of quality care in the home. However, RQIA raised concern that the identified person, could not meet the full requirements of the role of Registered Manager as detailed in The Children's Homes Regulations (Northern Ireland) 2005.

RQIA met with the service on 5 September 2024 and 30 September 2024. RQIA were assured that the provider had arrangements in place to support the management and leadership of this service in the short term; and that external social work support and expertise had been secured to support the manager in their role and continued professional development. RQIA were also assured that the organisation was committed to progressing further recruitment within the staff team to ensure that the staff arrangements were aligned to the Statement of Purpose; and to progressing, at pace, the recruitment of a suitability qualified individual to assume the role of Register Manager.

RQIA subsequently agreed with the provider that a condition would be added to the registration of the service. This condition confirmed RQIA had approved the acting management arrangement in this service, for a time limited period. The condition also confirmed there would be no new admissions to the service during this period. This approach will support the provider to progress recruitment of a suitably qualified individual to the post of manager.

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 and staff on the day of inspection.

Feedback from staff provided a positive view regarding support from the management team, the morale amongst the team and the quality of care provided to the children. Staff reported that the key support structures for staff to ensure quality of care to children were in place; such as, robust induction, training, supervision and team meetings.

Feedback from children identified that they liked the home and had good relationships with the staff. Children appeared comfortable in their surroundings and were observed interacting with staff in a relaxed manner.

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 8 November 2023		
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 17.10 Stated: First time	The registered person shall ensure that an assessment of staff competency is undertaken as part of induction to ensure staff have the necessary knowledge, skills, and values required to meet the assessed need of the children in their care. Ref: 5.1.2	Carried forward to the next inspection
	Action taken as confirmed during the inspection: This area for improvement was carried forward to the next inspection.	

5.2 Inspection findings

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

The daily logs and care records of children evidenced skilful and therapeutic engagement by staff which were supporting positive outcomes for children. The quality of recording was of a high standard and the detail reflected the children's needs and lived experience. Records evidenced that children were frequently offered age appropriate activities in line with their age and stage of development. Care plans and support plans were developed as the staff got to know the children and demonstrated a good understanding of the children's individual needs.

Records confirmed that children were provided with opportunities to share their views and opinions about matters which were important to them. Staff also aimed to gather their preferences, ideas and suggestions regarding matters that impacted on the running of the home. Advice was provided to ensure consistent recording amongst the team in order to evidence that the voice of the child is being captured and used to contribute towards the running of the home.

The Children's Guide had been updated, in consultation with children and independent advocates, in order to make it more child friendly and accessible.

5.2.2 How does the service ensure that safe staffing arrangements are in place?

Sampling of the rota and discussion with the manager confirmed that the number of staff on shift, was consistent with the staffing model and based on the assessed needs of the children. However, the home had a number of vacancies and was reliant on bank staff in order to fulfil the rota. Children thrive when they have access to consistent care givers and when they have the opportunity to form stable and enduring relationships. Assurances were provided that recruitment was ongoing in order to achieve permanency in the staff team and therefore maintain stability for the children.

Training records provided assurance robust arrangements were in place to monitor compliance with mandatory training requirements for the core staff team. However, gaps were identified in the compliance rates for bank staff in key training areas, such as, Therapeutic Crisis Intervention and the CARE Model. Assurances were provided that the home had plans in place to ensure all staff have the required training to meet the needs of the children. Progress in this area will be reviewed during future inspection activity.

Evidence was not available on the day of to confirm robust governance arrangements were in place with respect to staff recruitment. Supplementary evidence was provided post inspection to confirm the necessary safe recruitment checks, as identified in Regulation 25 of The Children's Home Regulations (Northern Ireland) 2005 had been undertaken. However, the current governance mechanisms in place require improvement to ensure that the manager has the necessary oversight, in order to be assured that all staff working in the home have been recruited safely, in accordance with legislation. This was identified as an area for improvement.

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

Children's spaces had been decorated to reflect their individual interests, and this approach helped to create a child centred, personalised and welcoming environment. Internally the home was well maintained and presented as a comfortable, homely space. The external spaces were well presented; and efforts had been made to maintain the garden; creating a space that was inviting for children.

Inspection of evidence identified that there were robust fire safety measures in place within the home. The fire file identified that there were regular fire drills completed, which included the children resident in the home and that daily and weekly fire checks were consistently completed.

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

Review of the Statement of Purpose identified that the information was not accurate, and required updating with respect to staff. This should be reviewed to ensure it accurately reflects the staffing arrangements within the home, and a revised copy submitted to RQIA. This was identified as an area for improvement.

Discussion with the manager and review of monitoring reports identified that there were robust external monitoring arrangements in place for the home. The home is subject to regular and robust external monitoring by the provider organisation and the host Trust. Sampling of the weekly summaries and incident reports also evidenced robust internal oversight by senior management within the provider organisation.

Team meeting minutes identified that staff were provided with regular opportunities to meet together as a group. Staff discussed the strategies agreed to support children, and reflected upon what is working well and what could be done differently. This is essential to ensure the effectiveness of the team and consistency of care provided to the children.

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	2	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 Children's Homes Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 25(3)(f) Stated: First time To be completed by: 21 November 2024	The registered person shall ensure governance arrangements with respect to staff recruitment are reviewed and improved. Records must be maintained to evidence safe recruitment of staff. Evidence of staff recruitment must be available for inspection. Ref: 5.2.2
	Response by registered person detailing the actions taken: CARE model training (Oct 2024 - that also included 1 member of the banking staff), and TCI training (Nov 2024), has been completed for new and recently recruited staff. The Acting Manager application to be given access to Access NI as a Counter signatory has commenced.
Area for improvement 2 Ref: Regulation 5 Stated: First time To be completed by: 7 November 2024	The registered person shall review, and where appropriate revise the Statement of Purpose to ensure it accurately reflects the staffing arrangements within the home. The revised Statement of Purpose must be submitted to RQIA. Ref: 5.2.4
	Response by registered person detailing the actions taken: This has been completed. Revised version submitted to RQIA on 7 th Nov 24.
Action required to ensure compliance with The Minimum Standards for Children's Homes (Department of Health) (2023)	
Area for improvement 1 Ref: Standard 17.10 Stated: First time To be completed by: 21 November 2024	The registered person shall ensure that an assessment of staff competency is undertaken as part of induction to ensure staff have the necessary knowledge, skills, and values required to meet the assessed need of the children in their care. Ref: 5.1
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.

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