The Regulation and Quality Improvement Authority

Children's Home Inspection Report

IN047907

14 April 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:** 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 had adverse childhood experiences which has resulted in them requiring residential care.	

2.0 Inspection summary

An unannounced inspection took place on 14 April 2025 between 9.30 a.m. and 6.30 p.m. The inspection was conducted by a care inspector.

RQIA had received intelligence in relation to the quality and safety of care delivered by the service which included concerns regarding care practices, the environment and staffing arrangements. In response to this information RQIA undertook an inspection which focused on the concerns raised.

The inspection identified significant concerns in relation to the strategies utilised by staff to manage challenging behaviour; governance of restrictive practices; responses to potential safeguarding or child protection concerns; the stability of staffing arrangements; and, the robustness of safe recruitment practices. Four areas for improvement were identified in relation to these concerns.

In addition, RQIA invited the provider's representatives to a Serious Concerns meeting on 29 April 2025. At this meeting, an action plan was presented by the provider which outlined the actions they had taken and further actions planned to address the concerns identified. RQIA provided feedback on the action plan; with the aim to support the provider to further strengthen the plan to ensure actions were supported by corresponding action owners, identified timescales and a robust review mechanism. RQIA were assured that the provider was cited on the challenges in the service and demonstrated a commitment to drive forward improvement in the service. This will be discussed in greater detail in the main body of the report.

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.

Interactions observed on the day of inspection indicated positive relationships existed between children and staff. Children were observed at ease and relaxed in their environment and in the presence of staff and they said that they liked living in the home.

Staff confirmed that there was good support available from the management team. They described that they had built positive relationships with children; however, acknowledged the challenges the service has faced in recent times with respect to managing challenging behaviour of young people, which is discussed in greater detail in the main body of the report.

The staff team reported that more opportunities to come together as a team would improve the consistency of the care provided to children. This feedback was discussed with the provider during the Serious Concerns meeting on 29 April 2025 and RQIA were provided with assurance that mechanisms to strengthen communication and reflection amongst the staff team had been identified.

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 15 January 2025		
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 12 **Stated:** First time	The registered person shall ensure the Children's Guide is adapted so that it is appropriate to the child's age and level of understanding.	**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?

Daily logs identified that the quality of recording was of a good standard and records reflected the children's lived experience within the home. There was evidence of children having positive relationships with staff and having ample opportunities to engage in activities in the community.

However, as outlined in section 2.0 the inspection identified significant concerns regarding the strategies utilised by staff in response to challenging behaviour; which included the use of restrictive practices. There was a risk that, at times, staff were unable to maintain observation of children and therefore could not be assured of children's safety and wellbeing during periods of distress or escalation.

Restrictive practice records did not provide assurance that the use of restrictive practices had been discussed and agreed by a multidisciplinary team, that there were clear plans in place to inform and guide staff intervention, or that restrictive practices were subject to ongoing monitoring or review. Furthermore, adverse incident records did not provide assurance that robust arrangements were in place to ensure effective incident analysis, support staff reflection and drive any necessary improvement in practice.

RQIA were not assured that responses to potential safeguarding or child protection concerns by the service were proportionate, timely or in line with regional child protection procedures and guidance. RQIA required assurance that any deficits within the current staff team knowledge, skill or competence, or any potential gaps within the service recording, reporting or governance arrangements had been identified and a responsive plan was in place to address these concerns.

As a result, RQIA invited the provider to a serious concerns meeting on 29 April 2025 to address the concerns identified. At this meeting, the provider gave an overview of the actions taken by the senior leadership team to better understand the challenges within the service with respect to behaviour management, safeguarding and staffing. The provider confirmed a decision had been made to cease any further admissions to the service in order to implement an action plan that had been identified by the provider to achieve stability, and ensure learning and improvement was embedded within the service.

The action plan submitted to RQIA, and the updated position as described by the provider at the meeting on 29 April 2025, provided assurances that the provider had taken action since the inspection to establish a plan that would support the organisation to identify, mitigate against and instigate remedial action to address the potential risks within the service. An updated plan, which was revised following feedback to the provider by RQIA was centred upon improving staff practice and strengthening internal and external governance mechanisms, with respect to incident management; restrictive practices; and safeguarding arrangements. This included, plans to implement a new model of crisis intervention; strengthening restrictive practice governance mechanisms; and ensuring safeguarding training meets the learning needs of the staff team.

It was agreed with the provider's representatives that the monthly reports on the conduct of the home, submitted to RQIA, in accordance with Regulation 32 (5) (a) of The Children's Home Regulations (Northern Ireland) 2005, will report upon the effectiveness of the action plan and/or any barriers to driving improvement. RQIA will also continue to monitor and review the quality of service provided in this home. Three new areas for improvement were identified in relation to, behaviour management, restrictive practices and safeguarding arrangements.

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

The inspection identified that the home did not employ a sufficient number of staff to provide care for the number of places for which they were registered. Furthermore, vacancies in the leadership team had created deficits in experience and knowledge within the staff team; with no staff member having the required experience and qualifications to deputise in the absence of the manager.

Evidence was not available on inspection that full and satisfactory information was available in relation to the recruitment of staff, in line with Schedule 2 of The Children's Home Regulations (Northern Ireland) 2005. Whilst this evidence was provided to RQIA post inspection, RQIA required assurance that robust governance arrangements were in place to ensure evidence was available and maintained that all staff working in the home have been subject to safe and robust recruitment practices.

As outlined in sections 2.0 and 5.2.1, RQIA invited the provider to a serious concerns meeting on 29 April 2025 to address the concerns identified.

The provider outlined the actions they intended to take to strengthen and stabilise the staff team and improve internal governance mechanisms for the safe recruitment of staff. The provider had also identified thresholds for future admissions to the service aligned to the statement of purpose and staffing model for the service. The provider confirmed there would be no admissions to the service until such times as a full staffing complement was available; which included bolstering the management team. Progress in this area will be monitored by RQIA. A new area for improvement was identified in relation to safe recruitment.

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

The home was well presented and efforts had been made to provide a welcoming and comfortable setting that was conducive to a therapeutic environment. A health and safety policy was in place and robust health and safety risk assessments with respect to, first aid, COSHH and outdoor areas were in place and available to staff.

Fire records evidenced that fire safety checks and drills were completed regularly and consistently. The fire risk assessment was up to date and the associated action plan had been completed.

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	3	2*

* the total number of areas for improvement includes one that has been carried forward for review at the next inspection.

Areas for improvement and details of the Quality Improvement Plan were discussed with the provider 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 16 **Stated:** First time **To be completed by:**	The registered person shall ensure robust processes are in place for the implementation and review of restrictive practices. Records should clearly evidence that: • it is implemented on the basis of an assessed need or risk related to the individual child for the shortest time period

23 June 2025	• it is the least restrictive option and all other options have been exhausted • it has been agreed with the multi-disciplinary team, the child and/or their representative • there is a timescale for review, which will involve review of its effectiveness/outcomes and the impact on the child. Ref: 5.2.1
	Response by registered person detailing the actions taken: Restricitive Practice recordings have been updated and agreed with Trust and MDT, ensuring any practices considered are the least restrictive intervention and for the least time possible. They are implemented only when all other interventions have been exhausted, and only when there is serious risk of harm to YP or staff. Following introduction of TCI practices, Individual Crisis Support Plans will be implemented with clear and robust plans laid out which will guide and support staff intervention. Regular (Quarterly) MDT meetings have been implemented with the addition of TCI specialist and Independent OT. Restricitve practices are discussed and reviewed during these meetings and reccommendations from MDT carried forward to be included in YP ICSP. Monthly management team meetings, with attendance from House Managers and Senior Leadership Team commenced, with set agenda to include the review of any/all restricitve practices carried out and ensure robust, justifible decision making and recording is available for each intervention and the impact of these interventions on the YP has been considered throughout.
Area for improvement 2 **Ref:** Regulation 16 **Stated:** First time **To be completed by:** 23 June 2025	The registered provider shall ensure that strategies utilised by staff to manage behaviours which challenge are in line with Volume 4 of the Children Order Guidance and Regulations and support the safety and wellbeing of children at all times. Ref: 5.2.1
	Response by registered person detailing the actions taken: The home core staff team are in the process of moving from GEARS Behavioural Support model of Practice and will be implementing TCI throughout the Organisation. To date, all exisiting home core staff who were trained in GEARS, have

	attended and passed TCI course. CEO and Operations Director have completed Train the Trainer course and are awaiting acreditation. Newly recruited staff members will be upskilled and TCI model of practice will be embedded within the service. This will support staff in using appropraite de-escalation and redirection techniques, and provide additional resources, re physical interventions, should they be required. Previous practices, which could have been considered as isolation, have been removed and YP is supported throughout times of stress & distress, by an appropriately trained staff member, ensuring safety of both staff and YP are considered and assessed as safe to do so.
Area for improvement 3 **Ref:** Regulation 25 **Stated:** First time **To be completed by:** 23 June 2025	The registered provider shall ensure evidence is available and maintained that all staff working in the home have been subject to safe and robust recruitment practices. Ref: 5.2.2
	Response by registered person detailing the actions taken: All required documentation for recruitment and retention of residential staff is up to date and available to Registered Manager on service online recording systems. Introduction of dual verification by Snr Managers that all required documentation is in place prior to commencement of employment of all new staff to ensure safe and robust recrutiment processes have been followed.. Introduction of recorded checks and sign off by Registered Manager ensuring all documents required by legislative and regulatory standards relating to Children's Homes, is in place and available for inspection and/or review.
Action required to ensure compliance with The Minimum Standards for Children's Homes (Department of Health) (2023)	
Area for improvement 1 **Ref:** Standard 12 **Stated:** First time	The registered person shall ensure the Children's Guide is adapted so that it is appropriate to the child's age and level of understanding. Ref: 5.1
To be completed by: 26 February 2025	**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.**

	Ref: 5.1.4
Area for improvement 2 **Ref:** Standard 4 **Stated:** First time **To be completed by:** 23 June 2025	The registered person shall ensure that the children's home is conducted so as to promote and make proper provision for the welfare of children accommodated there. This should include robust internal and external governance mechanisms, with respect to safeguarding arrangements. Ref: 5.2.1
	Response by registered person detailing the actions taken: All residential staff and management (including Snr Managers) have refreshed Safegurding training with particular focus on the service procedures for recording and reporting of any safeguarding concerns. Flowchart of reporting process has been produced and shared with staff team, along with designated officers contact details, and is visible within service office. Safeguarding concerns remains a regular agenda item on both monthly staff meetings and 1:1 support and supervision sessions with line managers. Safeguarding concerns and processes are added to monthly management meeting agenda with review and reccommendations carried forward to house teams.

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