



The Regulation and
Quality Improvement
Authority

Children's Home Inspection Report

IN048659

21 August 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: – South Eastern 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 unannounced inspection took place on 21 August 2025 between 9.45 a.m. and 4.45 p.m. The inspection was conducted by a care inspector.

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

No areas for improvement were identified as a result of this inspection.

The inspector concluded there was safe, effective and compassionate care delivered in the home and the home was well led by the management team.

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 on the day of inspection.

Feedback from staff confirmed there was good support available from the management team, and an open culture which supported staff to express their views on matters relating to the running of the home. Staff reported that the care provided to young people was person centred and compassionate. Morale was high amongst the staff team, and they described a settled staff team who support each other to provide the best possible care to the young people.

Feedback from young people provided a positive view regarding the relationships between young people and staff. They reported that staff were approachable, attentive and engaged young people in activities. Young people reported that the home was comfortable and that their views were considered and contributed towards the running of the home. Specific issues raised by young people were fed back to the manager at the conclusion of the inspection. The inspector followed up with the manager post inspection to ensure appropriate follow up action had been taken in relation to these issues.

5.0 The inspection

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

No areas for improvement from the last inspection on 19 June 2024.

5.2 Inspection findings

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

Young people's daily logs identified that the quality of recording was of a good standard and the detail reflected the young people's lived experience. These records, along with feedback from staff and young people, provided assurance that the staff team were committed to engaging with the young people in a therapeutic manner. Discussions with staff confirmed they knew the

young people well, how they liked to be cared for, and the agreed strategies that promoted their safety and wellbeing.

Records were available to support and direct staff in their interventions with the young people; such as, risk assessments and Individual Crisis Support Plans (ICSP). Evidence was available that these records were regularly reviewed and updated and were reflective of the current risks and needs of the young people. Review of records also confirmed that decisions regarding new admissions were informed by a comprehensive assessment of the young people's needs and that the needs of the young people who were already living in the home were considered and there was a focus on minimising any disruption.

Meeting records provided assurance that professionals involved in young people's lives met on a regular basis to discuss and review the therapeutic and care needs of young people. These meetings supported and informed child centred care planning.

Young people's meetings occurred regularly and were facilitated by staff in the home. The meetings provided an opportunity for the young people to raise any issues, express choices in regard to activities and influence the running of the home and delivery of care. Promoting young people's involvement and active participation in these meetings is essential for supporting young people to influence the way they are cared for and reinforce that their views and opinions matter.

Incident records evidenced that staff were responsive to immediate risks with robust action, reporting and recording by staff in response to challenging incidents. Records identified arrangements were in place to ensure robust governance and oversight of incidents by senior management and processes to ensure learning and feedback could be provided to staff.

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

Young people thrive when they have access to consistent caregivers and when they have the opportunity to form stable and enduring relationships. Sampling of the rota and discussion with the management team confirmed that the number of staff on shift, was consistent with the staffing model and based on the assessed needs of the young people. There was a consistent and experienced staff team available to the young people. Discussion with the management team and staff also provided assurance that responsive staffing arrangements were utilised in line with the risk prevalent within the home at any given time. This is essential to safeguard and promote the health and wellbeing of the young people and ensure adherence to safety plans.

Training records provided assurance robust arrangements were in place to monitor compliance with mandatory training requirements for the staff team in key areas such as safeguarding, therapeutic crisis intervention and fire training.

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

The home was nicely decorated and presented as a comfortable, homely space for young people to live; with soft furnishings being utilised to create a welcoming environment. Young people reported that their bedrooms were decorated in line with their wishes and feelings and that they were happy with the quality of the environment. A well maintained and welcoming outdoor space was also available to the young people.

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.

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

Team meetings occurred on a regular basis; they were well attended by staff and facilitated detailed discussions on pertinent issues relating to the home and young people. Bringing staff together on a regular basis is essential to maintaining good communication, developing a shared vision and informs the detailed and complex decisions that need to be made on a day-to-day basis to meet the needs of the young people.

Sampling of complaints records evidenced good governance, robust investigation and feedback being sought from complainants as part of the complaints process. This is good practice and supports the home to reflect upon what is working well, what could be improved and supports continuous learning and improvement within the service.

Children's homes should support young people to develop the skills they need to thrive and succeed as they mature and approach adulthood. Actions that restrict young people must have clear justification and be based on an assessment of risk, which evidences that the restriction is needed and proportionate. Restrictions must be regularly reviewed by a multi-disciplinary team and informed by consideration of young people's rights. Restrictive practice records identified that restrictions which were being implemented within the home were supported by a robust framework of recording, which evidenced decision making and review.

Handover records are a key communication tool between staff members across shifts to ensure that important information is shared effectively. Review of records identified a good standard of recording practices and audit arrangement to support the effective use of handover records as a robust tool for shift planning.

Evidence submitted post inspection provided assurance that robust mechanisms are in place regarding review and decision making in relation to the application of Serious Adverse Incident (SAI) criteria.

6.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with the manager as part of the inspection process and can be found in the main body of the report.

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