The Regulation and Quality Improvement Authority

Children's Home Inspection Report

IN048072

26 June 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 and young people living in this home have had adverse childhood experiences which has resulted in them requiring residential care. Children and young people will be referred to collectively as young people throughout the remainder of this report.	

2.0 Inspection summary

An unannounced inspection took place on 26 June 2025 between 9.15 a.m. and 4.30 p.m. The inspection was conducted by a care inspector.

Four areas of improvement identified at the last care inspection with respect to the appointment of a Registered Manager, Child Sexual Exploitation training, fire training and the Young People's Guide, were assessed as met. No new areas of improvement were identified.

Staff had a detailed understanding of young people's individual needs and positive relationships amongst staff and the young people were evident. Young people were supported by a stable, experienced, and qualified staff team. Care was individualised and young person specific. Staff presented as person centred within their approach and voiced a good understanding of each of the young people's individual needs.

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 the young people, the manager and staff during the course of the inspection. Young people, carers/relatives, visitors and staff also had the opportunity to provide feedback via a questionnaire. No questionnaires were received post inspection.

Feedback from young people during the inspection confirmed they enjoyed living in the home, and they felt supported and well cared for by staff. They described they could discuss any concerns they may have with their key worker as well as other staff in the team. On the day of inspection, young people were relaxed and comfortable in the home environment, were spoken to respectfully by staff, and good relationships with staff with staff were noted.

Staff feedback concluded that they enjoyed working in the home and they described good management support. Staff had regular supervision and an open door approach to supervision was encouraged. They advised that they were also encouraged to raise concerns, they were listened to, and their views were respected. Staff described the benefits of information sharing mechanisms, such as daily huddles, handovers and team meetings, in ensuring effective communication across the staff team. Staff confirmed they were encouraged to attend training and were supported to do so. Staff also reported a positive culture within the home; with staff working together to ensure young people were supported effectively to attend meetings about them, and be included in all aspects of their care.

5.0 The inspection

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

<table>
<tr><th colspan="3">Areas for improvement from the last inspection on 09 May 2024</th></tr>
<tr><th colspan="2">Action required to ensure compliance with The Children's Homes Regulations (Northern Ireland) 2005</th><th>Validation of compliance</th></tr>
<tr><td rowspan="2">Area for Improvement 1

Ref: Regulation 7

Stated: Third time

To be completed by:
09 November 2024.</td><td>The registered person shall ensure that a suitably qualified and competent person to come forward to RQIA for registration as manager.

Ref: 5.1 and 5.2.3</td><td rowspan="2">Met</td></tr>
<tr><td>Action taken as confirmed during the inspection:

This area of improvement was met.</td></tr>
<tr><th colspan="2">Action required to ensure compliance with The Minimum Standards for Children's Homes (Department of Health) (2023)</th><th>Validation of compliance</th></tr>
<tr><td rowspan="2">Area for Improvement 1

Ref: Standard 4

Stated: First time

To be completed by:
09 August 2024.</td><td>The registered person shall ensure that all relevant staff complete child sexual exploitation training.

Ref: 5.2.2</td><td rowspan="2">Met</td></tr>
<tr><td>Action taken as confirmed during the inspection:

This area of improvement was met.</td></tr>
<tr><td rowspan="2">Area for improvement 2

Ref: Standard 22.2

Stated: First time
To be completed by:
30 June 2024.</td><td>The registered person shall ensure that all relevant staff have completed fire training.

Ref 5.2.2</td><td rowspan="2">Met</td></tr>
<tr><td>Action taken as confirmed during the inspection:

This area for improvement was met.</td></tr>
</table>

Area for improvement 3 **Ref:** Standard 15.4 **Stated:** First time **To be completed by:** 09 July 2024.	The registered person to ensure that the young people's guide is updated. The information provided must comply with the Minimum Standards for Children's Homes (Department of Health) (2023) and be appropriate to each young person's age and understanding. Ref 5.2.3	**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 staff have the necessary training and support to meet the needs of the young people?

A robust system was in place to support staff learning and development. A training matrix was reviewed which monitored compliance with training and each staff member had an individual training plan. The management team reviewed training on a regular basis and it was evident what training was required by staff, date of completion, and the required frequency.

The management team confirmed that training and learning opportunities for staff were supported and promoted with staff being actively encouraged to attend training.

Training required to meet individual specific health needs of young people was supported by the Looked After Children's (LAC) nurse. Competency training was in place; which included knowledge and skills training as well as practical sessions as indicated. This approach ensures staff can be confident and competent in delivering care.

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

The home was clean, tidy, warm and well maintained. There were a number of communal areas which young people could use, both downstairs and upstairs. A "quiet" room was available which was used frequently by young people. It was a calm space with comfortable seating, soft lighting and mindfulness activities where young people could relax, focus and practice mindfulness techniques. This area also provided a space where young people could spend time with their key worker or another member of staff and discuss concerns or worries.

Young people also had access to a “young persons” kitchen where they could prepare food and develop independence skills.

Young people’s bedrooms were accessorised to meet their individual tastes and preferences. There was a small paved area outside which the young people could use, and gym equipment was also available.

Review of fire safety records identified that regular fire safety checks were in place and were carried out weekly. An evacuation plan was also in place.

5.2.3 How does the service promote and protect the health of the young people?

Young people’s care records and risk assessments were reviewed. Health needs were clearly identified within records and referrals to health professionals, specialist teams and referrals to other agencies were documented.

The manager confirmed that a comprehensive assessment of the young person’s health needs prior to admission would be completed. This included review of any health concerns, any impact upon the young people’s health or wellbeing, with a detailed plan in place for treatment and care. Young people were registered with a General Practitioner (GP) on admission.

The LAC Nurse provided support, advice and training for specific, individual health issues identified; and staff reported that they had good relationships with the LAC nurse. The LAC nurse’s health assessment also evidenced input by the young person regarding their health needs, care plan and discussion regarding effects of certain health behaviours.

Discussion with the manager and staff provided assurance that young people were actively encouraged to be involved in the review of their health needs, were encouraged to attend review meetings, and were supported by staff at these meetings.

The implementation of the Northern Ireland Framework for Integrated Therapeutic Care (NIFITC) had been progressed within the home with positive effect. The assessment of young people’s health and wellbeing needs and their progress was supported by this framework.

Young people also had the opportunity to complete information regarding what was important to them, their strengths, feelings, and hopes for the future; as well as what would make them feel comfortable within the home.

Risk assessments were sampled and clearly identified the nature of risk and risk behaviours. Triggers for such behaviours were detailed, strategies to reduce the risk of harm, and input of the young person regarding their understanding of the behaviour, was recorded with an agreed plan of care.

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

The care and support observed on the day of the inspection was young person centred and fostered a culture within the home that was supportive, inclusive and respectful.

The manager and staff advised that processes were in place to support the delivery of effective, consistent care to the young people. Staff handovers, regular huddles, team meetings, supervision and reflective practice forums were all in place. These forums supported effective communication and provided space for issues and concerns to be discussed, opinions to be expressed, and a consistent approach in respect to how care is delivered and maintained.

Staff confirmed that they were encouraged to discuss concerns, ideas, and they felt listened to and valued as a member of the team.

The use of audits supports a systemic and structured approach to assess, evaluate and improve the quality of care. Young people's file audits, weekly medication file audits, fire safety checks and environmental risk assessments were all in place and up to date. Complaints were also recorded within the home with actions taken to resolve the complaint and outcome detailed. Young people are also encouraged to raise concerns. Learning from complaints and incidents was shared at the team meeting with learning and corresponding actions identified and progressed.

It is important that feedback from young people is captured and acted upon to shape how care is delivered in the home and improvements made. This approach empowers young people to have ownership over their own lived experience in the home. The manager advised that young people's meeting were held on a regular basis with young people encouraged to discuss what was working well and what areas could be improved within the home.

A positive culture was observed during the inspection with good relationships noted with the young people.

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.

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