The Regulation and Quality Improvement Authority

Children's Home Inspection Report

IN048693

30 March 2026

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:** – Northern Heath and Social Care Trust	**Manager status:** Not registered
Brief description of how the service operates: The children living in this home may have had adverse childhood experiences and have been assessed as in need of 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 30 March 2025 between 11:45 a.m. and 4.00 p.m. The inspection was conducted by two care 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.

The two areas for improvement identified at the last care inspection were met in relation to redecoration of bedroom hallways and young people expressing their views and receiving feedback regarding their home and delivery of care.

The inspectors observed the staff providing person centred support and care for young people living in the home. The interactions between staff and young people and staffs discussions with inspectors provided evidence staff had a detailed understanding of young people's individual needs, were able to adapt their approach to ensure young people received the right care at the right time and positive relationships were evident. Children were supported by a stable, experienced and qualified staff team.

One new area for improvement was identified in relation to the provider establishing a planned approach to maintaining a homely environment, which is well maintained and decorated. Inspectors identified while the decoration of the bedroom hallways was completed the provider

has not implemented a planned schedule of works to maintain other areas of the home, which have subsequently become in need of maintenance and décor.

The inspectors 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 management team with the necessary information to improve staff practice and young people's lived 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 regarding the quality of care and support in this home, this included questionnaires.

The findings of the inspection were discussed with the manager/ person in charge at the conclusion of the inspection.

4.0 What people told us about the service

The inspector spoke with young people, staff and the management team. Feedback provided a positive view regarding care and support provided. The staff team presented as supportive, they were focused on delivering care using trauma informed practice and a person centred approach, which young people responded to positively.

Discussions with staff confirmed that they felt positive about their roles, how young people were being supported, and their access to managerial support. The team promoted a culture of learning, development and collective leadership.

Young people told us that they liked living in the home and they felt that the team really cared about them. They said that there were good relationships with staff and management. Young people provided feedback about their lived experience, which was fed back to the management team to support future delivery of care.

Young people were observed to be relaxed in their surroundings and engaged well with staff.

No feedback was received by RQIA via questionnaires 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 20 February 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 1 **Stated:** First time **To be completed by:** 17 April 2025	The registered person shall ensure that evidence is maintained that young people receive feedback and can express their views on actions taken, planned or considered, in response to issues young people raise regarding the running of the home and delivery of care. Ref: 5.2.1	**Met**
	Action taken as confirmed during the inspection: This area for improvement was met.	
Area for improvement 2 **Ref:** Standard 11 **Stated:** First time **To be completed by:** 15 May 2025	The registered person shall ensure that the bedroom hallways are redecorated so that young people can live in a well maintained, homely environment. 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 young people are getting the right care at the right time?

Children and young people were supported to make positive and safe life choices. The young people's care plans inspected provided evidence that young people's independence was upheld and young people were supported to safely navigate physical limits and risks they face in their life. Feedback from staff provided assurance that safe care plans were continuously reviewed and changes were well communicated within the team during handovers, team meetings and through email communication. Discussions with young people and staff provided evidence engagement with safe care plans had contributed to a reduction in incidents for some young people.

The ethos of the home promotes a proportionate and consistent approach in managing behaviour, which is explained to and understood by all young people and staff. Individual crisis management plans assist staff to support young people's safety and wellbeing. The plans outlined how best to support and keep young people safe daily, as well as at times of crisis. The plans considered young people's individual needs, including clear guidance and pre-agreed harm reduction strategies. Advice was given to the management team regarding the inclusion of permissible holds for young people, to ensure the staff team are fully appraised of the right approach, if the need arises.

The young people are supported to regularly access education and employment by the home. Staff had proactively engaged with the young people's educational setting and advocated for young people to help overcome any problems regarding access or difficulties the young people may be experiencing in their educational setting.

There are regular young people's meetings, which staff support all young people to attend and support them to communicate their views and ideas. These 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.

Inspectors provided advice to the management team regarding sensitivities around sharing young people's information and lived experience, the management team welcomed this and assured the inspectors their approach would be reviewed.

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

The recruitment of a registered manager has been completed and an application from the successful candidate will be submitted following this inspection. The current management team provided evidence of their current staffing model, the staff competency framework for new and existing staff, and the training and development programme for all staff

The homes staffing model and approach is based upon collective leadership, this means the staff team work collaboratively to ensure the young people receive the right care at the right time. This approach ensures all staff are empowered to lead and collaborate with others to make decisions they may have otherwise deferred to a shift coordinator. The management

team confirmed the staff are clear regarding their role and responsibilities on shift and this model is subject to ongoing review.

The home was staffed by permanent and bank staff, the management team provided assurance each shift is staffed by a group who together have the skills, experience and professional qualifications to work effectively together to meet the children's needs. In conclusion the inspectors were assured the overall number, competence and deployment of staff across shifts fulfils the home's Statement of Purpose and purposefully meets the individual needs of all young people resident there.

Discussions with staff noted no concerns around staffing levels which were clearly aligned to the current dynamics of the home. The management team oversee rota arrangements ensuring overtime is appropriate and use of annual leave is promoted. A new cohort of newly qualified Social Work (Assessed Year in Employment) staff have been welcomed and the team supports a culture of learning and development.

Staff training records provided evidence the staff receive induction and training as detailed within the staff training and development programme. The management team described they ensure training is targeted to young people's needs, for example delivery of safeguarding training recently focussed on safeguarding children at risk of exploitation.

Recent changes in the management team have been well coordinated to ensure stability and consistency of care for young people ensuring that young people have access to their caregivers when needed.

Discussions with staff described a supportive and visible management team who have knowledge of the challenges faced by the team. The staff confirmed the management team are accessible and provide appropriate support in the form of supervision, reflective practice and team meetings. The records inspected verified these support mechanisms were in place.

5.2.3 The home environment meets the needs of the young people?

Office space within the home is designed to minimise an "institutional" feel. Staff were observed engaging with the young people living in the home throughout the inspection. The manager's office and meeting rooms are located away from the main living area with a separate door entry to minimise footfall within the main home. Nevertheless, the office areas can be accessed by young people and during the inspection they were welcomed in for a chat when they opened the door.

The home provides a comfortable and homely environment. The areas identified for redecoration during the last inspection presented as well maintained and decorated. However, other areas of the home are now in need of redecoration/ maintenance and the provider did not have a proactive approach or planned schedule of works to ensure the ongoing maintenance of the home, as set out within Standard 11 of The Minimum Standards for Children's Homes 2023. An area for improvement is made in this regard.

Inspectors observed young people's right to an appropriate level of privacy is respected with their own ensuite bedrooms, which they are helped to personalise.

The service utilises a holiday home for young people to promote relationships and ensure safeguarding at times of crisis.

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

The inspectors received feedback and observed that young people are encouraged to exercise choice in the food that they eat and are supported to prepare their own meals. Review of young people's meetings records and discussion with young people and staff confirmed the meetings were used as an opportunity for staff to engage with young people around personal choices and meal preferences.

Discussions with the management team provided assurance they were engaging with identified health and social care professionals and services to promote the health and wellbeing of young people. Staff are dedicated to supporting young people's individual needs and advocating for further support. There is access to specialist consultation on the psychological needs of children and young people on an ongoing basis. Young people's plans gave consideration to their health and wellbeing and provide guidance to the team on how best to support the young people. Safe care plans highlight immediate responses that are required by staff to reduce the risk of harm to young people.

Staff involved in delivering therapeutic interventions had received appropriate training and had access to regular supervision, furthermore the use of therapeutic interventions within the home is regularly reviewed.

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

Records reviewed and discussions with staff provided assurance that robust governance arrangements were in place that supported the delivery of effective and consistent care to the young people. Staff reported that handovers were detailed and focused on safe care planning for young people. Staff have access to team meetings, reflective practice and regular supervision, which enable staff to review their practice and make adjustments to the delivery of care, to ensure young people receive the right care at the right time to meet their needs.

Actions that restrict young people had clear justification for example were based on an assessment of risk which provides evidence the restriction is the least restrictive option available and proportionate to the risk. The homes restrictive practice framework promoted robust recording of decision making and review. Restrictions were regularly reviewed by a multi-disciplinary team, the family, and informed by the young people's rights.

The home adopts a proportionate approach to risk. Risk assessments sampled were individualised and comprehensive, with evidence of regular review ensuring actions were proportionate and person centred.

6.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with **The Minimum Standards for Children's Homes (Department of Health) (2023)**

	Regulations	Standards
Total number of Areas for Improvement	0	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.

Areas for improvement made as a result of this inspection may relate to The Department of Health's Minimum Standards for Children's Homes- Version 3 (April 2023).

Quality Improvement Plan	
Action required to ensure compliance with The Minimum Standards for Children's Homes (Department of Health) (2023)	
Area for improvement 1 **Ref:** Standard 11 **Stated:** First time **To be completed by:** 25 June 2026	The registered person will ensure the environment within the home is well maintained, in good repair and decoration. The provider should take action to ensure the homes environment is reviewed, identify works required and draw up a plan of works to be managed by the provider's maintenance service. The provider should ensure immediate maintenance requirements in the home are addressed without delay and minor works are scheduled within a reasonable timescale. Ref: 5.2.3
	Response by registered person detailing the actions taken: The registered manager is sastisfied that the current home environment is maintained to a good standard. Some minor areas requiring paintwork and general maintenance have been forwarded to Estates theough the appropriate maintenance process. The registered manager will continue to monitor the home environment on an ongoing basis and will keep any outstanding works under review. Should any issues arise, or should there be any delay in completion these will be escalated to senior management and or Estates as required to ensure the home remains well maintained safe, comfortable and homely.

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