The Regulation and Quality Improvement Authority

Children's Home Inspection Report

IN048897

11 December 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:** Western 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 and young people living in this home have been assessed as having physical and/or intellectual disability and in need of short breaks in residential care.

Children and young people will be referred to collectively as young people throughout the remainder of this report.

Since the last inspection, the provider submitted an application to RQIA to make a change to the registration of this service, to temporarily provide a medium to long term place alongside short breaks for an identified period. This application was approved by RQIA.

2.0 Inspection summary

An unannounced inspection took place on 11 December 2025 10:00 a.m. and 4:45 p.m. The inspection was conducted by a care inspector.

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.

All areas for improvement identified at the inspection were assessed as met. Care plans had been updated and reflected young people's assessed needs, including their physical, emotional and social care needs. Evidence was available to confirm that care plans had been reviewed regularly and that young people's views had been sought and considered through alternate communication methods. Records also demonstrated improved oversight of documentation, including the management of records, audits and monitoring arrangements.

Overall, progress had been made in relation to environmental matters which had previously been identified at the last inspection. Evidence was also available to provide assurance that the redecoration and maintenance service was responsive to the immediate requirements of the home; and there had been a number of improvements made to the environment to better meet the needs of young people. Two new areas for improvement were identified however in relation to flooring in a bedroom, and addressing a build-up of moss on the roof.

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 in charge at the conclusion of the inspection.

4.0 What people told us about the service

The inspector spoke with staff and their feedback provided a positive view regarding the care and support delivered within the home. Staff described positive relationships with young people within the home and reported they felt supported within their roles.

No feedback was received by RQIA via electronic questionnaires or electronic surveys.

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 06 June 2024.		
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 19 **Stated:** Second time	The registered person shall ensure that all young people using the service receive an experience that supports their personal, social and educational development and have access to specialist equipment which enables them to achieve this. It is essential that existing specialist equipment within the service remains operational and is either repaired or replaced.	**Met**
	Action taken as confirmed during the inspection: This area for improvement was met.	
Area for Improvement 2 **Ref:** Standard 11 **Stated:** Second time	The registered person shall ensure that ensure that the redecoration and maintenance service is responsive to the immediate requirements of the home. Particular attention should be given to; • Accumulating moss on the roof of the building. • Exterior window frames due to peeling paint needing repair and repainting.	**Met**
	Action taken as confirmed during the inspection: This area for improvement was assessed as met. Progress had not been achieved however with respect to moss on the roof, and this was identified as a new area for improvement.	
Area for Improvement 3 **Ref:** Standard 15 **Stated:** First time	The registered person shall ensure the Young People's guide is reviewed; and action is taken to ensure this document is accessible to all the young people in the home.	**Met**
	Action taken as confirmed during the inspection: This area for improvement was met.	

Area for improvement 4 **Ref:** Standard 11 **Stated:** First time	The responsible person shall review the environment in consultation with the young people. Particular attention should be paid to; • sourcing an effective solution to the window in one bedroom • individualising young people's bedrooms in line with their preferences • addressing storage within the home.	**Met**
	Action taken as confirmed during the inspection: This area for improvement was met.	

5.2 Inspection findings

5.2.1 Are young people receiving care and support which promotes positive behaviour and delivers safe care?

Staff demonstrated a detailed understanding of young people's individual needs, routines and communication preferences. Records reviewed confirmed comprehensive care plans were in place, they reflected the young people's assessed physical, emotional and social care needs, and there was evidence the records were subject to regular review.

Evidence was available to demonstrate that staff used alternative and individualised communication methods to understand young people's wishes and preferences; and to support their involvement in decisions about their own daily care.

A newly developed sensory room was in place and was being used to support young people's emotional regulation and sensory needs. Staff described how this space had been introduced in response to assessed need and was being used as part of young people's individual support plans.

Staff demonstrated appropriate knowledge of safeguarding procedures and were able to describe how current risks were managed to support young people to feel safe and well cared for within the home.

Evidence was available to demonstrate young people experienced consistency of care and support within the home. Staff described how routines were used to provide structure and predictability, which supported the young people's emotional regulation and promoted positive behaviour.

Overall, young people received care and support that was responsive to assessed need, promoted emotional wellbeing and delivered safe young person-centred care.

5.2.2 How does the service ensure staff have the necessary training and support to meet the needs of the young people?

Staff demonstrated appropriate knowledge and understanding of young people's individual needs, routines and communication preferences. Records reviewed confirmed that staff had received training relevant to the needs of the young people, including safeguarding, behaviour support and communication.

Evidence was available to demonstrate that staff received regular supervision and support, which provided opportunities to reflect on practice and to identify any additional training needs. Staff described how guidance and support were available from senior staff to ensure that care was delivered safely and consistently.

The service relied on regular bank staff and agency staff to support staffing arrangements due to recruitment and sickness pressures. Evidence demonstrated that these staff were familiar with the young people's needs and routines and supported continuity of care. Records confirmed that recruitment activity was ongoing to strengthen the substantive staff team.

Overall, staffing arrangements in place supported the delivery of consistent, safe and young person-centred care.

5.2.3 How does the service ensure young people experience a safe and high quality environment?

Evidence was available to provide assurance that the redecoration and maintenance service was responsive to the immediate requirements of the home. Records evidenced that environmental issues were identified and escalated appropriately.

Works had been undertaken to address an issue with a window in one of the bedrooms, external window frames had been improved, there was improved storage arrangements and young people's bedrooms had been personalised in line with their preferences. In addition, further environmental improvements had been completed, including the development of a sensory room, which had been finished to a high standard and provided an enhanced therapeutic space for young people.

Overall, progress had been made in addressing the areas for improvement previously identified with respect to the environment, with further actions required to ensure outstanding environmental maintenance matters were addressed. The build-up of moss on the roof however, still required attention, and flooring in one of the bedrooms required repair. Two new areas for improvement were identified.

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

Records reviewed and discussions with staff confirmed that arrangements were in place to promote and protect the health and wellbeing of young people. Health care plans were in place and reflected assessed physical and emotional health needs.

Staff demonstrated an understanding of how to support young people to access health care appointments and described how they worked flexibly and creatively to reduce anxiety and promote engagement with health services. This included adapting approaches to suit young people's communication needs and emotional regulation.

Evidence was available to demonstrate that health-related information was recorded appropriately and that staff monitored and responded to the young people's health needs in a timely manner.

Overall, the service promoted positive health outcomes and supported young people to access appropriate health care in line with assessed need.

5.2.5 What arrangements are in place to ensure that staff can identify, report and learn from complaints/adverse incidents?

Staff demonstrated an understanding of how to identify, record and report incidents and concerns in line with the service's policies and procedures. Records reviewed confirmed that incidents and complaints were appropriately recorded, reviewed and responded to in a timely manner.

Evidence was available to demonstrate that learning from incidents and complaints was shared with staff through supervision, team discussions and management oversight. This supported reflective practice and the continuous improvement of care and support provided within the home.

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

Governance arrangements were in place to provide effective oversight of the service. Records reviewed confirmed that audits, monitoring and review processes were used to support quality assurance and service improvement.

Evidence demonstrated that the registered manager had oversight of staffing, training, safeguarding and maintenance matters and were actively engaged in addressing areas for improvement identified.

Overall, governance arrangements supported the delivery of safe, effective and young person-centred care within the home.

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	2

Areas for improvement and details of the Quality Improvement Plan was discussed with the person in charge and the registered 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 Minimum Standards for Children's Homes (Department of Health) (2023)	
Area for improvement 1 **Ref:** Standard 11 **Stated:** First time **To be completed by:** 11 March 2026	The registered person shall ensure that ensure that the accumulation of moss on the roof of the building is reviewed and action plan agreed to address. Ref: 5.2.3
	Response by registered person detailing the actions taken: This issue was requested for resolution through the Trust Estates department prior to the inspection. This issue has been raised with Estates again highlighting that this is a QIP requirement. The Social Work Manager shall continue to monitor the progress of the work.
Area for improvement 2 **Ref:** Standard 11 **Stated:** First time **To be completed by:** 11 March 2026	The registered person shall ensure that the flooring in one of the bedrooms is repaired/replaced to ensure a safe, clean and well maintained environment for the young people. Ref: 5.2.3
	Response by registered person detailing the actions taken: This issue is currently being resolved within the Estates Department. The Social Work Manager shall continue to monitor the progress of the work.

Please ensure this document is completed in full and returned via the Web Portal





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