The Regulation and Quality Improvement Authority

Children's Home Inspection Report

IN048936

27 November 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:** – Southern 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.

There is a condition on the registration of the service which limits the maximum number of places which can be used to accommodate young people who have been assessed as having intellectual needs/ disability and in need of residential care.

2.0 Inspection summary

An unannounced inspection took place on 27 November 2025 between 10.00 a.m. and 4.00 p.m. The inspection was conducted by a care inspector.

The inspection assessed if the home was delivering safe, effective and compassionate care and if the service is well led.

A range of documents were examined to determine if effective systems and processes were in place to ensure care was safe, effective, compassionate and well led. Discussions with the manager and staff provided assurance that robust governance arrangements were in place.

Staff were attuned to the needs of the young people in their care and demonstrated a compassionate, caring approach, with the intent of creating an environment which was safe, and nurturing.

A stable staff group was in place who benefited from strong leadership and clear direction, and who had positive working relationships with the wider multi-disciplinary team. These arrangements supported the staff team to provide consistent care to the young people within the home.

No areas for improvement were identified.

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

The findings of this report will provide the manager with the necessary information to improve staff practice and children/young people's 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 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 staff and the manager on the day of the inspection.

Young people described that the staff were supportive and understood what they needed. They appreciated that staff helped them to access education and training opportunities and supported them to keep in contact with the people and communities that where important to them.

Young people confirmed they were aware of how to raise any concerns they may have, had access to advocacy support services via Voice Of Young People In Care on a regular basis, and were confident that their keyworker or the manager would deal with any issues they might have in a timely manner.

Feedback from staff provided a positive view of team morale, the support provided by the management team and the wider multidisciplinary team network. They described that the team worked well together, supported each other when needed, and the young people's welfare was their central focus. Team meetings were used as a means of resolving any issues and helped

to share learning and encourage development. Staff reflected that the consistent and stable leadership arrangements contributed to positive team morale and the retention of staff.

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?

There were no areas for improvement identified during the last inspection.

5.2 Inspection findings

5.2.1 How does the service ensure children have access to safe, consistent care, which supports positive experiences and outcomes?

Young people thrive when they have access to consistent caregivers who understand their needs, and when they have the opportunity to form stable and enduring relationships.

Consistent care was delivered by a stable staff group who shared a strong commitment to achieving best outcomes for young people; founded upon an understanding of individual needs, best practice and respect for the young people in their care.

An established and predictable rota pattern ensured that young people knew which staff were on shift and added to the overall sense of stability and safety for the young people. Handover logs were updated and discussed at each shift change, and this approach supported effective sharing of information. On call arrangements were also in place to provide leadership and guidance when required.

Young people should receive care which encourages and supports them to reach their fullest potential, develop emotional resilience, and enables them to develop a positive self-identity and self-esteem in relation to, for example, their gender, sexual orientation and levels of ability or disability.

The home provided care for young people, which was compassionate, young person centred and met their assessed needs. Care plans were reviewed regularly, updated where required, and specific needs in relation to young people's identity were reflected. Training to enable staff to effectively support young people in this area had also been delivered. The staff training matrix reflected an overall commitment to learning and development within the home, and all training was up to date.

Staff were aware of their safeguarding roles and responsibilities and understood when to implement regional procedures to promote young people's safety and wellbeing. The staff team described they had benefitted from the introduction of the Northern Ireland Framework for

Integrated Therapeutic Care (NIFITC) and had opportunity to attend a Reflective Governance group each month to review incidents, identify learning and share good practice.

Discussions with staff and the management team provided assurances that staff operated from a strong value base, which was young person centred and human rights led. The use of restrictive practices were considered by staff to be a last resort and implemented only when necessary and in proportion to the risk of harm if no action is taken.

Restrictive practices were approved and monitored through Care Network Meetings and were reviewed with the young person. The service was participating in a pilot, aimed at reviewing the use of restrictive practices within the organisation. This pilot, and the ongoing governance mechanisms in place to review the quality of young people's care, staff practice, and any trends or patterns, will support learning and development amongst the staff team and promote best outcomes for the young people.

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

Young people should live in safe, well-designed and pleasant homes with adequate space where there is access to a range of activities which will promote their development.

The home was in a good state of repair and presented as both relaxing and welcoming. Staff stated that the young people took pride in their home and had helped the staff team to decorate the home for the holiday season. Communal areas where the young people could take part in activities together or relax on their own were well furnished and inviting; and there was a range of activities including books games and media available. The outside space was accessible to all young people and was well maintained.

Young people confirmed that they are able to decorate their rooms to their own taste and were able to contribute their views regarding their home through the monthly house meetings.

The dining and kitchen area were described by the manager as the central hub of the home and a place where staff and young people have meals together and socialise. Staff confirmed that young people contributed to meal planning and menu choices.

An environmental risk assessment in relation to ligatures had been completed and shared with estates staff for review. Fire safety records were reviewed and confirmed as up to date.

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

Stable leadership arrangements support embedding effective governance arrangements, ensuring robust oversight of the quality of care, and in providing consistent direction and support to staff. The manager demonstrated a clear understanding of their role and responsibilities as a registered manager, and there were good systems in place to monitor safety and quality of care and ensure that standards were maintained.

A clear management and reporting structure, underpinned by a proactive approach to quality, safety and improvement was evident. Staff spoken to were aware of their role as it related to the overall governance arrangements in the home, with particular reference to record keeping. Staff supervision was completed monthly with informal supervision, advice and guidance available to all staff as needed.

An external monitoring officer completed monthly visits to the home, and all recommendations from the subsequent report were implemented in a timely manner. There was evidence that the manager was connected to the wider care network within the organisation, and this approach promoted improvements in practice, knowledge, and understanding of the needs of 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.





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