The Regulation and Quality Improvement Authority

# Children's Home Inspection Report

## IN049445

## 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

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|---|---|
| **Service Type:** Children's Home<br>**Provider Type:** Independent Provider<br><br>**Located within:** Western Health and Social Care Trust | **Manager status:**<br>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 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 2026 between 9.45 am and 5.45 pm. The inspection was undertaken by two care inspectors.

The inspection focused on assessing compliance with one Failure to Comply Notice (FTC) issued on 29 January 2026, following an inspection on 17 December 2025. The notice related to Regulation 25 (Staffing of Children's Homes) of ***The Children's Homes Regulations (Northern Ireland) 2005*** and set out required actions to improve staff recruitment and ensure safe staffing arrangements within the home.

As a result of the findings of this inspection, RQIA determined that while some progress had been made in relation to the actions set out in the FTC notice, not all actions had been complied with. Consequently, further enforcement action was taken as an outcome of this inspection.

A meeting was convened by RQIA with the provider's representatives on 9 April 2026 to discuss actions already progressed and to agree further actions required to address the outstanding areas for improvement.

RQIA were assured that, since the inspection on 30 March 2026, the registered person had commenced actions to strengthen governance processes relating to the notice and address the areas of concern identified within the FTC notice. This included reviewing recruitment processes and implementing a framework to improve the safe recruitment, induction and training of new staff. RQIA extended the compliance date to 29 April 2026 for the FTC notice, to allow the provider additional time to achieve full compliance with the regulation.

Due to the focus of this inspection, one of the areas for improvement identified at the previous inspection were carried forward and will be reviewed at the next inspection.

One new area of improvement relating to notifiable events was identified during inspection.

Details of RQIA's enforcement procedures can be found on our web site:
Enforcement Activity | Regulation and Quality Improvement Authority

## 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 home 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 person in charge at the conclusion of the inspection.

## 4.0 What people told us about the service

The management team informed inspectors that, since the previous inspection, significant work had been undertaken to make the necessary improvements. This included strengthening safeguarding practices and governance relating to the recruitment and training of new staff.

The management team reported that changes to the staffing model had strengthened practice, with the home being primarily staffed by core staff following successful recruitment to the vacant roles. While the inspection of evidence provided did verify improved processes had been implemented, the actions taken did not achieve full compliance with FTC notice; this is reported in detail within section 5.2.1.

They manager advised the deputy manager was seconded to manage another home and another staff member had temporarily moved into the Deputy Manager role, inspectors were satisfied arrangements were in place to support the new candidate in this role.

No feedback was received by RQIA via questionnaires or electronic survey within the required timescales for inclusion in this report.

## 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 17 December 2025</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<br><br>Ref: Regulation 25<br><br>Stated: First Time<br><br>To be completed by:<br>29 March 2026</td><td>The Registered Person must ensure that robust, safe recruitment practices are in place to ensure the protection of young people and confirm that staff working in the home are suitable for the roles to which they have been appointed.<br>Actions the registered person must take are outlined in the Failure to Comply Notice dated 29 January 2026.<br><br>Ref: 5.2.1.</td><td rowspan="2">Not met</td></tr>
<tr><td>Action taken as confirmed during the inspection:<br><br>This area for improvement was not 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<br><br>Ref: Standard 17.10<br><br>Stated: Second Time</td><td>The responsible person shall ensure that staff are equipped with the skills and training required to meet the assessed needs of the young people.<br><br>Ref: 5.2.2.</td><td rowspan="2">Carried forward to the next inspection</td></tr>
<tr><td>Action taken as confirmed during the inspection:<br><br>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.</td></tr>
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## 5.2 Inspection findings

### 5.2.1 Review of the FTC notice

**Notice of failure to comply with Regulation 25 of The Children's Homes Regulations (Northern Ireland) 2005**

*Fitness of Workers*
*25.—(1) The registered person shall not –*
*(a) employ a person to work at the children's home unless that person is fit to work at a children's home; or*
*(b) allow a person to whom paragraph (2) applies to work at the children's home unless that person is fit to work at a children's home.*
*(2) This paragraph applies to any person who is employed by a person other than the registered person to work at the children's home in a position in which he may in the course of his duties have regular contact with children accommodated there.*
*(3) For the purposes of paragraph (1), a person is not fit to work at a children's home unless –*
*(a) he is of integrity and good character;*
*(b) he has the qualifications, skills and experience necessary for the work he is to perform;*
*(c) in respect of a team leader or a residential social worker, he has the qualifications, skills and experience necessary for the work he is to perform and is registered as a social worker in a relevant register;*
*(d) he is physically and mentally fit for the purposes of the work he is to perform;*
*(e) where he is a social care worker, he is registered in a relevant register(1); and*
*(f) full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 2.*
*(4) The registered person shall ensure that –*
*(a) any offer of employment to a person is subject to paragraph (3)(f) being complied with in relation to that person; and*
*(b) unless paragraph (5) applies, no person starts work at a children's home until such time as paragraph (3)(f) has been complied with in relation to him.*
*(5) Where the following conditions apply, the registered person may permit a person to start work at a children's home notwithstanding paragraph (4)(b) –*
*(a) the registered person has taken all reasonable steps to obtain full information in respect of each of the matters listed in Schedule 2 in respect of that person, but the enquiries in relation to any of the matters listed in paragraphs 3 to 6 of Schedule 2 are incomplete;*
*(b) full and satisfactory information in respect of that person has been obtained in relation to the matters specified in paragraphs 1 and 2 of Schedule 2;*
*(c) the registered person considers that the circumstances are exceptional; and*
*(d) pending receipt of, and satisfying himself with regard to, any outstanding information, the registered person ensures that the person is appropriately supervised while carrying out his duties.*
*(6) The registered person shall take reasonable steps to ensure that any person working at the children's home who is not employed by him and to whom paragraph (2) does not apply, is appropriately supervised while carrying out his duties.*

**In relation to this notice, the following actions were required by the provider to comply with this regulation:**

1. Complete a review of the Recruitment Policy, Procedure and associated documentation; and ensure they are improved to effectively guide staff to achieve compliance with the above regulation. Evidence of the review, the learning and any associated actions (action plan), and progress with the action plan must be; disseminated to relevant staff in the service and be available for inspection.

2. Undertake a review of recruitment records for staff currently employed in service and ensure that all staff, including core, bank or agency staff have been recruited in compliance with The Children's Homes Regulations (Northern Ireland) 2005. Evidence of this review, and any associated actions (action plan) arising from this review is available for internal audit and inspection purposes.

3. Evidence all staff, with responsibility for recruitment, have undertaken the required training and are assessed as competent to undertake this role, including the senior management team and board members where applicable.

4. Create a robust assurance framework that provides evidence that all current and future appointments are compliant with the above regulation, and that risks are identified, escalated and when necessary timely remedial action is taken to ensure a safe, effective, and compassionate and a well led workforce is maintained.

**Assessment of Compliance**

1. The evidence to verify the review of the Recruitment Policy, Procedure and associated documentation had been undertaken was not produced for this inspection, therefore, the provider had not complied with action 1 within the timeframe of the FTC notice. Post-inspection the registered persons confirmed this action was not undertaken as required. RQIA met with the registered persons on 09 April 2026 and they advised they will complete this action on or before 29 April 2026, which is the maximum duration RQIA can extend the FTC notice.

2. The management team reported that a review of all current staffs' recruitment had been completed to assess compliance with the Regulations and that all records were verified and up to date. A sample of staff files inspected included evidence of an audit process implemented to verify records were compliant *with The Children's Homes Regulations (Northern Ireland) 2005*. However, of the six files reviewed, four were recorded as compliant but did not fully meet compliance requirements. Gaps were identified in employment history, required documentation, checks and the records did not provide assurance that gaps had been explored, or addressed, therefore the provider had not fully complied with action 2 within the timeframe of the FTC notice. RQIA discussed this with the registered persons during the meeting on 9 April 2026; the provider representatives provided assurance that all staff documentation was now accessible. Compliance with this action will be inspected on or before 29 April 2026.

3. A review of the available documents provided evidence that all staff involved in the recruitment of staff within the organisation have undertaken recruitment training and had been assessed as competent to undertake this role. The registered persons were advised during the meeting on 9 April 2026 they had complied with this action.

4. Evidence provided verified that the service had introduced guidance documents, tools, and templates to support compliance with the Regulation; however, a clear and robust assurance framework was not available at the time of inspection. Furthermore, inspection of a sample of staff files including documentation relating to the recruitment and training of new staff identified inconsistencies in policy, procedures, and actual practices, for example in the undertaking of staff induction. Consequently, inspectors were concerned the new and revised policy and procedures would not be consistently implemented, because they did not outline consistent practices. The inconsistencies risked induction processes not being robust and effective, which may result in staff delivering unsafe care and a workforce that is not well led. RQIA met with the registered persons on 9 April 2026, they provided assurance that actions would be taken to ensure they have a clear, accessible and robust assurance framework in place, they advised they will complete this action on or before 29 April 2026, which is the maximum duration RQIA can extend the FTC notice.

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

Discussion with the management team and a review of available records highlighted that a number of notifiable events, that involved the young people, had not been reported to RQIA. This was discussed with the management team and an area for improvement has been made.

## 6.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with The Children's Homes Regulations (Northern Ireland) 2005 and The Minimum Standards for Children's Homes (Department of Health) (2023)

| | Regulations | Standards |
|---|---|---|
| **Total number of Areas for Improvement** | 2* | 1* |

*the total number of areas for improvement includes one that has been stated for a second time and one which is carried forward for review at the next inspection.

Areas for improvement and details of the Quality Improvement Plan were discussed with 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 Children's Homes Regulations (Northern Ireland) 2005** | |
| **Area for Improvement 1**<br><br>**Ref:** Regulation 25<br><br>**Stated:** Second Time<br><br>**To be completed by:** | The Registered Person must ensure that robust, safe recruitment practices are in place to ensure the protection of young people and confirm that staff working in the home are suitable for the roles to which they have been appointed. Actions the registered person must take are outlined in the Failure to Comply Notice dated 29 January 2026. |

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|---|---|
| 29 April 2026 | Ref: 5.2.1. |
| | **Response by registered person detailing the actions taken**:<br>Robust and safe recruitment practices are now in place to ensure the protection of all young people. A second verifier system has been introduced to ensure that all required records are present and complete for each staff member. An audit tool has also been implemented to confirm that all necessary documentation is in place.<br>Any gaps in employment history have been addressed. Where no valid reason was initially provided or dates were unclear, discussions have taken place and an appropriate narrative has been recorded.<br>A new Recruitment and Selection Framework has been developed, providing a structured approach to attracting, selecting, and appointing staff. This supports the delivery of safe, stable, and high-quality care for young people by ensuring that the right individuals are recruited and retained within the workforce.<br>In addition, a comprehensive and structured induction programme has been implemented for all new staff. This includes an initial induction covering key policies, procedures, safeguarding expectations, and mandatory training, followed by a period of shadow shifts to support learning in practice. An individual action plan is then developed to identify any further learning or training requirements and how these will be met. This process also determines whether the staff member is ready to commence core shifts. A complete recruitment evaluation was carried out, which highlighted strengths, weaknesses and identified gaps in previous safe recruitment practices, this resulted in a report being written, an action plan, a policy review creating a robust policy and the creation of the audit tool and 2 person verifier process with previous weaknesses being addressed with an additional onboarding and induction tool included in said document. All staff are aware of the new process and safe recruitment practices are now on the agenda for leadership meetings. The leadership team are connected and working collaboratively with clear responsibilities and accountability in place. Furthermore, this has been discussed and addressed at governance meetings and will continue to be discussed and audited moving forward. Our process is now string and fully compliant and will be further evidenced in future inspections and additionally in monitoring visits. |
| **Area for improvement 2**<br><br>**Ref:** Regulation 29 & Schedule 5 | The registered person shall ensure all notifiable events are notified to RQIA without delay.<br><br>Ref: 5.2.2. |

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| **Stated:** First<br><br>**To be completed by:**<br>01 April 2026 | **Response by registered person detailing the actions taken**:<br>All notifiable events identified to date have now been notified to RQIA. This has included the retrospective submission of notifications in relation to all serious incidents identified through our review of records. A review of internal reporting arrangements has also been undertaken to strengthen oversight and to support timely notification of any future notifiable events in line with regulatory requirements. |
| **Action required to ensure compliance with The Minimum Standards for Children's Homes (Department of Health) (2023)** | |
| **Area for Improvement 1**<br><br>**Ref:** Standard 17.10<br><br>**Stated:** Second Time | The responsible person shall ensure that staff are equipped with the skills and training required to meet the assessed needs of the young people.<br><br>Ref 5.1. |
| **To be completed by:**<br>30 April 2026 | **Response by registered person detailing the actions taken**:<br>Staff training was assessed and additional training organised from early 2026. All staff are fully trained and this is monitored through the training tracker matrix. The training matrix is discussed in leadership meetings which ensures that staff training is refreshed when required and any additional training that management feel is required to meet the needs of young people is arranged promply.Training tracker is additionally momitored closely by Operations Manager in conjunction with Registered Manager who are in regular communication. All staff have completed their mandatory training requirements. Additional in-person training has also been delivered, covering Professional Boundaries, Safeguarding, Trauma-Informed Practice, Residential Care, and Adverse Childhood Experiences (ACEs). The entire staff team is now trained in Therapeutic Crisis Intervention (TCI).<br>A training matrix is being utilised to record completion dates and identify when training is due for renewal. A traffic light system has been implemented to provide clear visual guidance on compliance. |

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