The Regulation and Quality Improvement Authority

Children's Home Inspection Report

IN050400

20 May 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:** South Eastern Health and Social Care Trust	**Manager status:** Registered

Brief description of how the service operates:

The children 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.

Since the last inspection, the provider has submitted an application to RQIA to make a change to the registration of this service to reduce the maximum number of places.

2.0 Inspection summary

An unannounced inspection took place on 20 May 2025 between 9.05 a.m. and 7.05 p.m. The inspection was conducted by a care inspector.

The inspection sought to determine if the home was delivering safe, effective and compassionate care and if the service was well led.

Young people were supported by a stable and experienced staff team. Observation of the staffs' interactions with young people on the day of inspection confirmed they were compassionate, warm, respectful and caring in their interactions with the young people. The young peoples' body language presented as relaxed and content.

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.

No areas for improvement were identified as a result of this inspection.

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

Feedback was gathered from young people, staff and professionals visiting the home on the day of inspection. This engagement confirmed the home was committed to working in partnership with the multidisciplinary team, with a focus on delivering compassionate, person-centred, strength-based care that promotes safety and positive experiences for young people.

Feedback from young people provided a positive view regarding the relationships between young people and staff. They reported feeling cared for and advised staff were approachable, attentive and engaged young people in activities. Young people reported that the home was comfortable and that their views were considered and contributed towards the running of the home.

Staff and the management team reported that the home had been experiencing a particularly challenging period as a result of increased incidents and a need for staff to support young people more intensively. Staff identified effective leadership, management support, and strong team working as key factors in maintaining team cohesion and resilience during this period.

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?

No areas for improvement were identified during the last inspection on 21 August 2025.

5.2 Inspection findings

5.2.1 How does the service ensure young people are getting the right care at the right time?

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 progress against their goals was supported by this framework. Minutes of the associated meetings highlighted the value of the framework in fostering collaboration and a shared assessment with the multi-disciplinary team to identify needs and enable staff to support young people effectively. Staff were however still becoming familiar with the new recording structures. Advice was given to the manager to ensure that care plan documentation is aligned and consistent with the NIFITC framework.

Care Network Meeting (CNM) minutes confirmed discussion took place regarding young people's holistic needs, with goals and corresponding actions identified. Young people were actively encouraged to attend review meetings this is good practice and ensured that young people had the opportunity to be active participants in their own care planning. Young people confirmed they were kept updated on the outcome of care meetings, where they elected not to attend.

Review of risk assessments confirmed they were underpinned by trauma-informed and strengths-based approaches. The assessments clearly identified potential risks and, subject to regular review, and demonstrated responsiveness to evolving risk and assessed needs. Review of care documentation and discussion with staff and the management team confirmed robust communication and recording systems were in place to update staff in a timely manner about changes to young people's risk assessments and safety plans. This practice supports the delivery of safe and effective care on a day to day basis.

Handover records are a key communication tool between staff members across shifts to ensure that important information about each child is shared effectively. A sample of handover records and daily logs provided assurance that robust systems were in place to support the delivery of day-to-day care of young people, aligned with care plans and risk assessments, and were reflective of a holistic, trauma-informed, and young person–centred approach.

Children's homes should support young people to develop the skills needed to thrive and succeed as they mature and approach adulthood. Actions that restrict young people should have clear justification based on a robust assessment of risk; with clear evidence that the restriction is proportionate; in place for the least amount of time; has a reduction plan in place

(as appropriate); and is agreed with the multi-disciplinary team, in consultation with the child and relevant others. A robust review mechanism is also required which considers the effectiveness and impact of the restrictive practice.

Records confirmed the restrictive practices in place, who was involved in the decision-making process, and that they were proportionate and subject to review. Evidence was also available that young people were involved in the process.

The application submitted to RQIA to reduce the maximum number of places in the service was reviewed during this inspection. The manager confirmed that the decision to reduce the places available in the service was informed by a wider review undertaken by the provider. This review determined a reduction in the number of young people living in the home would enhance the overall experience of young people in the service. The application was subsequently approved by RQIA post inspection.

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

Safe staffing arrangements are essential to ensure young people are, protected from harm, and supported in line with their individual needs and care plans. Responsive staffing supports staff to build consistent, trauma-informed relationships with young people and enables staff to respond effectively to risks or incidents. It also supports the delivery of stable, high-quality care, with the aim of supporting young people to achieve their outcomes and maintain positive wellbeing.

The manager described the staffing levels which had been assessed as necessary to meet the needs of the young people. A sample of the staff rotas evidenced staffing levels were consistent with the levels described; and were reviewed on an ongoing basis to ensure they remained consistent with the needs of the group of young people in the home.

A robust training matrix was in place to monitor compliance with training, and each staff member had an individual training plan. The management team reviewed training on a regular basis and planned training was available for each member of staff to ensure compliance with mandatory training. Engagement with staff and the management team confirmed staff have regular opportunities to attend training, development opportunities and reflective practice forums to enable them to meet the needs of young people.

Discussion with staff and a review of records confirmed supervision arrangements were in place to support the delivery of effective and co-ordinated care.

Discussion with young people, staff and review of staffing arrangements, training and staff supervision provided assurance that the arrangements in place supported staff to deliver safe, effective and compassionate care.

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

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.

A sample of fire records evidenced that fire safety checks and drills were completed regularly and consistently. The fire risk assessment was up to date and the associated action plan had been completed.

The home was nicely decorated and presented as a comfortable, homely space for young people to live; with soft furnishings being utilised to create a welcoming environment. A welcoming outdoor space was also available to the young people. Repairs were required within the home and assurance was provided that these matters had been reported to the relevant department for action and would be addressed within a timely manner.

It is important that feedback from young people is consistently captured and used to inform how care is delivered within the home and to drive ongoing service improvements. This approach promotes meaningful participation and empowers young people to have a sense of ownership over their lived experience.

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 could be improved within the home. Young people confirmed that they are supported to contribute to decisions about their care, the home environment and the activities they wish to avail off.

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

The inspection findings confirmed that the staff team have benefited from stability within the management team, the visible leadership they demonstrated and their commitment to promoting an open culture within the service.

Feedback from staff, alongside a review of governance arrangements across staffing, recording systems, fire safety checks and audits, provided assurance that robust systems were in place and that the service demonstrated effective leadership arrangements.

Review of records and discussions with the management team provided assurance that there was a planned approach to supporting young people's transitions into the home. Comprehensive assessments were completed in advance of young people moving into the home. Young people were matched to what the home could offer and to the current dynamics within the home. The needs of the young people who were already living in the home were fully considered and there was a focus on minimising any disruption.

Feedback from staff identified that, while they felt well-equipped to support young people, there were concerns that the matching process was not always sufficiently robust, with potential impacts on group dynamics and young people's wellbeing. This issue was raised with the manager, who acknowledged the concerns and agreed to revisit the matter with the staff team for further exploration.

The inspection process identified that while arrangements were in place to equip staff with the knowledge and skills required to meet the needs of all young people in the home, the training programme was not fully aligned to the statement of purpose for the service and categories of care under which the service is registered. The absence of the required knowledge and skill base could compromise the care afforded to young people with specific needs. The manager

agreed to address this through engagement with the training team and multi-disciplinary professionals. Progress in this area will be reviewed through future inspection activity.

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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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