The Regulation and Quality Improvement Authority

Children's Home Inspection Report

IN050429

29 April 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:** Independent Provider **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 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 29 April 2026 between 9.30 am and 5.30 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.

An inspection carried out on 30 March 2026, with the same focus, had found that whilst some progress had been made in respect of the notice, only one of the four required actions had been complied with.

This inspection focused specifically on the remaining three actions that had not. The inspection findings provided assurance that the remaining actions had now been complied with. Evidence available on the day of inspection provided assurance that a review of recruitment processes had been undertaken and a framework established and implemented to improve safe recruitment practices, induction processes and training of new staff. A review of the recruitment records relating to the existing staff team had also been completed.

The provider had also taken action to strengthen the governance processes relating to the areas of concern identified within the FTC notice. Governance arrangements were now in place to provide effective oversight of the implementation of the revised policies, procedures and

practices, and to support systematic monitoring aimed at ensuring continued compliance and ongoing service improvement.

On 11 May 2026 RQIA notified the registered provider that the necessary improvements to comply with the regulations set out in the notice had been complied with.

Due to the focus of this inspection, two of the areas for improvement identified at the previous inspection were carried forward and will be reviewed at the next 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 registered person and management team informed inspectors that, since the previous inspection, significant work had been undertaken to make the necessary improvements and to achieve compliance with the regulations and the FTC notice. Actions included reviewing recruitment and induction processes, strengthening safeguarding and governance arrangements, reviewing the recruitment of current staff, and developing tools and templates to support regulatory compliance. They stated that the practices and governance arrangements now in place enable the service to deliver safe and effective care. This will be discussed further in 5.2.1

Staff spoke of their commitment to providing young person-centred, trauma-informed care, demonstrated through compassionate and respectful engagement with young people and their relatives/carers. They advised this practice was supported by access to an effective and supportive management structure, including regular supervision and reflective sessions, enabling staff to carry out their roles and responsibilities while maintaining their wellbeing.

Despite an increase in incidents, staff confirmed that ongoing engagement with young people and professionals ensured young people's care needs and any identified risks were reviewed and addressed promptly and effectively.

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?

Areas for improvement from the last inspection on 30 March 2026		
Action required to ensure compliance with The Children's Homes Regulations (Northern Ireland) 2005		**Validation of compliance**
Area for Improvement 1 **Ref:** Regulation **Stated:** Second Time **To be completed by:** 29 April 2026	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. Ref: 5.2.1	**Met**
	Action taken as confirmed during the inspection: This area for improvement was met and is discussed further in section 5.2.1	
Area for improvement 2 **Ref:** Regulation 29 & Schedule 5 **Stated:** First	The registered person shall ensure all notifiable events are notified to RQIA and in without delay. Ref: 5.2.2	**Carried forward to the next inspection**

	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.	
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 17.10 **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. Ref: 5.2.2	**Carried forward to the next inspection**
	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.	

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. Evidence was available to confirm that a review of the Recruitment Policy, Procedure and associated documentation had been undertaken, resulting in the development of a time bound action plan that had been completed by the provider in advance of the

inspection. Learning identified as a result of the review included; the need for strengthened governance arrangements; improved communication across departments to prevent miscommunication, and greater clarity of roles and responsibilities to ensure compliance.

The resulting action plan, and the measures now implemented, provided assurance that strengthened policies, procedures and processes had been established. These measures were supported by the introduction of appropriate documentation and templates, which enhanced governance arrangements, addressed identified gaps and deficits, and promoted improved practice. Collectively, these measures provided clear guidance to staff, and should ensure compliance with the relevant regulation and support the delivery of safe and effective care.

2. The provider advised that the service had reviewed recruitment records for all staff and had taken the necessary action to ensure that these records were compliant with the organisations policies, procedures and the regulations. A sample of staff files were inspected and were compliant with The *Children's Homes Regulations (Northern Ireland) 2005*.

   An audit tool had been used by the provider to review staff files, and the records documented actions taken by the provider to address any gaps in the information available. This provided assurance that revised policies, procedures and associated documentation had strengthened governance arrangements and supported compliance with the relevant regulations. It is essential that the provider ensures safe recruitment practices are effectively embedded, and robust audit systems are maintained to ensure practice remains compliant with the regulations.

3. This action was assessed as met during the last inspection. The management team confirmed that no additional staff had been involved in recruitment activity since this time.

4. Evidence was available that the service had established a clearly defined, accessible, and robust assurance framework to direct and inform practice in relation to the recruitment, induction, and training of new staff. The service had implemented a suite of guidance documents, tools and templates to strengthen governance and support staff to fulfil their roles, safeguard young people, and ensure regulatory compliance.

   Additional assurance was provided that structured monitoring and audit processes were in place with the aim to ensure updated policies and procedures were fully implemented, consistently embedded in practice, and demonstrate compliance with the regulations. These measures will collectively support the maintenance of a safe, effective, compassionate, and well-led workforce.

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	1*	1*

* the total number of areas for improvement includes two that which are carried forward for review at the next inspection.

Areas for improvement and details of the Quality Improvement Plan were discussed with person in charge and provider 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 **Ref:** Regulation 29 and Schedule 5 **Stated:** First time **To be completed by:** 01 April 2026	The registered person shall ensure all notifiable events are notified to RQIA and in without delay. Ref: 5.2.2 **Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.**
Action required to ensure compliance with The Minimum Standards for Children's Homes (Department of Health) (2023)	
Area for improvement 1 **Ref:** Standard 17.10 **Stated:** Second time **To be completed by:** 30 April 2026	The responsible person shall ensure that staff are equipped with the skills and training required to meet the assessed needs of the young people. Ref: 5.2.2 **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.**

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