



The Regulation and
Quality Improvement
Authority

Children's Home Inspection Report
IN042965
13 June 2024

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: South Eastern 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 <u>The Minimum Standards for Children's Homes (Department of Health) (2023)</u> . The young people living in this home have been assessed as having physical and or intellectual needs/ disability and in need of medium to long term care.	

2.0 Inspection summary

An unannounced inspection took place on 13 June 2024 between 9 a.m. and 6 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.

The inspection assessed progress with the six areas for improvement identified at the last care inspection. These were in relation to the physical environment, training for staff, restrictive practice, young people records and advocacy support available to the young people.

The inspection found that all areas for improvement identified at the last inspection were met and two new areas for improvement were identified; these were in relation to staff recruitment and the promotion of activities outside of the home for the young people.

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

The findings of this report will provide the manager with the necessary information to improve staff practice and 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 person in charge at the conclusion of the inspection.

4.0 What people told us about the service

The inspector spoke with young people, staff and the staff managing the home. Young people, carers/relatives and visitors also had the opportunity to provide feedback via a questionnaire. No feedback was received by RQIA via questionnaires or electronic survey post inspection.

Young people told us that they liked living in the home and that they had good relationships with staff. Young people who were less able to tell us about how they found life in the home were observed as relaxed in their surroundings and engaged well with staff. Observations of staff provided assurance they knew how to provide the right care at the right time, including how to communicate with the young people to enable them to make choices and to ensure they were well cared for.

Staff presented as person centred and therapeutic within their approach. They had a good understanding of each of the young people's individual needs and described a consistent and coordinated approach to the care provided to the young people. Staff discussed how they work well together and felt skilled and equipped within their roles. Staff support and information sharing mechanisms were in place through handovers and team meetings. Staff spoke positively of the home's management team and felt confident that any concerns raised would be addressed. Overall the staff team worked well together to ensure the young people got the right care at the right time.

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 31 July 2023		
Action required to ensure compliance with The Children's Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 16 Stated: Second time To be completed by: 11 September 2023	The registered person shall undertake a review of restrictive practices used within the home to ensure that the least restrictive option is being used and records clearly describe individualised needs for restrictions to be in place. The record should clearly state why a restrictive practice is in place, that it is agreed with the multi-disciplinary team, the young person and/or their relative, and the timescale within which the restriction will be reviewed and outcomes that will be measured.	Met
	Action taken as confirmed during the inspection: This area for improvement was met. Actions taken are further referenced in section 5.2.2	
Area for improvement 2 Ref: Regulation 27 Stated: Second time To be completed by: 11 September 2023	The registered person shall take action to ensure that all relevant statutory documentation is in place and up to date within the young people's care records. This is in relation to missing LAC review minutes.	Met
	Action taken as confirmed during the inspection: This area for improvement was met.	

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 1 Stated: First time To be completed by: 23 October 2023	The registered person shall ensure that young people have access to independent advocacy support and mentoring services to support them in making their views known and that ensure the young people can choose to use them when they see fit.	Met
	Action taken as confirmed during the inspection: This area for improvement was met.	
Area for improvement 2 Ref: Standard 17.10 Stated: First time To be completed by: 23 October 2023	The registered person shall ensure that staff undertake autism training.	Met
	Action taken as confirmed during the inspection: This area for improvement was met.	
Area for improvement 3 Ref: Standard 11 Stated: First time To be completed by: 31 July 2023	The registered person shall ensure that the environment remains free from any avoidable hazards; this relates specifically to ensuring the safe storage of items in keeping with the Control of Substances Hazardous to Health (COSHH) Regulations.	Met
	Action taken as confirmed during the inspection: This area for improvement was met.	
Area for improvement 4 Ref: Standard 11 Stated: First time To be completed by: 11 September 2023	The registered person shall ensure that a review of the environment is undertaken to identify any repainting or repairs required; this should include a time bound work plan to address any works required. A copy of this review should be maintained for future inspection.	Met
	Action taken as confirmed during the inspection: This area for improvement was met.	

5.2 Inspection findings

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

A comfortable, well furnished, welcoming and homely environment gives a strong message to young people that they matter. On arrival to the home a warm, clean and welcoming environment was observed. The physical environment was identified as an area for improvement at the last inspection and a focus of this inspection. Good improvement was found in relation to the physical environment and a continuous review of the environment conditions was also found. It was however noted that the dining room chairs did not match which prompted a discussion that identified a number of the chairs had been damaged, and were not suitable for all the young people living in the home. However, the person in charge confirmed that plans were in place to purchase more suitable seating.

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

Review of records and discussions with the staff in charge confirmed that prior to any new admission to the home a comprehensive assessment of the young people's needs and wishes was completed. New young people moving into the home were accurately matched to what the home could offer and to the dynamics within the home. Assurance was in place that the needs of the young people who were already living in the home had been fully considered and there was a focus on minimising any disruption.

Discussions on the day of inspection identified difficulties in finding appropriate move on placements for some of the young people. Staff presented as person centred within their approach and were also proactive in liaising with relevant Trusts to ensure appropriate move on placements could be identified in a timely manner. The staff in the home were proactive in advocating on behalf of the young people to ensure their move on plan was in their best interests. The staff in charge discussed the importance of identifying a placement early and ensuring the young people were supported with their planned move.

Restrictive practices in place were proportionate to the presenting levels of risk and necessary to safeguard the health, wellbeing and safety of both young people and staff. There were arrangements in place that provided assurance young people who required high levels of supervision or monitoring and restrictions had their capacity considered and where appropriate, assessed. Where a young person was subject of a deprivation of liberty, the care records contained details of required assessments completed and agreed outcomes were developed in conjunction with the Health and Social Care Trust representative.

The Voices of Young People in Care advocacy service visit the young people regularly to offer advice, and consult with them regarding their views and any concerns they may have. Opportunities to avail of services provided by this advocacy service was also in place.

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

Review of the home's monthly monitoring reports prior to inspection and discussions with the staff in charge identified some vacancies within the staff team. Assurance was provided there was a process of continuous assessment of staffing within the home to ensure the numbers, experience, qualification and skill mix of staff meets the needs of the young people, whilst also taking into account any group need and emerging risks. The current recruitment plans to fill any vacant positions was discussed and in the meantime whilst some agency staff are used, they were a consistent pool of staff who know the home and young people well.

Review of staff files did not confirm that safe and robust recruitment practices were in place with respect to agency staff. Sampling of agency records identified the agency profile pages did not always reflect the required information as stipulated within Schedule 2 of The Children's Homes Regulations (Northern Ireland) 2005. This was identified as an area for improvement.

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

To ensure that young people get the most out of life and their transition to adulthood is a positive experience, it is important that a wide range of activities and interests are promoted. This will also help to build a sense of fairness and build on skills for interacting with others. It was however noted that opportunities for young people to take part in meaningful activities outside of the home was limited due to the increased level of staff required to enable this to happen. The importance of activities taking place outside of the home was discussed and identified as an area for improvement.

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

The Statement of Purpose for the Children's Home was reviewed and updated by the provider in June 2024. The document clearly described the nature and range of the service to be provided and all of the matters required by Regulation. Evidence gathered at this inspection indicates that the Children's Home was currently operating in keeping with its Statement of Purpose.

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

Areas for improvement and details of the Quality Improvement Plan were discussed with the person in charge 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 25 3(f) Stated: First time To be completed by: 13 July 2024	The registered person shall ensure there is evidence available to verify that all agency staff employed in the home have been subject to robust and safe recruitment practices. This evidence should be available to review on inspection. Ref: 5.2.3
	Response by registered person detailing the actions taken: Agencies who are being used within the Home have been requested to update their staff profiles to meet the required recruitment checks. Selected agencies have updated and returned the required documentation and are available for inspection. We are satisfied with the information included on the new and updated profiles.
Action required to ensure compliance with The Minimum Standards for Children's Homes (Department of Health) (2023)	
Area for improvement 1 Ref: Standard 7 Stated: First time To be completed by: 13 September 2024	The registered person shall ensure that arrangements are in place to support the young people to engage in leisure activities and trips. Ref: 5.2.4
	Response by registered person detailing the actions taken: When compiling the house rota, the manager will consistently seek to ensure appropriate staff ratios. This includes additional staff as required to facilitate planned activities outside of the home, in order to safely meet the social needs of each of the children. The staff team will be proactive in matching activities to each individual child's preferred interests. Input and resources will be requested from placing Trust. Efforts will be made to integrate family on trips when appropriate.

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