

**Children's Home Inspection Report**  
**IN043803**  
**25 November 2024**

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

## 1.0 Service information

<b>Service Type:</b> Children's Home  <b>Provider Type:</b> Health and Social Care Trust  <b>Located within:</b> – Western Health and Social Care Trust	<b>Manager status:</b> Not registered
<b>Brief description of how the service operates:</b>  This home is registered as a small children's home as defined in <a href="#">The Minimum Standards for Children's Homes (Department of Health) (2023)</a> .  The children living in this home may have had traumatic 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.  Since the last inspection, the provider has submitted an application to RQIA to vary the registration of this service to change the age range of young people accommodated within the home.	

## 2.0 Inspection summary

An unannounced inspection took place on 25 November 2024 between 10.30 a.m. and 4.15 p.m. The inspection was conducted by a care inspector.

The inspection assessed progress with an area 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. One area for improvement identified at the last care inspection was assessed; and the inspector concluded compliance had been achieved. Two new areas for improvement in relation internet safety and the requirement to submit a registered manager application to RQIA were identified.

The inspection process also included assessment of an application to vary the registration of the service. The application sought to change the age range of young people accommodated in the home. Discussions with the management team provided assurance that robust governance mechanisms and safe staffing arrangements were in place, aligned to the intended Statement of Purpose (SOP) for this service. The application to vary the registration was approved post inspection.

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 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 management team. Young people told us that they liked living in the home and that they had good relationships with staff.

Staff spoke warmly and compassionately about the young people and provided assurance that the team adopted a young person centred and individualised approach to care. Discussions with staff confirmed that they felt positive about their roles, how young people were being cared for and the support available from the management team.

Observation of staff interactions with young people confirmed staff were respectful and caring in their interactions; and they were observed adjusting their communication style to match the needs of the individual young people.

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?

Areas for improvement from the last inspection on 8 April 2024		
Action required to ensure compliance The Regulation and Improvement Authority (Registration) Regulations (Northern Ireland) 2005		Validation of compliance
<b>Area for Improvement 1</b>  <b>Ref:</b> Regulation 25  <b>Stated:</b> First time	The registered person shall ensure evidence is accessible that verifies staff employed in the home have been subject to robust safe recruitment practices in accordance with Schedule 2 of The Children's Homes Regulations (Northern Ireland) 2005. This evidence should be available to review on inspection.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> This area for improvement was met.	

## 5.2 Inspection findings

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

Young people should be kept safe both emotionally and physically, including from online harm. Young people benefit from preventive approaches, early identification of concerns, and sensitive, high-quality support from staff who work in partnership with their wider multidisciplinary team to keep them safe. Staff should also support young people to develop the skills they need to understand the potential risks they could be exposed to online.

Staff raised concerns regarding risks access to the internet may pose to the young people. Whilst safety plans were in place and adhered to, the objectives of the plan were easily undermined and proved not to be an effective strategy in supporting staff to identify, assess and manage potential risks.

Current control mechanisms with respect to internet access should be reviewed to ensure there is a robust strategy in place; that supports young people to access the internet safely and provides adequate protection from potential harm. Young people should be consulted as part of the risk management plan and be supported to understand any potential restriction that may be required. Staff should be assured that any strategy in place can identify risk to inform risk assessment and management. An area for improvement was identified.

Staff worked collaboratively with the wider multidisciplinary team with the aim to meet people's holistic needs. Regular meetings were scheduled to assess young people's needs, any presenting risks and to plan appropriate interventions aimed at achieving positive outcomes for the young people. Records reflected an individualised and co-ordinated approach involving relevant professionals to ensure a robust response to behaviours which could result in harm.

Looked after child (LAC) reviews are a forum for reviewing a young person's placement plan and making decisions in relation to the care and support young people should receive in line with their needs, wishes and potential risks. Therefore, it is important that LAC reviews are held within specified timescales to ensure young people's assessed needs are aligned to the care delivered by the staff team. The provider was aware of their responsibilities with respect to the review process and escalated concerns regarding delay as appropriate. Staff also maintained records of meetings pending receipt of the minutes in order to ensure good communication and record keeping practices within home.

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

Stable leadership arrangements are essential to embedding effective governance, ensuring robust oversight of care practices in the home, and in providing clear direction and quality support to staff. When sustained, this creates a foundation for positive outcomes for the young people, in a setting where they can thrive and reach their full potential.

There had been a change to the management arrangements since the last inspection. An acting manager arrangement was in operation on the day of inspection. The manager presented as improvement focused and committed to maintaining a therapeutic and young person centred approach to care. The staff team have benefited from the visible leadership demonstrated by the manager and their commitment to promoting an open, supportive culture within the home.

Advice was given to the provider's senior representatives to ensure any change to the management arrangements in the service are communicated to RQIA in accordance with the regulations. Whilst assurance was received that there were effective management arrangements in place within the home, a registered manager's application must be submitted to RQIA without delay. An area for improvement was identified.

### **5.2.3 Application to vary registration of the service**

The inspection focus sought to assess a variation application submitted to RQIA to change the age range of the young people accommodated within the home. This application included a desktop review of documentation; an inspection of the premises; discussions with staff and the young people; and sampling of care documentation.

The SOP was reviewed and clearly described the nature and range of services to be provided and addressed all of the matters required by Regulation 4 of the Children's Home's Regulations (Northern Ireland) 2005. The young people's guide was informative and accessible to young people who lived in the home.

The home was nicely decorated and presented as a comfortable, homely space for young people to live, with soft furnishings and artwork helping to create a welcoming environment. Young people's bedrooms had been decorated in line with their wishes and preferences. A well maintained outdoor space was also available to the young people.

The home was sufficiently staffed, ensuring young people had access to their caregivers when needed. 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.

A review of the training matrix provided assurance that the staff team had the necessary skills and experience to deliver the care approach described in the SOP. Staff had access to an extensive training programme including training specific to the behavioural needs of the young people, safeguarding, fire and food and hygiene safety. The staff team were compliant in achieving training and refresher timescales, all of which support staff to deliver safe, effective, and young person centred care that responds to individual needs and supports effective risk management. The auditing of training compliance was overseen by the monitoring officer on a monthly basis.

The application to vary the registration was approved post inspection.

## 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
<b>Total number of Areas for Improvement</b>	1	1

Areas for improvement and details of the Quality Improvement Plan were discussed with the 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	
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 7  <b>Stated:</b> First time  <b>To be completed by:</b> 25 February 2025	<p>The registered person shall ensure that an application to register a person as manager is submitted without delay.</p> <p>Ref: 5.2.2</p> <p><b>Response by registered person detailing the actions taken:</b>            Appointed manager has submitted application to become registered manager through RQIA portal on 21.02.25</p>



<b>Action required to ensure compliance with The Minimum Standards for Children's Homes (Department of Health) (2023)</b>	
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 3  <b>Stated:</b> First time  <b>To be completed by:</b> 25 February 2025	The responsible person shall ensure that action is taken to review effectiveness of internet safety within the home. Young people should be consulted as part of this review.  Ref: 5.2.1
	<b>Response by registered person detailing the actions taken:</b> The young peoples internet has been set to the highest restriction level and any appropriate sites added to the safe list to keep disruption to their online activity at minimal. Key work is ongoing with both young people around safe browsing and device checks continue daily.

***\*Please ensure this document is completed in full and returned via the Web Portal\****



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