

Children's Home Inspection Report
IN043669
15 December 2023

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: Not registered - application submitted
Size of home: Small Children's Home – Can accommodate up to four children	
Brief description of the accommodation/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.	

2.0 Inspection summary

An unannounced inspection took place on 15 December 2023 between 10 a.m. and 4 p.m. The inspection was conducted by a care inspector to determine if the home was delivering safe, effective and compassionate care, and if the service was well led.

Positive feedback was received from staff regarding their induction, communication within the team, trauma informed practice used by staff and managerial support. Staff turnover was identified as an issue in the home, in response to this the management team had been focused on supporting the care team to deliver care by providing additional managerial support, bank and agency staff when required. One area for improvement was identified in relation to evidencing safe recruitment.

Environmental damage, whilst visible was being addressed. Some repair work had already been carried out and the home presented as clean and homely. Evidence was available that the staff had responded effectively to risks relating to fire safety.

There was evidence of a caring approach tailored towards each young person's individual needs; staff spoke compassionately about the young people and there was a focus on building relationships. Staff were mindful of the impact young people's dysregulation had on each other and assurance was provided that this is managed safely and monitored. The staff spoken with were confident in managing risk within the home.

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

The findings of this report will provide the management team 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, information about the service was reviewed to plan the inspection.

A range of documents were examined on site 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 can 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 management team at the conclusion of the inspection.

4.0 What people told us about the service

The inspector spoke with two care staff and four members of the management team on the day of inspection. There were no young people present during the inspection.

Feedback from staff provided a view that managers were supportive and approachable; thorough induction processes were in place; regular team meetings were useful in communicating the needs of the young people and conducive to a co-ordinated approach to care; and that mechanisms that support staff such as supervision and learning following incidents were available and accessible for staff.

Management feedback on the day of inspection highlighted staffing pressures upon the service as a result of staff turnover within the team. The management team confirmed that senior managers were informed regarding the staffing pressures; and additional managerial support, bank staff and agency staff was provided when required. Permanent staff have been recruited and inducted to the home recently, there was also a strong emphasis on stabilising the team and relationship building with staff and the young people they cared for.

No questionnaires providing feedback were returned to RQIA 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?

The last inspection to this home was prior to the registration of the service and was undertaken on 23 March 2023 by a care inspector; no areas for improvement were identified.

5.2 Inspection findings

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

Discussion with the person in charge and a review of records confirmed staff records were digitally stored and contained essential information such as qualifications, experience and professional registration. However, some of the records were not easily accessible during the inspection. Evidence of pre-employment checks which provide assurance that safe recruitment practices were in place for all staff, including bank and agency staff, should be available. An area for improvement was identified in this regard.

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

Arrangements in relation to fire safety were reviewed within the home. The staff team had preventative and responsive actions in place that were assessed as proportionate to the risk of fire in the home. An updated fire risk assessment had been undertaken and the report was awaited, however assurance was provided that action had been taken to reduce or eliminate risks identified. The review of other records sampled confirmed staff had received fire training, fire safety checks were completed and fire safety drills had been undertaken. These actions promoted a consistent approach across the team in relation to intervention and risk management strategies. Robust governance arrangements were in place to monitor fire safety compliance and to identify fire risks that could impact upon safe, effective and compassionate care.

A review of the environment was undertaken and the home presented as clean and tidy. Young people were supported to personalise their bedrooms; this approach promoted young people's ownership of their own private spaces within the home. During the inspection maintenance and repair work in the home was being addressed in a timely manner.

5.2.3 What arrangements are in place to ensure that staff can identify, report and learn from adverse incidents?

The inspection focused on the current group dynamic and how this was impacting on the young people's lived experience. Staff said they were cognisant of the potential that young people may be negatively impacted by the group dynamic when there are periods of dysregulation. Staff relayed that they felt equipped to deal with crisis management and in particular, providing diversionary activities. Specialist therapeutic input was provided through debriefing with the multi-disciplinary team. This supported staff decision making and helped ensure that the right care was provided at the right time. Discussion with staff at all levels and records inspected provided assurance that the staff team monitor the group dynamic for indications of concerning behaviours such as bullying, or concerns relating to young people's relationships, sexuality and maturity.

The arrangements in place to promote the welfare, care and protection of young people was reviewed. Advice was provided to the management team regarding ensuring all relevant incidents or events are notified to RQIA in accordance with Regulation 29 of The Children's Homes Regulations (Northern Ireland) 2005. Compliance in this area will be reviewed during future inspection activity.

Discussion with staff provided a view that a learning culture existed within the team and incidents were reflected upon using a trauma informed approach. The multi-disciplinary team supported staff to safely manage risk and ensure the safety of the young people and staff in the home.

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**

	Regulations	Standards
Total number of Areas for Improvement	1	0

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 Stated: First time To be completed by: 27 January 2024	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. Ref: 5.2.1
	Response by registered person detailing the actions taken: This response contained service identifiable information and therefore has not been included in this report.

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