



The Regulation and
Quality Improvement
Authority

Children's Home Inspection Report
IN042976
19 July 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: Health and Social Care Trust Located within: – South Eastern Health and Social Care Trust	Manager status: Registered
Brief description of how the service operates: This home is registered to provide care for children/young people who have been assessed as having physical and or intellectual needs/disability and in need of short break care. The home is currently not providing short breaks. The provider has submitted an application to RQIA to temporarily cease short breaks and instead provide two medium term care places for a specified period of time. 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 19 July 2024 between 8.55 a.m. and 5:30 p.m. The inspection was conducted by a care inspector.

The inspection assessed progress with the five areas for improvement identified at the last care inspection. The inspection also reviewed an application to vary the home's registration; the short breaks will temporarily cease and instead two medium term care places will be provided for a time limited period.

Four areas for improvement were met in relation to the availability of support staff, staff meetings, handover records and support plans. One area for improvement was not reviewed and carried forward to the next inspection, this was in relation to pathway plans.

One new area for improvement in relation to the young people's guide was made.

The inspector concluded that appropriate arrangements were in to temporarily cease short breaks and provide medium term care for a specified period of time. The variation application was subsequently approved by RQIA following this inspection.

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, the staff managing the home and parents of young people who lived in 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.

The inspector was cognisant during the inspection that some of the young people's communication and cognitive needs prevented conversation being held, therefore periods of observation was used to assess the young people's lived experience within the home.

Observations of staff provided assurance that staff were responsive to the young people's individual needs and were focused on ensuring that young people were provided with the right care at the right time. Staff were caring and warm in their interactions with the young people. They demonstrated their ability to effectively and sensitively respond to behaviours that challenge. Some staff discussed difficulties with staffing levels due to absence, however they advised that safe staffing levels were maintained. Staffing is discussed in greater detail in section 5.2.3.

Parents told us that they were satisfied with the care provided and were updated by the staff about any changes to their child's care.

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 12 February 2024		
Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Minimum Standards for Children's Homes (January 2023)		Validation of compliance
Area for improvement 1 Ref: Standard 17.5 Stated: Second time	The registered person shall ensure that support staff are available within the home to ensure that standards relating to their respective roles and responsibilities are met. This is in relation to the cook's availability to the home.	Met
	Action taken as confirmed during the inspection: This area for improvement was met.	
Area for improvement 2 Ref: Standard 17.12 Stated: First time	The registered person shall ensure that arrangements are in place to support staff to deliver safe and effective care through access to regular staff meetings.	Met
	Action taken as confirmed during the inspection: This area for improvement was met.	
Area for improvement 3 Ref: Standard 18 Stated: First time	The registered person shall ensure that handover records should consistently be signed and dated and maintained in line with professional standards and in accordance with NISCC codes of practice.	Met
	Action taken as confirmed during the inspection: This area for improvement was met.	
Area for improvement 4 Ref: Standard 6 Stated: First time	The registered person shall ensure that individualised support plans are further developed to identify how each of the young people's physical emotional and social development needs will be understood and promoted	Met

	Action taken as confirmed during the inspection: This area for improvement was met.	
Area for improvement 5 Ref: Standard 14 Stated: First time	The registered person shall ensure that pathways plans are developed to identify, prepare and support young people's transition into adult care placements	Carried forward to the next inspection
	Action taken as confirmed during the inspection: This area for improvement was not reviewed and was carried forward to the next inspection.	

5.2 Inspection findings

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

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 and welcoming environment was observed. Although there was a focus on providing a low stimulus environment to meet some of the young people's needs, the home was still homely and a system was in place to ensure a timely response to any repairs that were required. Ample indoor and outdoor space was available to provide the young people with physical and sensory stimulation. Suitable spaces were also available for the young people to relax.

Staff promoting the social aspect of eating together was observed at inspection. The young people were provided with a tasty, varied and well-balanced diet. Staff on the day of inspection had a good understanding of each of the young people's individual food likes, dislikes and any dietary requirements.

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

Individual assessments and care plans were in place for each young person and were based on the young people's assessed needs. Effective communication systems and processes were in place that include the parents and families in a meaningful partnership. There was evidence of partnership working with parents and the multi-disciplinary team. Records confirmed that intervention and support was sought from a range of professional agencies including mental health teams. An open and transparent culture which facilitated the sharing of information was evident.

Positive behaviour support plans were reviewed and were evidenced to guide and direct staff in their interventions with the young people.

Records were stored safely and securely in line with data protection.

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

Review of the home's monthly monitoring reports (these reports are written by the provider monthly on the conduct of the home, and are submitted to RQIA) prior to inspection and discussions with staff identified some difficulties in relation to staff sickness. At the time of inspection there was improvement in relation to this. Discussion with the staff managing the home provided assurance that staffing levels were safe and the number, experience, qualifications and skill mix of staff met the needs of the young people. Although banking and agency staff were used, they were a consistent pool of staff; who know the home and young people.

Review of agency staff files confirmed safe and robust recruitment practices were in place. Records confirmed the staff team were a mix of skilled and qualified staff, who were assessed as competent to deliver the right care at the right time. Records were in place that showed staff working each day, the capacity in which they worked and the identified person in charge. Systems were also in place to ensure staff were appropriately registered with their professional body.

5.2.4 Application to vary registration

The home had temporarily ceased the provision of short breaks to provide two medium term places for a specified time limited period. The application to vary the registration was reviewed in relation to this at inspection. The inspector was assured that the required skill mix of staff was providing care with the appropriate knowledge and training to meet the needs of the young people living in the home. Therefore, the variation application was subsequently approved.

Review of the young people's guide identified this document should be improved to ensure this document is fit for purpose to share with the young people prior to admission and it should contain the information young people need to know to live in the home. Specifically, this guide should be updated to include the management arrangements within the home, the advocacy and mentoring arrangements and procedures for responding to young people who are missing. This was identified as an area for improvement.

6.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with **The Minimum Standards for Children's Homes (Department of Health) (2023)**

	Regulations	Standards
Total number of Areas for Improvement	0	2*

* the total number of areas for improvement includes one which was carried forward for review at the next inspection.

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 Minimum Standards for Children's Homes (Department of Health) (2023)	
Area for improvement 1 Ref: Standard 14 Stated: First time To be completed by: 5 December 2023	The registered person shall ensure that pathways plans are developed to identify, prepare and support young people's transition into adult care placements
	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. Ref: 5.1
Area for improvement 2 Ref: Standard 15.4 Stated: First time To be completed by: 19 September 2024	The registered person to ensure the young people's guide is updated. The information provided must include the management arrangements within the home, the advocacy and mentoring arrangements and procedures for dealing with missing young people. Ref: 5.2.4
	Response by registered person detailing the actions taken: Young Peoples Guide has been updated.

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



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