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#### 1.0 Service information

Service Type:	Manager status:
Children's Home	Registered
Provider Type:	
Health and Social Care Trust	
Located within: - Belfast Health and Social Care Trust	

#### Brief description of how the service operates:

The children living in this home have had adverse childhood experiences which has resulted in them requiring residential care.

This home is registered as a small children's home as defined in <u>The Minimum Standards for</u> Children's Homes (Department of Health) (2023).

#### 2.0 Inspection summary

An unannounced inspection took place on 13 June 2024 between 9.00 a.m. and 4.50 p.m. The inspection was conducted by a care inspector.

The inspection assessed progress with all areas for improvement identified during the previous care and pharmacy inspections and to determine if the home was delivering safe, effective and compassionate care and if the service was well led.

All areas for improvement from the last inspection were met and no new areas for improvement were identified.

Review of records, observations of care, and discussions with staff and the management team identified that staff were committed to providing child centred care. In addition, the children had access to a network of professionals to support and guide their care and opportunities were available for the children to develop positive relationships with others in their community.

Staff used a relational approach with the children, they engaged with the children to develop strategies to manage their behaviour and self-regulate, rather than focus on the use of consequences to manage their behaviours which is consistent with trauma informed care.

There were effective leadership arrangements in place; the management team were supportive of staff and readily available to provide advice and guidance to them.

#### 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 the children, 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 the children, 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 and deputy manager as part of the inspection process.

#### 4.0 What people told us about the service

The inspector spoke with children, the manager, deputy managers and staff during the course of the inspection.

No feedback was received by RQIA via questionnaires or electronic survey post inspection.

Staff were observed interacting with the children in a confident and relaxed manner; they demonstrated their positive regard for the children and for what they were saying. Staff were attentive and fully engaged with the children and encouraged open communication, for example the children were encouraged to voice their opinions to the inspector and other visitors on the day of inspection.

Children spoken with raised no concerns with regard to the care they received. The children were observed as relaxed and at ease in the home environment and in their interactions with staff.

Discussions with staff and the management team confirmed that the staff team are compassionate, committed and highly motivated to provide safe, individualised and child centred care. The emotional impact of the work on staff is recognised and there was a strong culture of reflection and learning in the home. Staff described a strong team identity, and confirmed that the management team engage openly with staff and staff feel their contributions are valued and respected. Staff were confident to raise concerns and that the management team would be responsive.

### 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 service was undertaken on 24 August 2023 by a care inspector.

Action required to ensure Regulations (Northern Ire	e compliance with The Children's Homes	Validation of compliance
Area for improvement 1  Ref: Regulation 16  Stated: Second time  To be completed by: 30 June 2023	The registered person shall ensure robust processes are in place for the implementation and review of restrictive practices. Records should clearly evidence that:  - it is implemented on the basis of an assessed need or risk related to the individual child - it is the least restrictive option and all other options have been exhausted - it has been agreed with the multidisciplinary team, the child and/or their representative as appropriate, - there is a timescale for review, which will involve review of its effectiveness/outcomes and the impact on the child.  Action taken as confirmed during the inspection: This area for improvement was met.	Met
Area for improvement 2	The registered person shall ensure that staff	
Ref: Regulation 20 (1) Stated: Second time	who manage/administer medicines receive training and competency assessment on the management and administration of medicines in accordance with the Trust's policy.	Met
<b>To be completed by:</b> 28 July 2023	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 11  Stated: Third time  To be completed by: 2 March 2024	The registered person shall ensure a review of the external space is undertaken in order to improve the facilities and activity areas available to young people; to meet the needs of the children and young people for whom the home is designed. Young people should be consulted during this review.	Met
	Action taken as confirmed during the inspection: This area for improvement was met.	
Area for improvement 2  Ref: Standard 16  Stated: Second time	The registered person shall ensure quality assurance mechanisms are in place in relation to care records which will address any deficits or concerns regarding quality or inconsistency of recording.	Met
To be completed by: 14 July 2023	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 children are getting the right care at the right time?

The staff and management team had an in-depth knowledge of the children. Staff focussed on supporting the children to develop strategies to self-regulate, in keeping with their age and stage of development.

Care records to support and guide staff to meet the needs of the children were comprehensive. There was evidence that the service engaged with a range of professionals which strengthened their ability to meet the needs of the children and manage behaviours that may place the children at risk.

Review of incident records and discussion with a deputy manager provided evidence that staff took appropriate and timely actions to minimise risks to the children and incidents were reported to relevant others as appropriate, with oversight and review by the management team.

Each child had an individualised risk assessment and crisis support plan that were available for reference, reviewed and updated as required. Discussions with staff provided assurances they operated from a strong value base, which was child centred and child's rights led.

There were individual restrictive practice records maintained for each child and the inspector was satisfied with the rationale for current restrictive practices being implemented in the home. The use of restrictive practices was considered by staff to be an option of last resort and implemented only when necessary and in proportion to the risk of harm if no action is taken. Restrictive practices were also implemented and reviewed in partnership with the multi-disciplinary team as appropriate and were appropriate were discussed with the children.

# 5.2.2 How does the service ensure children have access to consistent care which supports positive experiences and outcomes?

Relationships between staff and children can be the most influential component in supporting a child to thrive, have positive experiences, make safe choices and reduce behaviours that place them or others at risk. Observations, discussions with staff and the management team and review of care records provided evidence of staff effectively using a relational approach to support children to adapt, thrive and develop.

Staff focused on the positive attributes of the children and were motivated to support the children to have access to fun experiences in keeping with their age and stage of development and cultivate their individual interests. This was also evident in the decoration of each child's individual space and plans in place to involve the children in summer activities.

Trauma informed practice was embedded within this service. Staff understood the individual needs and context for each child's behaviours and were also mindful of the impact of their actions on the wider group dynamics in the home and on each child's lived experience. Staff expressed pride when describing the children's positive outcomes and achievements.

Stable routines in the home promoted attendance at school and planned activities. Observations of staff interactions with the children and discussions with staff and management team provided evidence that staff were skilled and attuned to listening to what the children were saying and what they were communicating with their behaviour. This informed staff actions and engagement with the children.

The management team were visible and accessible to staff, were involved in the direct care of the children when needed and routinely engaged in mentoring and coaching staff to ensure that care was consistently provided. Collective leadership, shared decision making and shared ownership was evident amongst the staff team with regard to how they care for the children and addressed any issues of concern.

There were a number of effective formal and informal support arrangements for staff, including daily handovers, team meetings and staff supervision. These arrangements support consistency of approach and responsive and timely interventions to ensure the children are receiving the right care at the right time.

## 5.2.3 How does the service ensure children experience a safe and a high quality environment?

Maintaining the environment to a high standard promotes a therapeutic and safe environment in which children can feel valued. The inspector noted that parts of the environment required redecoration and some repairs were required to fixtures and fittings. Assurances were provided

by the manager that this was being addressed and progress with this will be monitored via monthly monitoring reports.

The manager also described plans which are underway to improve the garden space and create access to more sensory activities within the garden area.

The home environment was observed to be clean and tidy and free from any obvious hazards and there was an abundance of fresh fruit and snacks available in the kitchen for the children to have outside meal times.

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

There was a stable, motivated and experienced management team in the service who provided the capacity to support improvement activities. The management team were developing an audit schedule, once embedded will enable the management team to evaluate the quality of practice recording, understand how well the service is performing and confirm that the management team and staff are operating as intended. This quality improvement approach was welcomed by RQIA and progress will be reviewed on future inspection activity.

Senior management in the organisation maintained regular contact with the manager, and the staff team via team meetings; this provided effective additional safeguards and assurance regarding the quality of care provided.

The management team were proactive in anticipating the type and level of resources needed to ensure the children had access to safe quality care. When gaps were identified a risk management approach was adopted to minimise, or mitigate potential harm, whilst necessary actions were taken to achieve the necessary resources.

#### 6.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with manager as part of the inspection process and can be found in the main body of the report.





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