

# **Children's Home Inspection Report**

**IN043066**

**30 August 2024**

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

## 1.0 Service information

<p><b>Service Type:</b> Children's Home</p> <p><b>Provider Type:</b> Health and Social Care Trust</p> <p><b>Located within:</b> – Northern Health and Social Care Trust</p>	<p><b>Manager status:</b> Registered</p>
<p><b>Brief description of how the service operates:</b></p> <p>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 Regulation and Quality Improvement Authority (RQIA) received two applications to vary the registration of the service since April 2024.</p> <p>The home was not providing short breaks. At the time of inspection, the provider was in the process of submitting a further application to RQIA to make a temporary change to the registration of this service to temporarily cease short breaks and provide medium to long term care for identified children.</p> <p>Children and young people will be referred to collectively as children throughout the remainder of this report.</p>	

## 2.0 Inspection summary

An unannounced inspection took place on 30 August 2024 between 9.20 a.m. and 3.50 p.m. The inspection was conducted by a care inspector. Inspection feedback was provided to the manager on 2 September 2024.

The inspection assessed progress with areas for improvement identified at the last care inspection. The inspection also reviewed two applications submitted to RQIA which sought to vary the home's registration to support breaks for children whose needs were outside of the Statement of Purpose (SoP), and to support medium to long term care for children.

One area for improvement was met with regard to care plans and an area for improvement with regard to complaint procedures was carried forward to the next inspection. Two new areas for improvement were identified with regard to PRN (pro re nata) medication recording procedures and the environment.

Whilst no concerns were identified with regard to the direct care being provided to the resident children, a meeting was convened by RQIA with the provider's senior management team on 17

September 2024 to discuss RQIA's concern that the operation of this service has been out with its registration and Statement of Purpose, with no definitive plans or timeframes for the service to return to compliance with its registration. In addition, RQIA were concerned regarding the high number of vacancies in substantive staffing and the staffing rota's reliance on bank (temporary) staff.

The provider's senior management team provided assurances to RQIA during and after this meeting that they are cited on the areas to be addressed; and have an effective plan in place to bring the service back into compliance with its intended registration and address the current staffing challenges.

Information has been gathered throughout the inspection process and subsequent discussions with the provider's senior management team to support assessment of the service's two variation applications. The variation applications to support breaks for children whose needs were outside of the Statement of Purpose (SoP), and to support medium to long term care for children 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 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 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 as part of the inspection process.

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

The inspector met with children, staff, the deputy manager and manager as part of the inspection process. Questionnaires were also provided to the manager to share with staff, children and parents/representatives. No completed questionnaires were received.

On the day of inspection staff supported the children to engage in their planned routines and activities. It was positive to observe the children playing and having fun in the garden.

Children recollected fun activities they had engaged in over the summer with staff including trips to the zoo and fun parks.

Children who did not communicate verbally were observed to be relaxed and comfortable in their surroundings; in their interactions with staff; and observations of staff practice confirmed their needs were attended to in a compassionate manner. Staff were responsive to the needs of the children and aligned their communications to the children's individual needs.

Some staff reflected that the recent changes in the home's SoP and gaps in the substantive staffing team due to vacancies and leave arrangements has created a sense of instability. However, all staff spoken with confirmed they receive good support from the management team, there are effective arrangements in place with regard to handovers, team meetings and an open door arrangement facilitated by the manager, which enables them to access the necessary support to fulfil their role and responsibilities.

Staff reported there was good team work and although there has been an increase in the use of bank staff, the bank staff are long standing staff members and this promotes consistency in the delivery of care.

Discussions with staff and the management team established they were committed to supporting the children to feel safe and secure and to provide high quality and nurturing care which enables the children to make progress and improve their outcomes.

## 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 15 November 2023		
Action required to ensure compliance with The Minimum Standards for Children's Homes (Department of Health) (2023)		Validation of compliance
<b>Area for improvement 1</b> <b>Ref:</b> Standard 6 (1) (2) <b>Stated:</b> First time	The registered person shall ensure that individualised support plans are further developed to identify how each of the children's immediate and longer term physical emotional and social development needs will be understood and promoted.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> This area for improvement was met.	

<b>Area for improvement 2</b>  <b>Ref:</b> Standard 21 (11) (12)  <b>Stated:</b> First time	The registered person shall ensure that that children, parents or carers satisfaction or otherwise with the management and outcome of the complaint is recorded. There should be mechanisms in place to use this information to audit the effectiveness of the complaints process and action taken to improve the care delivery following a complaint.	<b>Carried forward to the next inspection</b>
	<b>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.</b>	

## 5.2 Inspection findings

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

Review of records, observations of care, and discussions with staff and the management team identified that staff were committed to providing child centred care. Children were observed engaging with staff in a manner that demonstrated trusting and emotionally supportive relationships were being fostered.

Staff demonstrated a clear understanding of the additional focus necessary when providing care and support for children requiring a medium to long term residential placement rather than short breaks. Whilst the staff team were skilled at ensuring the safety and wellbeing of the children in their care and adhering to relevant care plans; they understood the necessity to take on a more comprehensive role with those in the children's network, in developing and implementing individualised care plans and focusing on long terms goals for each child's development and wellbeing.

The manager was currently overseeing a review of the children's care plans and risk assessments, and as appropriate, this review was being informed by the network of multi-disciplinary professionals involved with the individual children.

Sampling of the children's care records identified some variation in the quality of the records maintained with regard to the detail, language used and adherence to good recording practices. It is essential that management systems are in place to ensure safe and effective care through the effective monitoring, auditing and reviewing of care records. Discussions with the manager established that reduced managerial capacity had impacted the home's usual auditing programme. However, the recent appointment of a permanent deputy manager to work alongside the manager will increase governance capacity within the service and should support driving improvement in this area. This will be reviewed during future inspection activity.



When used appropriately, PRN medication, which is administered “as needed” can offer benefits to children who may experience episodes of heightened distress or behavioural challenges that cannot always be anticipated. A review of the use of PRN medication in the home determined that it was rarely used and only as prescribed as part of a broader behavioural and therapeutic strategy.

However, it was identified that the service would benefit from improving the governance arrangements for administration of PRN medicines within the children’s care records. Care records maintained should reflect the; parameters for the administration of PRN medication, including rationale for its use; minimum and maximum doses permitted within specific timeframes; strategies utilised before the PRN medication was administered and the effectiveness and/or outcome of the medication. This will improve accountability, transparency and the ongoing evaluation of the medication use and support identification of any patterns. An area for improvement was identified.

### **5.2.2 How does the service ensure that safe staffing arrangements are in place?**

Safe staffing levels in a children’s home is crucial to ensuring the wellbeing, safety and development of the children. The inspector was assured that appropriate staff to child ratios were maintained to ensure adequate support and supervision, which were determined by each child’s individual needs and planned activities. No concerns were identified with regard to the direct care being provided to the children.

Staff reported effective teamwork and communication among the staff team; there were clear communication channels between the staff team and the management team to enable staff to stay informed about each child’s needs, behaviour and any potential risks.

However, the inspector was concerned regarding the high number of vacancies in the service’s substantive staffing and the reliance of the staffing rota upon bank staff. Operating a children’s home with a high number of vacancies can have implications for the quality of care; the wellbeing of the remaining staff; reduce capacity for staff training and development; and impact on governance and managerial roles and responsibilities, as the priority is to ensure safe staffing levels for the direct care of the children.

During the meeting on 17 September 2024, assurances were provided by the senior management team that they understood the importance of ensuring a stable and consistent staff team was available, to maintain continuity of care and promote the well-being and development of children. They described progress with staff recruitment and their commitment to drive this forward. In addition, they provided assurances that the service utilises a cohort of established bank staff which ensures operational continuity and supports the children and permanent staff without compromising on the stability and consistency of care.

Discussions with staff and the management team evidenced the service is well led, by an experienced and effective manager; who has demonstrated the ability to manage staff rotas, support staff wellbeing, promote staff training and align this to the needs of the children and foster a supportive and accountable culture. However, RQIA have highlighted to the provider’s senior management team that continued operation of the service outside its original SoP could impact on the ability to sustain this. The senior management team confirmed during the

meeting on 17 September 2024 that they were committed to returning the home to its original SoP and how this was being supported with the cooperation of other community services.

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

A review of the home's environment evidenced there was adequate space for the resident children's individual needs. The children had access to a multi-sensory room and a range of activities that were both age appropriate and aligned with their developmental needs. The children's bedrooms were personalised as appropriate and provided a nurturing environment for imaginative and creative play.

Environmental restrictions implemented are discussed and agreed with the children's multi-disciplinary team and representatives, as appropriate, to ensure the safety and wellbeing of the children, and mitigating actions are in place to reduce the impact for the children.

Whilst the safety of the environment was well managed, there was a noticeable need for the repainting of the interior and exterior of the home. The walls show signs of wear, including faded and chipped paint. Redecoration of the home would not only enhance the aesthetic quality of the environment, it would contribute to a cleaner, brighter and visually stimulating environment for the children. An area for improvement was identified.

### 5.2.4 Application to vary registration

As outlined in Section 2.0, the inspection process considered the impact the applications to vary the registration of the service were having on the delivery of care and the children's lived experience in this service. RQIA were assured that the current arrangements for the care of the children in the home were aligned to the temporary change from the provision of short breaks to medium to long term care for identified children.

Discussions with the provider's senior management team on 17 September 2024, evidenced they were cited on the associated challenges with respect to implementing temporary changes to the service's registration and SOP. They reaffirmed their commitment to progressing alternative care arrangements for children where appropriate and realigning the home with its original registration and SoP. This will remain under review with RQIA.

## 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>	2	1*

\* the total number of areas for improvement includes one that has been carried forward for review at the next inspection.

Areas for improvement and details of the Quality Improvement Plan were discussed with manager as part of the inspection process. The timescales for completion commence from the date of inspection.

<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with The Children's Homes Regulations (Northern Ireland) 2005</b>	
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 16  <b>Stated:</b> First time  <b>To be completed by:</b> 27 September 2024	The registered person shall ensure that records should be available and maintained for the administration of PRN medication for the management of behaviour, which provides: <ul style="list-style-type: none"> <li>- clear thresholds to guide staff when the medication is required</li> <li>- a record of interventions tried prior to giving medication, and</li> <li>- review of outcome/impact of medication on the young person.</li> </ul> Ref: 5.2.1
	<b>Response by registered person detailing the actions taken:</b> A template for recording PRN medication for the management of behaviour will be devised that documents the above indicators.
<b>Area for improvement 2</b>  <b>Ref:</b> Regulation 30  <b>Stated:</b> First time  <b>To be completed by:</b> 20 December 2024	The registered person shall ensure that the exterior of the home and interior communal areas are repainted.  Ref: 5.2.3
	<b>Response by registered person detailing the actions taken:</b> The SWSM will complete a minor works request for external & internal painting and forward to Estates Services.
<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 21 (11) (12)  <b>Stated:</b> First time  <b>To be completed by:</b> 15 February 2024	The registered person shall ensure that children, parents or carers satisfaction or otherwise with the management and outcome of the complaint is recorded. There should be mechanisms in place to use this information to audit the effectiveness of the complaints process and action taken to improve the care delivery following a complaint.  Ref: 5.1
	<b>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.</b>



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



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