



MONITORING QUALITY POLICY

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1. Introduction to the Policy

This policy sets out the framework, principles, and procedures that **Byram House** follows to monitor, assure, and improve the quality of care and support provided to children and young people. The policy applies to all staff, agency workers, volunteers, and contractors, as well as to managers, the Responsible Individual, and Directors.

The Home is Byram House, which comprises the two residences at 62 Deighton Road and 66 Deighton Road. This policy applies equally across both residences.

Byram House is committed to making a positive difference to every child and young person placed with us. We are committed to working with partners to ensure that we are always child centred, that children and young people are happy and safe, and that they can achieve their potential.

Everyone involved with the home has an important contribution to make to ensure we do the best we can for the children and young people we support.

The **Quality Assurance Framework** set out in this policy provides us with a range of key mechanisms that help us set direction, plan delivery, manage risk, monitor activity, and review outcomes for children against our priorities.

The objectives of this policy are to:

- Ensure our work is effective and high quality.
- Demonstrate continuous improvement.
- Meet regulatory requirements for self-assessment and quality assurance (Children's Homes Regulations 2015).
- Measure the impact of service delivery on outcomes for children.
- Ensure the voice of the child/young person is heard and considered in assessment, planning, and decision-making.
- Provide a coordinated approach to quality assurance, including independent views (Regulation 44), internal audits, learning case reviews, and Ofsted inspection readiness.

2. How this Policy Benefits the Home

This Monitoring Quality Policy benefits Byram House in the following ways:

- **Legal Compliance** – It ensures the home meets its duties under the **Children’s Homes (England) Regulations 2015** (particularly Regulations 44, 45, 46), the **Quality Standards**, and the **Social Care Common Inspection Framework (SCCIF) 2026**. It also supports compliance with **Working Together to Safeguard Children 2026**.
- **Continuous Improvement** – It establishes a cycle of audit, review, action planning, and learning, ensuring that the home does not become complacent and that practice evolves in line with best practice and regulatory changes.
- **Independent Scrutiny** – It requires monthly unannounced visits by a Regulation 44 independent visitor, providing an objective view of the home’s quality and safeguarding.
- **Data-Driven** – It uses the Clear Care electronic system to generate reports on safeguarding, incidents, missing episodes, complaints, health and safety, and consequences, enabling trend analysis.
- **Child-Centred** – It places the child’s voice at the centre, through consultation, feedback, and review of care planning.
- **Accountability** – It defines clear roles and responsibilities for staff, managers, the Responsible Individual, and Directors, with RAG-rated action plans for non-compliance.
- **Inspection Readiness** – It provides a clear process for Ofsted inspections, including preparation of Annex A, handling unannounced visits, verifying inspector identity, and completing action plans.
- **Learning from Incidents** – It mandates Learning Case Reviews after serious incidents, placement breakdowns, or safeguarding concerns, with action plans to prevent recurrence.
- **Training Framework** – It sets out annual training for staff on quality assurance, audit processes, and use of Clear Care.

3. Definitions & Legislation

3.1 Definitions

Term	Definition
Home	Byram House, the children's home registered with Ofsted, comprising two residences at 62 Deighton Road and 66 Deighton Road.
Company	IMS Care LTD, the registered provider and legal entity responsible for operating Byram House.
Byram House	The name used throughout this policy to refer to the home and its staff.
Quality Assurance (QA)	A systematic process of checking whether services meet agreed standards and identifying areas for improvement.
Audit	A structured review of evidence (documents, records, practice) against regulatory and organisational criteria.
Clear Care	Byram House's electronic recording system (similar to a care management information system).
RAG Rating	Red, Amber, Green – a traffic light system to indicate compliance status (Green = compliant, Amber = opportunity for improvement, Red = non-compliant).
Regulation 44 Visitor	An independent person appointed to visit the home monthly, unannounced, to review the quality of care and report to Ofsted, placing authorities, and the host authority.
Regulation 45 Report	A report by the Registered Manager (twice yearly) assessing the quality of care and any actions needed, sent to Ofsted.

Statement of Purpose	A document that sets out the home's aims, objectives, and the services provided (Regulation 12).
Annex A	A document (part of the Statement of Purpose) that contains detailed information about the home, required by Ofsted.
Learning Case Review	An internal review of a serious incident, placement breakdown, or safeguarding concern to identify lessons and produce an action plan.
Ofsted	Office for Standards in Education, Children's Services and Skills – the regulatory body for children's homes in England.

3.2 Key Legislation and Statutory Guidance

Legislation / Guidance	Key Provisions	Relevance to this Policy
Children's Homes (England) Regulations 2015	Regulation 44 – monthly independent visitor visits (unannounced). Regulation 45 – manager's report on quality of care (twice yearly). Regulation 46 – Statement of Purpose and Children's Guide. Quality Standards (Standards 5–14) – cover care planning, health, education, positive relationships, safeguarding, etc.	This policy operationalises these regulations, setting out the home's quality assurance framework, audits, and reporting lines.
Working Together to Safeguard Children 2026	Requires organisations to have effective quality assurance and self-evaluation processes to safeguard children.	The home's audit and learning case review

		processes directly support this requirement.
Social Care Common Inspection Framework (SCCIF) for Children's Homes 2026	Effective 1 April 2026. Sets out how Ofsted inspects children's homes, focusing on children's lived experience, impact, and leadership.	This policy ensures the home is inspection-ready, with robust self-assessment, action planning, and independent scrutiny.
Data Protection Act 2018 & UK GDPR	Governs the handling of personal data in audits and reports.	Audits may involve reviewing personal data; the home must maintain confidentiality and lawful processing.
Health and Social Care Act 2008 (Regulated Activities) Regulations 2014	(Not directly applicable to children's homes, but similar principles of quality monitoring apply.)	Provides additional context for quality governance.
Ofsted guidance on Regulation 44 visits (updated 2025)	Clarifies that visits should be unannounced, and the visitor must be independent and report on the home's compliance and quality.	The home must ensure the independent visitor has access to records, staff, and children, and that reports are

		submitted to Ofsted and others.
Ofsted inspection framework for children’s homes (updated 2026, in line with SCCIF)	Inspectors will evaluate how the home uses self-assessment, audits, and feedback to drive improvement.	This policy directly addresses those expectations.

4. The Policy

4.1 Quality and Compliance Principles

Byram House is committed to the following quality and compliance principles:

- **Effective, high-quality work** – We are accountable for providing services of a high standard. Compliance auditing, directly related to outcomes for children, is one way to ensure this.
- **Continuous improvement** – Quality audits, feedback, and action plans contribute to individual and home performance.
- **Regulatory self-assessment** – We use evidence to identify improvements, integrate services, and develop safeguarding arrangements. We actively seek the views of children, young people, and stakeholders.
- **Impact measurement** – We audit to confirm that services are delivered effectively, safeguarding children’s welfare and making a difference.
- **Voice of the child** – We ensure that the child’s voice is heard and considered in assessment, planning, and decision-making (a core value).

4.2 The Quality Assurance Framework

The Quality Assurance Framework provides a clear and coordinated approach applying the following:

- An **annual programme** of quality assurance activities, including monthly reports and audits.
- **Independent views** of the services (Regulation 44 visits).
- **Clear roles and responsibilities** (staff, managers, RI, Directors).
- **Ownership, leadership, and accountability** at all levels.
- **Team plans** and **individual performance reviews**.
- **Accurate, timely data, analysis, and intelligence** to support performance monitoring and improvements.
- **Employee surveys**.

4.3 Auditing (Process, Clear Care, RAG Ratings)

Audit tool: The home uses **Clear Care** as its electronic recording system. Clear Care assists the audit process by providing ready access to management information and producing specific reports on:

- Safeguarding.
- Incidents.
- Missing and absent data.
- Complaints and compliments.
- Health and safety (including accidents, near misses).
- Consequences and positive measures.

Audit process:

- Audits are completed by the **Registered Manager** and the **Responsible Individual** to ensure practice and regulatory standards are met.

- **Audit meetings** are held every month. Recommendations are highlighted, and **action plans** are used to meet requirements and address identified needs.
- Findings are rated using a **RAG (Red, Amber, Green)** system:
 - **Green** – Compliant with organisational and regulatory requirements.
 - **Amber** – Opportunity for improvement; just meets compliance but can be enhanced.
 - **Red** – Non-compliance; a failure to meet requirements, placing the service at risk.
- The audit process may reveal patterns that can be addressed across the residential division.

Frequency: Monthly file checks by the Registered Manager and quarterly deep dives by the Responsible Individual.

4.4 Learning Case Reviews (Critical Incidents)

Where a matter arises that requires specific scrutiny (e.g., a serious incident, placement breakdown, or safeguarding incident), a **Learning Case Review** will be requested by the Head of Service (Responsible Individual or Director).

- The review can be undertaken by the Registered Manager, Responsible Individual, or Director, depending on the focus.
- A report of all findings will be produced, along with an **action plan** to address any shortfalls in practice or compliance.
- A record of all reviews will be held by the Director, who will suggest learning and improvements.

Purpose: To prevent recurrence, share learning across the organisation, and improve safety and quality.

4.5 Regulation 44 – Independent Visits

Requirement: Byram House will receive a visit from an **independent visitor** (Regulation 44 visitor) every calendar month. Visits are **unannounced** unless there is a specific agreed reason (e.g., introducing a new visitor or where an unannounced visit would disrupt service delivery).

Process:

- The independent visitor will review the home's operation, talk to staff and children (where appropriate), inspect records, and observe practice.
- **Reports** are provided to:
 - The Registered Manager.
 - Placing authorities for all children placed in the home.
 - The host authority (Kirklees) if requested.
 - Ofsted.
- The Registered Manager will review each report on receipt for factual accuracy and ensure the report represents the service to a high standard.
- Stakeholder feedback, the views of children and staff, will be taken into account and recorded no less than quarterly.
- The Responsible Individual will have full oversight of the report and use it as part of supervision with the Registered Manager.

4.6 Ofsted Inspections – Preparation, Verification, and Reporting

Inspection frequency: Ofsted inspects each home twice per year (both unannounced). Full inspection = two days; interim inspection = one day.

Preparation: The Registered Manager must ensure:

- The home is **always ready** for an unannounced inspection.
- **Annex A** (part of the Statement of Purpose) is prepared and updated at all times.
- All staff are aware of their roles during an inspection.

On arrival of Ofsted:

- The Registered Manager or delegate must **verify the inspector's identity**:
 - Check the inspector's ID carefully.
 - If no ID or if suspicious, **refuse entry** and contact Ofsted on **0300 123 1231** to verify.
 - Ofsted inspectors are unlikely to ask to see a child alone, visit on weekends rarely, or be known to the child.
 - If accompanied, all visitors must have ID; verify as above.
- If the contact is by telephone, take the person's number and email address, say you will reply by email. Check the email ends with @ofsted.gov.uk; if suspicious, check with Ofsted.
- **When in doubt, always check** – never be concerned about contacting Ofsted for verification.
- Inform the **Responsible Individual** immediately when Ofsted arrive. The RI will notify other parts of the service to reduce email traffic to the home during the inspection.

Feedback and reporting:

- The Registered Manager will take **verbal feedback** from the inspector at the end of the inspection and record it carefully.
- The Registered Manager must be clear about the overall grade and sub-gradings.
- As soon as Ofsted leave, the Registered Manager will email the Responsible Individual and Director with the initial judgement and findings.
- On receipt of the **written inspection report**, the Registered Manager will:
 - Confer with the Responsible Individual.
 - Complete an **action plan** for any recommendations and requirements.
 - Make the action plan available to Ofsted on any future visits or upon request.
 - Complete the **Accuracy Questionnaire** provided by Ofsted to give feedback on the inspection process.

4.7 Safeguarding and Incident Monitoring

- All safeguarding incidents and occurrences are monitored as they arise by the **Designated Safeguarding Lead** (in conjunction with the Responsible Individual).

- **Monthly monitoring** is measured during the **monthly file check** completed by the Registered Manager and sent to the Responsible Individual.
- The Registered Manager must:
 - Monitor all incidents as they occur.
 - Ensure standards of recording, reporting, associated actions, and learning.
 - Demonstrate analysis and learning into practice with their teams.
 - Ensure continual improvement of practice and performance.

4.8 Monitoring of Children's Files, Personnel Files, and Documentation

Children's files (annual audit by Registered Manager, with support from RI):

The Registered Manager will audit the quality of:

- Placement journey (pre-placement planning, referral information).
- Care planning (accuracy of home care plan against LAC information, risk assessment and management, group compatibility, health, education).
- Monthly summaries and pathway plans (where appropriate).
- All documentation must comply with Children's Homes Regulations 2015 and Quality Standards.

Personnel files:

Supervision files, CPD, and Schedule 2 requirements are monitored by the Registered Manager and Responsible Individual (audited at least annually). This area is also monitored quarterly by Regulation 44 visitors.

Performance management: Appraisals are monitored by the Registered Manager and Responsible Individual.

Service documentation (Regulations 46, 45, 13):

The Statement of Purpose, Children's Guide, Workforce Development Plan, Annual Development Plan, and Location Risk

Assessments are reviewed by the Registered Manager every six months and fully updated every 12 months. Content is audited annually by the Responsible Individual before submission to Ofsted.

4.9 Complaints, Compliments and Customer Feedback

- Monthly auditing of complaints, compliments, and feedback is undertaken by the Responsible Individual.
- Learning is gathered and shared with Registered Managers and teams, incorporated into supervision and training, and used to develop services and improve outcomes.
- Stakeholder consultation and compliments are valuable sources of feedback and are shared to inform best practice.

4.10 Regulation 45 – Registered Manager's Report

The Registered Manager is required to review:

- The quality of care provided for children.
- The feedback and opinions of children about the home, its facilities, and the quality of care they receive.
- Any actions that the Responsible Individual considers necessary to improve or maintain quality.

Frequency: Reports are submitted **twice a year** to Ofsted as required under Regulation 45.

4.11 Control of Compliance and Non-Compliance

The internal audit is based on the **Children's Homes Regulations 2015** and the **Ofsted SCCIF 2026 framework**.

Key audit questions:

- How does the service meet specified requirements?

- What documentation is missing or fails to meet requirements?
- How are non-compliance issues identified and processed?
- Does the organisation carry out in-depth consideration of shortfalls through lessons learned activity?

Responses to non-compliance include:

- A **corrective action plan** for which the Registered Manager is accountable.
- Records of non-compliance issues and corrective action reviewed by the Registered Manager, Responsible Individual, and Director to determine trends.
- **RAG-rated audit reports** sent to Registered Managers and the Responsible Individual.

Good practice identification: Where areas of good practice are identified, these are recorded and shared throughout the organisation.

5. How the Home Trains its Staff About this Policy

Byram House provides structured training to ensure all staff understand and can implement this Monitoring Quality Policy effectively.

Training Element	Frequency	Method / Content
Induction	Upon appointment	Face-to-face training covering: the Quality Assurance Framework, the role of audits (Clear Care), RAG ratings, Regulation 44 independent visits, Ofsted inspection process (verifying identity, feedback, action

		plans), incident and safeguarding monitoring, complaints/ compliments, and the dual-site operation (62 & 66 Deighton Road).
Annual refresher	Every 12 months	Classroom or virtual session covering updates to regulation (SCCIF 2026, Working Together 2026), changes to Ofsted inspection framework, case studies of audit findings, and refresher on RAG rating.
Clear Care audit training	At induction and as needed	Practical training on generating reports, interpreting data, and completing monthly file checks.
Regulation 44 report review	For managers (annually)	Training on how to review independent visitor reports, address factual inaccuracies, and implement action plans.
Ofsted inspection readiness	Annually (for managers)	Training on preparing Annex A, handling unannounced inspections, verifying inspector identity, and completing the Accuracy Questionnaire.
Learning case review	For managers (as needed)	Training on conducting a Learning Case Review, writing reports, and developing action plans.
Record keeping and data protection	At induction and refresh	Training on maintaining confidentiality during audits, sharing reports with placing authorities, and GDPR compliance.

Staff are required to:

- Read and sign this policy annually.
- Complete all mandatory training.
- Co-operate with audits and inspection visits.
- Immediately report any practice concerns to the Registered Manager.

6. Related Policies and Guidance

This policy must be read in conjunction with:

- Safeguarding Policy
- Incident Reporting Policy
- Complaints Policy
- Data Protection Policy
- Whistleblowing Policy
- Statement of Purpose (home-specific)
- Children's Homes (England) Regulations 2015 (specifically Regulations 44, 45, 46)
- Working Together to Safeguard Children 2026
- Social Care Common Inspection Framework (SCCIF) for Children's Homes 2026
- Ofsted guidance on Regulation 44 and inspection of children's homes

7. Policy Approval and Review Details



Byram House

Policy Name	MONITORING QUALITY POLICY	
Home	Byram House	
Reviewed by	Danyaal Iqbal / Mustafa Amin	Deputy Manager / Registered Manager
Approved by	Stacey Wagstaffe	Responsible Individual
Date	May 2026	