



Jersey Care  
Commission

# **INSPECTION REPORT**

**01 Children's Home**

**Care Home Service**

**30 June 2020**

## THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014, all providers of care homes, home care and adult day care services must be registered with the Jersey Care Commission ('the Commission').

This inspection was carried out in accordance with Regulation 32 of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 to monitor compliance with the Law and Regulations, to review and evaluate the effectiveness of the regulated activity and to encourage improvement.

## ABOUT THE SERVICE

This is a report of the inspection of a Children's Home. It is one of seven Children's Homes operated by the Government of Jersey. The name and address of the home has not been included in this report. This is to preserve the privacy and confidentiality of the children and young people who live there.

The home is a three-bedroom detached bungalow and is registered to provide residential care for three children and young people. The home has a lounge, a dining room, conservatory and a kitchen. The home became registered with the Commission on 4 December 2019.

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| Registered Provider                     | Government of Jersey Children's Services<br>Accountable Officer: Mark Rogers (Director<br>General Children, Young People, Education and<br>Skills) |
| Registered Manager                      | Alison Morrison  |
| Regulated Activity                      | A care home for children and young people's<br>residential care  |
| Mandatory conditions of<br>registration | Maximum number: 3<br>Children (aged 12 to 18)<br>Rooms 1 to 3, one person  |
| Dates of Inspection                     | 30 June 2020   |
| Type of Inspection                      | Announced  |
| Number of areas for<br>improvement      | One  |

At the time of this inspection, there were three young people accommodated in the home.

## SUMMARY OF INSPECTION FINDINGS

This inspection was announced with some consideration of the restrictions imposed in response to the Covid-19 pandemic. The Children and Young People Residential Care standards were referenced throughout the inspection.<sup>1</sup>

The Regulation Officer focussed on the following areas during the inspection:

- the recommendations and subsequent actions from the pre-registration inspection in August 2019
- the service's Statement of Purpose and Conditions on registration
- safeguarding (adults and children)
- complaints
- safe recruitment and staffing arrangements (including induction, training, supervision, staffing levels)
- care planning
- monthly quality reports.

Two of the five recommendations made following the pre-registration inspection in August 2019 were related to a particular resident at the time of the inspection who has since moved on. Appropriate actions had been taken following these recommendations which were in relation to safeguarding concerns and education provision.

This inspection evidenced improvements in the use of personal plans and daily logs which had been recommended last year, and there was good use of risk assessments.

It was encouraging to note at this inspection that a full replacement of the kitchen units and work surfaces had been completed. This area for improvement had been made during the previous inspection.

A recommendation about staff records has only partially been met. The registered manager still does not have the recruitment documents for existing staff, and this area for improvement is outlined in the improvement plan at the end of this report.

At the time of the inspection, the service's arrangements for recruiting staff were satisfactory and new staff could describe the checks that were undertaken prior to their employment being confirmed. Care receivers and the records reviewed supported the adequate supply and deployment of staff in the service.

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<sup>1</sup> The Children and Young People's Residential Care Home Standards and all other care standards can be accessed on the Commission's website at <https://carecommission.ie/standards/>

With regard to the Statement of Purpose and conditions of registration, the findings from this inspection were positive and there was evidence of care receivers being provided with a service that is safe and takes their wishes and preferences into account.

A request to temporarily increase the number of young people accommodated by the home was approved by the Commission in April 2020. This meant that an additional young person was accommodated for two months during the Covid-19 lockdown period. Unfortunately, this had a negative impact on the other three residents and the Regulation Officer was advised that there are no plans to seek to increase the number of registered places in future.

There were no safeguarding alerts and no complaints received during the past 12 months. However, a significant number of notifications have been submitted to the Commission indicating frequent missing episodes (children and young people leaving the home without permission) and police involvement with some care receivers. These have been managed appropriately and there was evidence of effective relationships between the staff and care receivers.

The quality of services provided by this service has been kept under regular review by an independent person appointed by Children's Services in accordance with Regulations. The registered manager was familiar with the findings of this quality monitoring activity and any actions required to improve the quality of service provision. For the two months immediately prior to the inspection (April and May), the registered manager has submitted her own quality monitoring reports to senior management. These reports address the 15 Standards for Children and Young People's Residential Care.

## **INSPECTION PROCESS**

Prior to our inspection visit, information submitted to the Commission by the service since registration was reviewed. This includes any notifications and any changes to the service's Statement of Purpose.

The Regulation Officer sought the views of the people who use the service and spoke with managerial and other staff. Two of the three residents were spoken with during the inspection. The views of the residents' social workers were also obtained as part of the inspection process.

During the inspection, records including policies, care records, incidents and complaints were examined.

At the conclusion of the inspection, the Regulation Officer provided feedback to the registered manager and the staff on shift (five).

This report sets out our findings and includes areas of good practice identified during the inspection. Where areas for improvement have been identified, these are described in the report and an action plan attached at the end of the report.

## INSPECTION FINDINGS

### The service's Statement of Purpose and Conditions on registration

The Statement of Purpose was reviewed prior to the inspection visit. The Standards outline the provider's responsibility to ensure that the Statement of Purpose is kept under regular review and submitted to the Commission when any changes are made.

The Care Home is, as part of the registration process, subject to the following conditions:

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|----------------------------|---|
| Conditions of Registration | <u>Mandatory</u><br>Type of care: personal care and personal support<br>Category of Care: Children<br>Maximum number of care receivers: 3<br>Age range of Care receivers: 12-18 years<br>Maximum number of care receivers that can be accommodated in the following rooms: Rooms 1-3.<br>One person in each room. |
|                            | <u>Discretionary</u><br>Alison Morrison, registered as manager must complete a Level 5 Diploma in Leadership and Management in Health and Social Care to be completed by 6th December 2022.   |

The Statement of Purpose continues to reflect the range and nature of services that can be provided to care receivers, however, some recent events resulted in a variation to the use of rooms, and consequently made some services more difficult to provide.

The Regulation Officer had been advised of some referrals received by the home from social workers seeking a temporary admission. An application was made to the Commission to temporarily increase the number of registered rooms in the home to four. This meant that a staff room was repurposed to accommodate a fourth young

person and that access to some of the home's communal areas was reduced in order to accommodate staff. The impact of these measures was considerable, and the Regulation Officer was advised that on reflection, the home would not seek to increase the number of registered places in future. At the time of this inspection, the fourth care receiver had been discharged from the home

At the time of the inspection the Regulation Officer was satisfied that the provider and manager fully understood their responsibilities in this regard. Discussions with the manager, staff and residents, and examination of records provided confirmation of this, and that the staff team worked well together throughout this challenging period.

#### *Discretionary Conditions of Registration*

Registration of this children's home included a condition that the registered manager must complete a Level 5 Diploma in Leadership and Management in Health and Social Care to be completed by 06 December 2022. The manager advised the Regulation Officer that they have enrolled on a suitable training course and are planning to complete this within the coming nine months.

The Regulation Officer was satisfied that all conditions are currently being met.

#### **Safeguarding**

The Standards for Children and Young People's Residential Care set out the provider's responsibility to ensure that care receivers feel safe and are protected against harm. This means that service providers should have robust safeguarding policies and procedures in place which are kept under review. Staff working in the service should be familiar with the safeguarding arrangements and should make referrals to other agencies when appropriate.

Children's Services staff receive training in safeguarding during their induction and on an on-going basis and the effectiveness of this is kept under review by the manager. There was evidence of this from team meeting discussions, supervision, and practice observations.

There were no safeguarding referrals made in the last 12 months.

The high number of notifications to the Commission suggests that keeping children and young people and staff safe has sometimes been difficult. However, there is evidence that the skills and experience of the staff group have helped to achieve this. The Commission has been notified of events including reports of children going missing and being at risk of child sexual exploitation (CSE). Children committing offences and the subsequent involvement of the police and other statutory agencies have also featured. Many of the notifications and subsequent actions have been

discussed with the Regulation Officer over the past twelve months, and evidence the appropriate and caring responses of the staff team.

Safeguarding incidents and referrals and notifications are reviewed as part of the service's monthly quality monitoring activity.

Children's Services have comprehensive Safeguarding (Safeguarding Board) policies and procedures that meet the requirements of the Commission's Regulations and Standards.

## **Complaints**

The Standards for Children and Young People's Residential Care set out the provider's responsibility to ensure that there are arrangements in place for the management of complaints. This means that care receivers should know how to make a complaint and what to expect if they need to make a complaint.

The service's staff should be familiar with the complaints management procedures and service providers should closely monitor their implementation.

The service has a policy on complaints which has been made available to staff, care receivers and their representatives. A summary of the policy has been included in the Children/Young Person's Guide, together with how children and young people can contact the Children's Rights Officer and the Children's Commissioner.

There have been no complaints within the last 12 months, however the manager and staff are familiar with the service's complaints arrangements and staff have received training.

Complaints are reviewed as part of the service's monthly quality monitoring activity.

## **Safe recruitment and staffing arrangements (including induction, training, supervision, staffing levels)**

The safe recruitment of staff is an important element of contributing to the overall safety and quality of service provision. The Standards and Regulations set out the provider's responsibility to ensure that there are always suitably recruited, trained and experienced staff available to meet the needs of care receivers.

Children's Services has a policy on safe recruitment which is in accordance with the Standards and Regulations. The manager has demonstrated a commitment to safe recruitment and is familiar with the service's recruitment policy.

While the records of staff training and development, sickness absence, and supervision are maintained by the registered manager, they do not have access to all the documents from past recruitment (for existing staff), and therefore cannot demonstrate full compliance with legislative requirements.

The Commission was notified in April 2020 by Children's Services of a finding relating to the arrangements for ensuring that all staff have an updated Enhanced DBS check (in addition to their initial pre-employment Enhanced DBS certificate).

It was acknowledged that failure to take forward the recommendation made at the previous inspection regarding the manager's access to recruitment records had contributed to an oversight. Steps were taken to put appropriate safeguards in place whilst DBS checks were completed, and this inspection was able to evidence compliance.

The recommendation from the registration inspection in August 2019 has not been actioned. Staff records (including application forms and checklists, interview notes, references and other documents), have not been transferred to the registered manager.

There had been two new appointments to the registered staff team since December 2019 and some movement of staff because of periods of staff shortages in other children's homes. More recently the staff team has been depleted because of Covid-19 and the need for some staff to self-isolate.

The records reviewed supported the adequate supply and deployment of staff in the service over the past 14 weeks, however the rotas show this has been achieved by staff working overtime.

According to the Statement of Purpose, the staffing establishment is one Senior Shift Leader (a Deputy Manager), three Shift Leaders (Seniors), and 11 Residential Child Care Officers. That is (when full) a ratio of 15 staff for three children.

The Regulation Officer is aware that the registered staffing establishment included supernumerary members of staff. At the time of the inspection, the staff list included two Shift Leaders and nine permanent Residential Care Officers, with some use of bank (temporary) staff. That is a ratio of at least 11 staff to three children.

The Regulation Officer was satisfied that this was adequate staffing and noted that the core staff group is an experienced and skilled (qualified) staff group, many with significant experience of working in children's homes.

During the inspection staff discussed some difficult months during the Covid-19 lockdown. As a result of the need to self-isolate due to underlying health conditions and/or confirmed Covid-19 symptoms, there were staff shortages which were managed in the short term by offering over time to nine core staff. This information was confirmed in the April and May quality monitoring reports by the registered manager.



The manager and provider are familiar with the list of areas of mandatory training set out in the Care Standards and arrangements are in place to meet these Standards.

There is a policy on staff supervision which the manager and staff are familiar with. Records of staff supervision are maintained.

It was noted however, in the April and May monthly quality monitoring reports, that it had been difficult to provide supervision in light of the staffing challenges outlined above. Supervision sessions for June and July have been completed.

### **Care planning**

The children and young people who receive this service should have a clear plan of the care to be provided to them. This should be based on an assessment of their needs, wishes and preferences.

The Standards and Regulations set out the provider's responsibility to ensure that care plans are person-centred and kept under review. The staff delivering care should be familiar with the care plans and ensure that any changes in needs are communicated appropriately.

The Statement of Purpose sets out the service's referral policy and arrangements for securing written information about care receivers.

MOSAIC (the Children's Services electronic record keeping tool), shows the detailed Care Plan and the Residential (Personal) Plan for three residents and these were examined by the Regulation Officer. The record also includes a day-by-day log divided into morning, afternoon and night segments. The log is mostly a record of activity and staff names are recorded as part of the log entry.

All residents are "Looked After Children" and therefore there should be Care Plans and Looked After Children Reviews as part of each record.

There was evidence of good recording and some links between the observation log and the various plans for the residents. The Regulation Officer noted evidence of good recordings of risk assessments, and good use of these assessments by the staff team.

It was also positive to note that there are arrangements in place to facilitate children and young people to access their care plans and care records, and that this is evidenced in the recordings.

This Standard is well met.

## Monthly quality reports

The quality of services provided by this service should be kept under regular review. The Standards and Regulations set out the provider's responsibility to appoint a representative to report monthly on the quality of care provided and compliance with registration requirements, Standards and Regulations. The manager should be familiar with the findings of quality monitoring activity and any actions required to improve the quality of service provision.

The Regulations require that an Independent Person must report on the way the home is managed and the quality of care provided for the children. Children's Services appointed an Independent Person before registration to:

- Interview in private, children, parents, relatives, workers if they consent.
- Look at premises and records, including care records if the social worker and the child give their permission.
- Visit unannounced.
- Make recommendations for actions with timescales.

The Regulations also state that registered manager and the registered provider must consider whether to act on any recommendations made by the Independent Person.

The Regulation Officer was able to read all the reports completed since May 2019 prior to the inspection and noted that during the Covid-19 lockdown period, the Independent Person had not been able to visit the home.

There was evidence however of discussions held with the registered manager and staff and requests for written information. The Regulation Officer was satisfied that the Independent Person was regularly and appropriately reviewing the quality of care at the children's home.

In addition to the visits undertaken by the Independent Person, Children's Services commenced a system of internal quality monitoring in April 2020. This involves registered managers completing a template which references the Standards. The Regulation Officer reviewed reports that had been completed in April and May and these provided a good account of how the Standards were being met, with appropriate references to good practice and areas for improvement.

## IMPROVEMENT PLAN

There was only one area for improvement identified during this inspection. The table below is the registered provider's response to the inspection findings.

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| <p><b>Area for Improvement 1</b></p> <p><b>Regulation 17 Workers</b></p> <p>Standard 7</p> <p><b>To be completed by:</b><br/>3 months from the date of inspection (30<sup>th</sup> September 2020).</p> | <p>All existing staff HR records from past appointments are transferred to and kept by the registered manager.</p>   |
|   | <p><b>Response by registered provider:</b><br/>The Registered Manager has taken steps to ensure that whilst kept centrally within the Human Resource department, they have access to all of the required staff files pertaining to their team.</p> <p>It is acknowledged that in some instances, staff records prior to 2018 are incomplete or unavailable due to information lost when HR platforms were migrated in previous years.</p> <p>Recent appointees have completed files that are available to the Registered Manager, at their discretion.</p> |

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of the Care Commission during the course of this inspection. The findings contained within this report do not exempt the service from their responsibility for maintaining compliance with legislation, standards and best practice.



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