



Jersey Care
Commission

INSPECTION REPORT

02 Children's Home

Care Home Service

13 August 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. The name and address of the home have 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 two-storey house and is registered to provide residential care for two children and young people. The home has three bedrooms, a lounge, a dining room and a kitchen. The home became registered with the Commission on 4 December 2019.

Registered Provider	Government of Jersey Children's Services Accountable Officer: Mark Rogers (Director General Children, Young People, Education and Skills)
Registered Manager	Paul Sullivan
Regulated Activity	A care home for children and young people's residential care
Mandatory conditions of registration	Type of care: personal care and personal support Category of Care: Children and Young People (0-18) Maximum number of care receivers: 2 Age range of care receivers: 12-18 years Maximum number of care receivers that can be accommodated in the following rooms: Rooms 1-2. One person in each room
Discretionary conditions	The registered manager must complete a Level 5 Diploma in Leadership and Management in Health and Social Care to be completed by 6th December 2022.
Dates of Inspection	13 August 2020
Type of Inspection	Announced
Number of areas for improvement	Three

At the time of this inspection, there was one child (12 to 15) and one young person (15 to 18) 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.¹

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

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

One of the three recommendations made following the pre-registration inspection in July 2019 was related to a particular resident at the time of the inspection who has since moved on. Appropriate actions had been taken following this recommendation, which was in relation to care planning. A recommendation for an increase in the number of suitably qualified staff has been fully met. A recommendation about staff records has only partially been met, and this area for improvement is outlined in the improvement plan at the end of this report.

With regard to the Statement of Purpose and conditions on 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.

There were no safeguarding alerts made to the Safeguarding Team during the past 12 months. However, a significant number of notifications have been submitted to the Commission indicating occasional missing episodes (times when the child or young person leaves the home without permission) for one resident, and more recently frequent missing episodes and police involvement with the other resident.

¹ 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/>

These have been managed appropriately and there was evidence of effective relationships between the staff and care receivers.

A complaint by a relative of one of the care receivers had been reviewed by the independent person appointed by Children's Services in accordance with regulations to provide quality monitoring reports. The complaint had been appropriately addressed by the staff team.

Safeguarding and complaints logs had been kept up-to-date by the staff team and there was evidence of appropriate oversight by the manager.

At the time of the inspection, the service's arrangements for recruiting and deploying staff were not satisfactory. This is an area for improvement: for the registered provider to appoint a staffing structure (numbers and responsibilities), which is more appropriately aligned with the Statement of Purpose, and to achieve a staff-to-children ratio that does not fall below two members of staff on duty at all times. The residential personal plan and care records for one resident were comprehensive, clear and consistent with the care plan produced by the young person's social worker in consultation with the young person. However, the other resident's plans included the detail of risk assessments and descriptions of behaviour that obscured the plan and progress against the plan. An area for improvement is for the residential personal plan to be re-written and improved, and to be consistent with the Care Plan.

The independent person has kept the quality of services provided by this service under regular review. For April and May the registered manager has submitted two quality-monitoring reports to senior management. These reports address the 15 Standards for Children and Young People's Residential Care. The manager said that June's report was overdue.

The reports highlight a concern about the frequency of staff supervision and the absence of performance appraisals.

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.

Both residents were spoken with during the inspection. The views of the social workers have contributed to the inspection findings.

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

At the conclusion of the inspection, the Regulation Officer provided feedback to the registered manager.

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:

Conditions of registration:	<u>Mandatory</u> Type of care: personal care and personal support Category of Care: Children and Young People (0-18) Maximum number of care receivers: 2 Age range of care receivers: 12-18 years Maximum number of care receivers that can be accommodated in the following rooms: Rooms 1-2. One person in each room
	<u>Discretionary</u> Paul Sullivan registered as manager of 02 Children's Home 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.

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.

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 6 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 number of notifications to the Commission suggests that keeping children and young people 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 regarding a resident that have included reports of leaving without permission and being at risk of child sexual exploitation (CSE). The seriousness of this CSE risk has diminished over the past 12 months however the staff continue a disruption programme to keep the resident safe. This is an area of good practice.

The other resident adhered to Government guidelines during the Covid-19 lockdown but since these restrictions have been eased there have been notifications received by the Commission which indicate that the young person has been missing on a number of occasions and has committed offences. The subsequent involvement of the police and other statutory agencies have also featured. The inspection evidenced the appropriate and caring responses of the staff team, including statements by both care receivers that they are supported appropriately, and that staff treat them with respect.

Safeguarding incidents, 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 had been one complaint within the last 12 months from a resident's relative. The handling of the complaint was reflected in the reports of the Independent Person, and the Regulation Officer discussed this area of concern with staff on duty during this inspection. The staff team responded well and involved the resident and family members in the resolution of the complaint.

The manager and staff are familiar with the service's complaints arrangements and staff have received training. There is a Complaints log which is kept up-to-date and there is evidence of appropriate oversight by the manager.

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 at all times 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, he does not have access to all the documents from past recruitment (for existing staff), and therefore cannot demonstrate full compliance with legislative requirements. The recommendation from the registration inspection in July 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.

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.

There had been one new appointment to the staff team since December 2019, and one member of staff has been transferred to another home. More recently the staff team has been depleted because of Covid-19 and the need for some staff to self-isolate.

According to the Statement of Purpose, the staffing establishment is a Senior Shift Leader (a Deputy Manager), a Shift Leader (Senior), and five Residential Child Care Officers. That is (when full) a ratio of seven staff to two children.

At the time of the inspection the staff list included a Senior Shift Leader, a Shift Leader and three permanent Residential Care Officers, with some use of bank (temporary) staff. That is a ratio of six staff for two children.

The Regulation Officer noted that the core staff group is an experienced and appropriately skilled (qualified) staff group, with significant experience of working in children's homes, but was not satisfied that there was adequate staffing.

During the inspection, staff discussed the challenges associated with 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 five core staff. One member of staff has recently left and has not yet been replaced. Staff are working excessive hours and it is difficult to plan the rotas in advance. This information was confirmed in the April and May quality monitoring reports by the registered manager.

During the inspection staff members indicated that a team of nine staff would be required for the home to function well.

This is an area for improvement. The registered provider should appoint a staffing structure (numbers and responsibilities), which is more properly aligned with the Statement of Purpose and to achieve a staff-to-children ratio that does not fall below two members of staff on duty at all times.

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 two care receivers. 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”, therefore there is a requirement that Care Plans or Pathway Plans and Looked After Children Reviews are maintained as part of each care receiver’s record.

The residential personal plan and care records for one care receiver were comprehensive, clear and consistent with the Care Plan devised by the care receiver’s social worker in consultation with the care receiver. The Regulation Officer noted that there was clear evidence of the young person’s involvement in the plans.

In preparation for the young person reaching 18 in a year’s time, all the plans set goals for achieving more independence and responsibility. The care receiver was able to describe the plan and the stages of the plan to the Regulation Officer.

However, the other care receiver’s care plan and residential personal plan included the detail of risk assessments and descriptions of behaviour that obscured the plan and progress against the plan. During the inspection there were discussions with the manager, staff and the care receiver about the balance of children’s rights and the responsibilities of adults with a duty of care to keep care receivers safe and to promote their well-being. The Regulation Officer advised that a clear residential personal plan prepared in consultation with the care receiver and the social worker can help in achieving this balance.

An area for improvement is for the residential personal plan to be re-written and improved, and for the resident to be involved with this. It was positive to note that staff recognised the importance of this and agreed to take action to address the matter.

Monthly quality reports

<p>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.</p>
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The Regulations state 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. The manager said that June's report was overdue.

These reports highlight a concern about the frequency of staff supervision and the absence of performance appraisals. Staff interviewed during this inspection confirmed that finding time for supervision meetings had been difficult during the Covid-19 lockdown Period (March, April and May), but that supervision had recommenced. However, one member of staff indicated that no performance appraisals had taken place.

IMPROVEMENT PLAN

There were three areas for improvement identified during this inspection. The table below is the registered provider's response to the inspection findings.

<p>Area for Improvement 1</p> <p>Regulation 17 Workers</p> <p>Standard 7</p> <p>To be completed by: 3 months from the date of inspection (13th November 2020).</p>	<p>All existing staff HR records from past appointments are transferred to and kept by the registered manager.</p> <hr/> <p>Response by registered provider: 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>
<p>Area for Improvement 2</p> <p>Regulation 17 Workers</p> <p>Standard 7</p> <p>To be completed by: 3 months from the date of inspection (13th November 2020).</p>	<p>To appoint a staffing structure more in line with the original (registered) Statement of Purpose, and to achieve a staff-to-children ratio that does not fall below 2 members of staff on duty at all times.</p> <hr/> <p>Response by registered provider: The Registered Manager recently interviewed a number of internal and external candidates for permanent full time staff. One member of staff previously employed as a Bank Staff was successful at interview and is awaiting a full time contract.</p> <p>A member of staff from another Residential Childrens' Home will transfer to this home on September 28th, this is a full time, permanent appointment.</p> <p>A Bank Staff member was recently appointed and is currently awaiting a contract and start date.</p> <p>Ongoing recruitment is in the process of being arranged (dates to be confirmed) and it is anticipated that this will enhance the quality of the service provided.</p>

<p>Area for Improvement 3</p> <p>Regulation 9: Personal plans and care records</p> <p>Standard 2</p> <p>To be completed by: 2 months from the date of inspection (13th October 2020).</p>	<p>The registered persons must ensure personal plans and care records are kept up to date and that care needs are regularly reviewed. (One Residential Personal Plan to be re-written and improved).</p> <p>Response by registered provider: Personal Placement Plans and Care Plans are reviewed and updated on a monthly basis and are also discussed during team meetings.</p> <p>The Residential Personal Plan highlighted in the Report is currently being re-written, the Plan will be forwarded to the Care Commission upon completion.</p>
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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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