



Jersey Care
Commission

INSPECTION REPORT

Secure Children's Home

Care Home Service

29 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 Jersey's secure children's home. In a large one-storey building surrounding a courtyard. The service incorporates four bedrooms, a lounge, a dining room and kitchen, as well as a visitors' room, games (arcade) room, education / schoolroom, multi-gym, and a large sports hall. The building was designed as an eight-bedded secure unit, and four bedrooms are unused/not registered.

Children and young people aged 10 to 18 years old can be placed in the home either on remand or in custody, or subject to a Secure Accommodation Order. The service 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
Conditions of Registration	Maximum number of care receivers: 4 Children (aged 10 to 15) or young people (aged 15 to 18) Rooms 1 to 4, one person
Dates of Inspection	29 June 2020
Type of Inspection	Announced
Number of areas for improvement with requirements for action following this inspection	Four

At the time of this inspection, there was one child and one young person accommodated in the home.

This Secure Children's Home comes under the responsibility of the Minister for Health and Social Services. A child or young person can be remanded or sentenced to secure accommodation by a criminal court if they are of compulsory school age. A Placement Panel determines where he/she is placed following a remand or conviction, and they have a duty to review all placements within 72 hours and at set intervals after that.

Alternatively, a child or young person can be placed in this Secure Children's Home under a Secure Accommodation Order if it is felt necessary to prevent them from injuring themselves or others; or if they have a history of absconding and, if they abscond, are likely to suffer significant harm. A Secure Accommodation Order is a civil order made by the Royal Court following an application by the Minister for Health and Social Services.

An emergency placement on welfare grounds can be agreed by the Director of Children's Services, and the case must be referred to the Royal Court before or on the expiration of the 72-hour period, where a Secure Accommodation Order may be granted for up to 3 months. An Independent Reviewing Officer must chair a panel to review the keeping of a child in secure accommodation within 28 days initially, and regularly after that. At each review the panel must satisfy themselves as to whether or not the criteria for keeping the child in secure accommodation continue to apply, the placement in such accommodation continues to be necessary, and any other description of accommodation would be appropriate for the child. In doing so they must have regard to the welfare of the child whose case is being reviewed.

SUMMARY OF INSPECTION FINDINGS

An unannounced inspection was planned for March 2020 however this had to be postponed due to Covid-19 restrictions. This inspection was announced with some consideration of the restrictions imposed in response to the Covid-19 pandemic. The Children and Young People's Residential Care Standards were referenced throughout the inspection.¹

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

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 (adults and children)
- complaints
- safe recruitment and staffing arrangements (including induction, training, supervision, and staffing levels)
- care planning
- monthly quality reports.

In July 2019 there were ten recommendations and an expectation that Children's Services would provide the Commission with an action plan. Recommendations to form a task and finish group to agree an operating model, including a budget for renovations, and compliance with recruitment practices have not yet been taken forward. These areas for improvement are findings of this inspection.

The need for a clear operating model that puts an end to any confusion about the purpose and identity of this secure children's home is an issue/matter that has been identified in other review reports since 2019, and it remains an area of concern that Children's Services have yet to agree a Jersey model.

The inspection evidences that the remaining recommendations have to a large extent been accepted and actioned.

With regard to the Statement of Purpose and conditions on registration, the findings from this inspection were mostly positive and there was evidence of care receivers being provided with a service that is safe and which takes their wishes and preferences into account whilst operating as a secure children's home. However, the impact of a decision to use another part of the building for a health unit was to restrict the use of some communal areas of the secure children's home. This was followed by the need to accommodate children and young people of different ages and genders, with different reasons for being placed in a secure children's home.

The home's conditions of registration were varied prior to an application being made to the Commission. This has resulted in an area for improvement to ensure that the conduct of the regulated activity is in accordance with the Statement of Purpose and conditions of registration, and that any future need to vary the conditions are discussed with the Commission before changes are made.

It is acknowledged that there are challenges associated in keeping children and young people and staff safe in a secure setting. However, there is evidence that the skills and experience of the staff group has achieved this.

There have been no formal complaints from residents or families in the past 12 months.

There had been no new appointments to the staff team since December 2019. However, there has been some movement of staff due to periods of inactivity (no placements) and owing to staff shortages in other children's homes.

The staff team has been depleted because of Covid-19 and the need for some staff to self-isolate or work at home. At the time of the inspection, staffing levels were above the required minimum.

One resident had a clear residential personal plan based on an assessment of their needs, wishes and preferences. The overall Care Plan (produced by the care receiver's social worker in consultation with the care receiver) and the residential personal plan was consistent, person-centred and kept under review. There was good evidence of the resident's involvement in their plan.

The care plan and the residential personal plan for the second resident were not complete or easily understood. An area for improvement is that the registered provider and the registered manager ensure that residential personal plans are kept up to date and are consistent with the social worker's care plan.

The quality of services provided by this service has been kept under regular review by an independent person appointed by Children's Services to monitor the quality of services provided 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 visit (April and May), the registered manager has submitted a quality monitoring report to senior managers. This report addresses the 15 Standards for Children and Young People's Residential Care.

The practice of locking all bedroom doors overnight in the home was noted subsequent to this inspection and has been described by the manager as a means of providing security and protection to the young people in the home. The legal framework which would support the locking of all bedroom doors at night has not been made clear to the Commission. Consequently, clarification continues to be required as to how the needs and risks associated with young people living in secure accommodation have been balanced with their rights. This clarification was not satisfactorily ascertained from this inspection (or from pre-registration visits). At the request of the Commission, the manager undertook to update the home's Statement

of Purpose and Young Person's Guide to reflect the practice of locking bedroom doors at night. The Commission will keep this matter under review with the expectation that this will be addressed in the development of a clear operating model.

INSPECTION PROCESS

Prior to our inspection visit, information submitted to the Commission by the service since registration was reviewed. This included 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 manager and four members of staff were also obtained as part of the inspection process.

During the inspection, records including policies, care records, incidents and complaints were examined. The Regulation Officer was able to observe the environment.

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 recommendations and subsequent actions from the pre-registration inspection in July 2019.

There were 10 recommendations made following the pre-registration inspection. The requirement was that the provider would return an action plan and provide assurances that these matters were being taken forward.

Despite repeated reminders by the Regulation Officer it remains a concern that Children's Services did not submit an action plan until May 2020.

It was good to note that six of the recommendations had been actioned fully:

- 1) The registered manager is now a member of the placement panel.
- 2) The registered manager is consulted prior to any admissions.
- 3) The registered manager has been able to develop appropriate and proportionate 'rules' for looking after children and young people.
- 4) Risk based (proportionate) admissions procedures are in place.
- 5) The required proportion of staff had completed NVQ Level 3 certificate in Children and Young People's Workforce training.
- 6) The initial assessment and personal plan is discussed at a multi-agency meeting within 72 hours of any placement, and at least monthly, until the end of placement.

A seventh recommendation was to provide appropriate education and training for all residents. While it was also encouraging to note that a teacher is available to meet the educational needs of children and young people it is noted that this still does not extend to young people aged over 16.

Two more recommendations which had not been actioned, were to form a task and finish group to agree an operational model for this secure children's home, and for a budget to be agreed for the refurbishment and changes needed to the structure fixtures and fittings. This mirrored similar recommendations from other reviews.

Work to clearly define the therapeutic model for this secure children's home has not been taken forward.

The delay in completing this work further delays the implementation of the recommendations arising from other reviews.²

One more recommendation not actioned was that the registered manager is the recruiting manager for all future appointments, and that all existing staff (HR) records from past appointments are transferred and kept by each registered manager. The registered manager did not have these records at the time of the inspection.

The need for an agreed operating model, a budget for changes to the structure, fixtures and fittings, education and training for all residents, and compliant HR procedures are all areas for improvement from this inspection.

² Review of Greenfields Secure Care Unit, authored by Stephen Ashley, Independent Consultant and published on 01 Oct 2019. [Review of Greenfields Secure Care Unit - Gov.je](#) The Jersey Youth Justice Review from 29 May 2019. [Youth Justice Review published - Gov.je](#) The Scrutiny Panel following the Jersey Care Enquiry Update Report. [Scrutiny panels and committees - States Assembly](#)

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	<p><u>Mandatory Conditions:</u></p> <p>Type of care: personal care and personal support Category of Care: Children and Young People (0-18) Maximum number of care receivers: 4 Age range of Care receivers: 10-18 years Maximum number of care receivers that can be accommodated in the following rooms: Rooms 1-4. One person in each room.</p> <p><u>Discretionary Condition:</u></p> <p>Paul Sullivan 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.</p>
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The Statement of Purpose continues to reflect the range and nature of services that can be provided to care receivers. However, the use of rooms in the home has been varied following the admission of one care receiver directly into the home's visitor's room, rather than into a room that is registered. The rationale for this deviation from the condition on registration was discussed at length prior to and during the inspection and appeared to be in response to the challenges associated with accommodating two care receivers with very different needs.

Discussions with the manager, staff and residents, and examination of records provided confirmation that these conditions on registration were not being fully complied with.

At the time of the inspection the Regulation Officer was not satisfied that the provider and manager fully understood their responsibilities in this regard. The provider is required to ensure that an application is made to the Commission where a variation to a registration condition is required. The submission of this application was not made in advance and there was a significant delay in its receipt. This reduced the Commission's ability to apply the appropriate regulatory rigour that is necessary

when a request is made to accommodate a care receiver in a room that is not registered for that purpose.

An area for improvement is to ensure that the conduct of the regulated activity is in accordance with the Statement of Purpose and conditions of registration, and that any future need to vary the conditions are discussed with the Commission before changes are made.

The Commission is aware that the work on an agreed operating model will result in a revised Statement of Purpose.

Overall, 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 whilst operating as a secure children's home. This means that the care receivers cannot leave unless under supervision, and may not have the same ease of access to living areas, or the use of their mobile phones as with other children's homes.

There was evidence of the use of a proportionate risk assessment to admissions and day-to day living. Family and friends were able to visit. Some progress had been made to "soften" the custodial environment and make it more like a Children's Home.

Children and young people can decorate their bedrooms, and there are appropriate pictures on the walls. There are supervised outings to visit family, attend health appointments and for activities outside the home.

The Regulation Officer was aware that a health care service for young people had been operating adjacent to the Secure Children's Home. The impact of this on the home was explored during the inspection. The Regulation Officer was advised of a range of measures that had been put in place to reduce the impact of both services operating side by side. These included agreed times for using the sports hall and other communal rooms and separate entrances.

Staff interviewed during the inspection had a number of concerns, including the difficulty of accommodating and safeguarding a second young person.

The difference in age and gender, and the difference in the reasons for being in the secure children's home led to a decision to keep them separate, essentially using two staff teams, and the need therefore to convert the visitors room and one other room into a bedroom and lounge.

Staff advised the Regulation Officer that this had been a senior management decision and it was apparent that the decision did not have the support of the staff.

Subsequent to this inspection, the Commission became aware that one young person could not access a toilet or bathroom facility overnight as their bedroom door was locked by staff. This meant that the young person had to rely on staff in order to gain access to the bathroom. These arrangements were discussed with a senior manager as it was concerning that this young person's rights were not being upheld. The Commission was subsequently provided with assurances that staffing arrangements had been reviewed and that the young person had unrestricted access to the bathroom overnight.

Discretionary Conditions of Registration

At the time of registration, there was a condition that Paul Sullivan, registered as manager of the Secure Children's Home, must complete a Level 5 Diploma in Leadership and Management in Health and Social Care by 6th 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.

Safeguarding (children)

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 during their induction and on an on-going basis in safeguarding 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 procedures in place expect that referrals are made in a timely manner and the service maintains records of all safeguarding incidents, investigations and outcomes. Safeguarding incidents and referrals are reviewed as part of the service's monthly quality monitoring activity.

It is acknowledged that the need to keep children and young people and staff safe in a secure setting can be challenging. However, there is evidence that the skills and experience of the staff group has achieved this.

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 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 information about other bodies such as the Children's Rights Officer and the Children's Commissioner.

There have been no formal complaints within the last 12 months. 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 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 demonstrates a commitment to safe recruitment and is familiar with the service's recruitment policy, having recently taken part in a recruitment drive for bank residential staff.

The records of staff training and development, sickness absence, and supervision are maintained at the secure children's home. However, not all the recruitment records of existing staff, and therefore full compliance with legislative requirements could not be confirmed. Staff records (including application forms and checklists, interview notes, references and other documents) have not been transferred to the registered manager.

This was a finding at the previous inspection and this area for improvement has been included in the improvement plan at the end of this report.

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 no new appointments since December 2019 however it was noted that some movement of staff had been necessary due to periods of inactivity (no placements/admissions), and staff shortages in other children's homes. More recently the staff team has been depleted due to Covid-19 reasons and the need for some staff to self-isolate and to work from home. The records reviewed supported the adequate supply and deployment of staff in the service in April and May, 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), two Shift Leaders (Seniors), and eight Residential Child Care Officers. That is (when the home is full) a ratio of 11 staff to four children/care receivers.

At the time of the inspection the staff list included one Senior Shift Leader, two Shift Leaders, nine permanent Residential Care Officers, and four bank (temporary) staff. In addition, there was a staff team from another registered children's home who continued to provide support to a resident: One Senior Shift Leader, One Shift Leader and two Residential Care Officers. Together that is a ratio of 16 staff for three children.

The Regulation Officer was satisfied that this was more than adequate staffing and noted that the staff group is an experienced and skilled (qualified) staff group, many with significant experience of working in a secure setting.

The manager and provider are familiar with the list of areas of mandatory training set out in the 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 referral policy and arrangements for securing written information about care receivers.

MOSAIC (Children's Services electronic record keeping tool), shows the Care Plan produced by the care receiver's social worker in consultation with the care receiver and the residential personal plan for both 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" according to the Law, so 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 resident who has been in the secure children's home the longest. The Regulation Officer saw particularly good recordings of reviews involving the resident, family members, staff, and Education, Health, Social Worker and Probation representatives.

The plans and other records for the second (new) resident were less detailed. The care plan on MOSAIC was from April 2020. There must be a new Care Plan with every change of placement. At the time of the inspection the residential personal plan was blank. The observational day-to-day log was incomplete.

Care receivers should be able to access their care plans and records, and the registered manager advised the Regulation Officer that a care receiver had been facilitated to access their care records. It was encouraging to note that the care receiver had been involved in the care planning process.

However, another care receiver advised the Regulation Officer that they hadn't been made aware of the content of their care plan.

The registered manager has a responsibility to keep the needs of care receivers under review and to make referrals, as appropriate, to other agencies when the needs of a care receiver change.

An area for improvement from this inspection is the need to make sure all personal plans are kept up to date and are consistent with the care plan provided by the social worker.

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 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 persons 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 secure 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 are being met, with appropriate references to good practice and areas for improvement.

IMPROVEMENT PLAN

There were four 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 3 Conditions of registration: general</p> <p>Standard 1.</p> <p>To be completed by: 4 months from the date of inspection, 31 October 2020.</p>	<p>The registered provider must develop an appropriate operating model ready for implementation by 31 October 2020. The new operating model must be included in a revised Statement of Purpose and "Children's Guide".</p> <p>Response by registered provider:</p> <p>A round table event relating to the service took place on August 28th 2020. In part, this forum gave consideration to possible operational models for the home. Attendees included: Police, Childrens' Rights Manager, Probation, Jersey Cares, Care Commission, representative for the Childrens' Commissioner, Director and Chief Social Worker, Head of Service, Service Lead, Registered Manager, a staff representative from the service and another from the Independent Children's Home Association. The organisation are currently undertaking a review of all of Jersey's Children's homes, including the service.</p> <p>A consultant with the ICHA undertook a two day review of the service (17-18 August). This report, when published will be used to inform the future purpose, function and Operating Model for the service.</p> <p>The Registered Manager will revise the Statement of Purpose and the Young Person's Guide and share these documents with the Care Commission once this model is ready for implementation.</p>
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Area for Improvement 2 Regulation 3 Conditions of registration: general Regulation 5 Conduct of regulated activity Immediate and on-going.	<p>The registered persons must ensure that the conduct of the regulated activity is in accordance with the Statement of Purpose and conditions of registration, and that any future need to vary the conditions are discussed with the Commission before changes are made.</p>
	<p>Response by registered provider: The Registered Manager will ensure that any future requests for variations are discussed with the Care Commission before any changes are made.</p>

Area for Improvement 3 Regulation 17 Workers Standard 7. To be completed by: 3 months from the date of inspection (30 September 2020).	<p>The registered provider must ensure all existing staff HR records from past appointments are transferred to and kept by the registered manager.</p>
	<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>

Area for Improvement 4 Regulation 9 Personal plans and care records Standard 4. Immediate and on-going	<p>The registered manager must ensure all residential personal plans are kept up to date and are consistent with the social worker's care plan.</p>
	<p>Response by registered provider: The Registered Manager will ensure that all Residential Personal Placement Plans are accurate and are consistent with the Social Worker's Care Plan and subsequent reviews. The Plans are reviewed on a monthly basis by the Registered Manager and the wider staff team and will be a standing agenda item for team meetings.</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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