

**The Jersey Care Commission Six-Monthly Report to Government of Jersey
Department for Strategic Policy, Planning and Performance**

Background

1. Annex 1 of the Framework Agreement stipulates: *The Chair and Chief Inspector will provide a six-monthly report to the Accountable Officer. This may take the form of a meeting or a written report. This reporting line is not for directing or ensuring oversight of the work of the Commission. It is for the purposes of providing assurance of:*
 - management of States Employment Board (SEB) employees in accordance with SEB corporate policies;
 - compliance with principles of Government of Jersey (GoJ) financial management; and
 - compliance with relevant legislation regulating good governance in the public sector.
2. These reports are distinct from the Annual Report the Commission is required to publish and present to the States Assembly under Article 43 of the Law.
3. The attached report is in a format prepared by the Department for Strategic Policy, Planning and Performance (SPPP). Sections 1 – 4 have been completed on behalf of the Commission as has the majority of section 8. Sections 5-6 should be completed by a representative from SPPP as this includes an analysis of the Commission's performance. Section 7 does not need to be completed until Q4 and the last 3 questions in section 8 should be completed by SPPP as this relates to States of Jersey Propositions and a view as to the probity of Board members

Section 6: of the Framework Agreement: Engagement

4. *The Commission and Government will engage with each other in a manner which is open, honest and constructive. They will work to ensure a mutual understanding of each other's objectives. This engagement will include regular meetings, annual meetings and Annual Reporting.*
5. *The Chair and Chief Inspector of the Commission and the Accountable Officer will engage with each other regarding all relevant matters affecting the work of the Commission, as and when these matters arise, to ensure they are aware of any significant issues and that there are no surprises. This may include consulting the Commission about emerging relevant policy and legislation matters or proposed changes to Government service provision.*

6. Regular meetings

- a. *The Accountable Officer will meet formally on a 6-monthly and a 12-monthly basis with the Chair and Chief Inspector. Those meetings may be cancelled if both the Chair and Accountable officer agree they are not required. Minutes will be taken of these formal meetings.*
- b. *These meetings do not preclude other meetings taking place during the year between the Commission and the Minister to discuss/report concerns or matters arising which could, for example, relate to care standards, breaches of this Agreement, or matters relating to the performance of the Commission. These meetings can be at the behest of the Minister (or representatives of the Minister) or at the behest of the Chair. Neither the Minister nor the Chair will decline to meet, albeit meeting times and dates will need to be mutually agreed.*
- c. *Communications between the Commission and the Minister shall normally be through the Chair, with the Chair ensuring that all other Commissioners are kept informed of such communications.*
- d. *In exceptional circumstances, Commissioners may communicate directly with the Minister or the Accountable Officer and shall advise the Chair in advance of their intention to do so.*
- e. *The Accountable Officer should be informed in advance of all planned or proposed meetings.*

SIX-MONTHLY OPERATIONAL AND FINANCIAL CAPABILITY ASSESSMENT – ARM’S LENGTH ORGANISATIONS

Name of Arm’s Length Organisation: Jersey Care Commission

Quarter end: 30 June 2020

1. Background on the organisation and its relationship with the States of Jersey:

Provide a detailed description of the background to the organisation, whether it was established by the States and whether there are relevant States’ propositions that govern the relationship with the States or its activities, its structure, locations, board composition etc.

Provide a detailed description of the past funding relationship with the GoJ.

The Jersey Care Commission was established in accordance with the Regulation of Care (Jersey) Law 2014. Prior to the enactment of the Law, the Commission existed in ‘shadow’ form and became fully operational on 1 January 2019. The Commission has within its remit the role of regulating and inspecting services in respect of both adults and children, provided by the Government of Jersey, the various parishes, private providers and the voluntary sector. The purpose of this function is to ensure that people receive high quality and safe levels of care.

The services regulated by the Commission include: care homes providing nursing and personal care or personal support for people with a range of health and social care needs; domiciliary care provided to people in their own homes; adult day care services and residential and other services for children and young people.

The Commission is established under Article 35 of the 2014 Law as a body corporate with perpetual succession. The Commission is independent of the Chief Minister, the States Assembly and the Executive (Article 36).

A Framework Agreement between the Care Commission and the Department of Strategic Policy, Planning and Performance sets out the principles underlying the working relationship between the Commission and the Government of Jersey. It was approved by the Commission’s Board in May 2020 and endorsed by the Chief Minister in June 2020

The Commission is required to develop an annual business plan which sets out the key performance indicators (KPI’s) and targets over this period.

The Framework Agreement also sets out the services which the Government of Jersey will make available to the Commission in respect of financial management, IT support, accommodation and legal advice.

2. Description of the services supported by the funding:

Provide a detailed description of the services to be supported by the current / proposed funding arrangements.

To deliver our strategic priorities, the Commission's key business objectives for 2020 are as follows:

Priority 1: Regulation and Inspection

Establish a strong team of skilled and experienced regulation officers and support staff who will deliver an effective regulatory regime for Jersey which supports best practice and drives continuous improvement. As part of this ambition, the Commission will develop individual areas of interest and expertise within the team, allocating specific project work to staff members who are best placed to lead in these areas.

The Care Commission currently employs a Chief Inspector, a Head of Governance Policy and Standards, five Regulation Officers and two support staff members. One Regulation Officer and one support staff member are part time. There are currently no vacancies although one staff member has recently submitted her resignation (see below). The Covid-19 pandemic has had an adverse impact upon the functioning of the Commission. Two staff members temporarily relocated to the United Kingdom for a period of 13 weeks and worked remotely. Each of the support staff members have been required to self-isolate at home for periods of time. The contract of a temp admin staff member whom the Commission had employed, was terminated prematurely on account of a reduction in workload; difficulties in facilitating home-working and due to the impact of limited office space. One Regulation Officer has temporarily returned to the service in which she was formerly employed. This matter is in the process of being reviewed. One support staff member has submitted her resignation and will leave the Commission in August. A Workforce Expenditure Approval Request (WEAR), is a document which needs to be completed in order that a vacancy can be recruited to. The document needs to be signed off by representatives from Treasury and Human Resources and by a Director. A WEAR has been submitted for approval with a request that this post becomes full time. One Regulation Officer has a fixed term contract which ends in September 2020. A WEAR has been approved to facilitate the extension of his contract until the end of December 2020. Consideration is to be given as to whether to extend this contract beyond this point or to seek to recruit to this post on a permanent basis.

Project working has been placed on hold temporarily because of the pandemic but will recommence as soon as is practicable.

Although the Commission has continued to deliver an effective regulatory regime throughout the pandemic, its methodology has needed to alter significantly, resulting in fewer inspections, but increased engagement with representatives of regulated activities on the themes of use of PPE and responding effectively to the challenge of preventing spread of infection during the pandemic. This has generally been well received and it is acknowledged that the Commission has been able to recommence inspection activity sooner than most other similar regulatory organisations across the British Isles, albeit in a more limited form.

Undertake a training/learning needs analysis to identify any gaps in skills within the team and devise a plan in respect of how these might reasonably be addressed; develop a staff training programme including the identification of mandatory and other training requirements.

The reduction in inspection work has afforded the Commission the opportunity to review the training and learning needs of each of the staff members in the Commission. CPD has been facilitated and mandatory training requirements have been reviewed.

Implement a system of regular staff supervision utilising a designated template and associated supervision policy; undertake annual appraisals and mid-year performance reviews.

Supervision has been provided to all staff members. A template has been devised and is in use.

Apply the approved standards for all regulated activities as a framework to measure the quality, safety and effectiveness of these services

Standards have been applied in respect of:

- Children and Young People's Residential care
- Day Care
- Care Homes
- Home Care.

In addition, the existing Code of Practice in respect of Piercing and Tattooing premises and practitioners is in the process of being reviewed.

Regulated activities continue to be measured against these standards although the impact of the pandemic has been such that inspection activity was postponed. It has re-commenced although a revised methodology is being utilised in order to reduce the risk of infection.

In the longer term there is a need to develop standards in respect of statutory provision. This will include but is not limited to:

1. Supported accommodation for children and young people (particularly children and young people in receipt of care) to support current Regulations. N.B. These have been developed and are submitted for approval at the July meeting of the Commission's Board.
2. Children and young people's services
3. Adult Social and Community Services
4. Mental health services

5. Hospital and other statutory health provision.

In respect of items 2-5, the associated regulations are yet to be drafted.

Encourage the providing of feedback across the sector in relation to the standards and collate this information: ensuring that the Board is apprised of the findings associated with this evaluation.

Providers and managers of regulated activities are able to provide this feedback. However, this has been limited on account of the reduction in inspection-related activity throughout the pandemic.

Work with Government of Jersey policy leads in the development of regulations and standards relating to children's social work and CAMHS; ensure that appropriate action is taken to facilitate the development of capacity within the Commission to absorb any additional developmental work relating to these.

The Chief Inspector has met with the relevant policy leads. However, much of this work has been postponed on account of the pandemic. Specifically, attention needed to be given to the drafting of emergency legislation. Now that the period of crisis has passed, this work is resuming.

Develop a caseload allocation system to ensure that all regulated services have a designated Regulation Officer.

This has been completed successfully and providers of regulated activities have been notified of the name of their Regulation Officer.

Develop and implement an inspection scheduling tool to better enable the prioritising of inspection work.

This has been completed successfully and the tool is in use. It is acknowledged that the prioritising of inspection work has needed to be revised because of the pandemic.

Ensure that service providers can be readily held to account where there are concerns relating to adherence to regulations and standards by fully implementing the Escalation, Enforcement and Review policy following consultation with the sector.

The Escalation, Enforcement and Review policy is completed in draft form. Consultation with the sector in respect of this has not yet taken place on account of the pandemic. Nevertheless, the policy is being applied as a working document and will be further revised pending finalisation. There is currently one example of a service where escalation and enforcement processes are being applied, following legal advice (N.B since this document was drafted, the consultation has been completed and the policy has been ratified by the Care Commission's Board).

Work collaboratively with the sector; encouraging improvement by actively providing advice and support as required.

Throughout the pandemic, the Commission has continued to function despite its constraints. It provided a 7-days service for several weeks and was proactive in contacting all care home managers, offering guidance, advice, reassurance and support as required. Where services have been unable to meet the conditions because of the constraints associated with the pandemic, (namely a sudden reduction in staffing), the Commission has been able to respond appropriately, suspending requirements to meet the conditions where this has been necessary.

In respect of children's services, while routine inspection visits have not been possible, a range of other regulatory activities have been undertaken. These include the analysis of notifications of incidents reported to the Commission by the homes' managers, analysis of monthly reports completed by the Independent Visitor, regular support calls to managers and correspondence with the Director General (CYPES), Mark Rogers, and the Director and Chief Social Worker (Children and Families), Mark Owers on a range of matters including staffing, registration and capacity.

Introduce Improvement Plans in a designated format. These will include timescales associated with improvement and an outline of the form that improvement should take.

This has taken place successfully. The Commission has issued, as part of its routine inspection process, inspection reports which include improvement plans.

Finalise the Inspection Policy following consultation with the sector.

This has taken place successfully. The Inspection Policy is available on the Commission's website. The policy was revised in June in response to the Covid-19 pandemic.

Implement the Inspection Report template and evaluate its effectiveness.

This has taken place successfully. Inspection reports are produced on a designated format which includes space for providers and managers of regulated activities to record comments and feedback. It is too soon to fully evaluate the effectiveness of the template, but this will take place at a later stage.

Develop a robust system in supporting prospective service providers to complete the registration process, ensuring that the role and remit of the Commission is easily understood.

All documentation relating to registration is available on the Commission's website. Regulation Officers are able to assist registrants in completing the documentation as required. A registration pack has been devised for the use of individual carers seeking to become registered.

Carry out a planned annual programme of announced and unannounced inspections of all regulated services and activities for adults and children in Jersey.

The Covid-19 pandemic continues to have a major adverse impact upon the Commission's ability to complete all the scheduled inspections by the end of 2020. In accordance with Regulation 34A of the Regulation of Care (Standards and Requirements) (Covid-19 – Temporary Amendments) (Jersey) Regulations 2020, not all scheduled inspections have been undertaken. Approximately 10% of regulated services received an inspection by the first half of 2020. It is not feasible to presume that the remainder will be inspected by the end of 2020 and a risk-based approach will be taken to ensure that Commission resources are appropriately targeted. Whilst inspections have recommenced, the methodology has needed to be substantively revised to the extent that comprehensive inspections are not currently possible. Instead, more limited inspections can take place.

Hold service providers to account by taking corrective action when they fail to comply with regulations or to conform to relevant standards in the delivery of health and social care.

Corrective action can take place as required and the Escalation, Enforcement and Review policy exists to support this possibility. There is currently one example where corrective action is needing to be considered, following legal advice.

To work with the Government of Jersey to develop a programme of inspection and monitoring visits for children's services. Create the capacity within the team to effectively absorb this area of work and source independent external support as necessary (in line with the expectations of the Independent Jersey Care Inquiry).

The Commission has retained contact with Ofsted and it is anticipated that ongoing support from Ofsted will be considered when planning future monitoring and inspection visits of children's services. This is currently on hold due to the pandemic.

Priority 2: Professional Registration

Maintain an online register of all registered health and social care professionals which is kept up to date and which is available to the public. Ensure that the Commission can introduce professionals to the register and renew registrations annually. Review and expand the capacity of the Commission in order that it can service the register in partnership with colleagues in IT.

Despite the constraints imposed by the pandemic, the Commission has continued to successfully register all health and social care professionals as required. The register is online, up to date and publicly available. The Commission was challenged at the end of 2019 in the requirement to renew registrations but managed to complete this work despite the difficulties associated with doing so. As the IT-related changes which were intended to streamline the renewal process have not

been completed, it is highly likely that the Commission will be similarly challenged towards the end of 2020. As such, additional administrative support is likely to be required and will be sourced.

Ensure the health and social care workforce in Jersey is appropriately qualified, registered and fit to practise. Develop the renewals process in order that the Commission can more effectively establish fitness to practise.

The Commission is able to establish fitness to practice. This is not currently a difficulty.

Continue to review the IT support which is necessary to ensure that the registration and renewals process is more streamlined and efficient.

The registration process remains a manual process but has the potential to become less cumbersome and more efficient in partnership with GoJ Modernisation and Digital. The renewals process is largely automated.

Work with the Government of Jersey policy lead in considering the implications of the new registration of professionals law.

The Chief Inspector has met with the Jersey policy lead in respect of this area. The introduction of the proposed new registration of professionals law is currently on hold due to the need to prioritise the introduction of emergency legislation at the height of the pandemic. Now that the period of crisis is passed, work in this area will resume.

Establish effective regulatory links with other organisations which have shared responsibilities for the oversight of professional regulation in Jersey, e.g. General Medical Council (GMC), Nursing and Midwifery Council (NMC) and Health and Care Professions Council (HCPC), General Dentistry Council (GDC) and Social Work England.

This is partially complete in that some regulatory organisations have committed to signing memoranda of understanding with the Jersey Care Commission. However, although this offer has been made to all relevant organisations, most have not made this commitment. As such, the Commission will seek to maintain dialogue with each of these organisations and will formulate MOU's where this is possible.

Priority 3: Public Engagement

Provide a voice for service users, by ensuring that service providers operate robust systems for investigating complaints relating to possible regulatory breaches and, where necessary, undertaking inspections to investigate concerns.

The Commission has completed and has published complaints policies relating to both regulated activities and to the Commission itself. These are available on the Commission's website. The Commission endeavours to ensure that complaints about regulated activities are made directly to the service in the first instance. Therefore, on occasions where the Commission has been approached to undertake investigations, it has advised of the designated process and that each service is required to maintain an effective complaints process. The Commission has undertaken several complaint investigations where a complainant has exhausted the internal process and will continue to do this as necessary.

Provide the public with access to relevant information such as registration guidance, application forms, legislation, regulation and standards and inspection reports.

Registration guidance, application forms, legislation, regulation and standards are each available on the Commission's website. These documents can be posted in hard form or made available in other formats upon request. Although it was the Commission's intention to publish all inspection reports from January 2020 onwards, this has not happened on account of the low number of inspections which have, as of yet, been completed. It remains the intention of the Commission to publish inspection reports online in the near future.

The Commission's website remains under regular review with a range of information posted to the 'Covid-19' section and updates to other sections including the register of regulated activities, guidance documents and templates.

Raise the profile of the Jersey Care Commission with the organisations we regulate, as well as with service users and carers through a planned programme of engagement activity.

This has taken place to a limited degree. Although some workshops took place towards the end of 2019, in order to introduce the inspection process to registered managers and providers, the constraints imposed by the pandemic have been such that it has not been practicable to facilitate any further such events so far in 2020. However, the Commission has sought to raise its profile in other ways. This has included regularly updating and publicising its website; use of Twitter; use of local media to advise of the need for individual carers to register with the Commission and the production of a complaints leaflet. The Chief Inspector has undertaken a series of interviews in the local media during the period of the pandemic. The Commission has issued a newsletter to all providers and managers of regulated activities and has issued a press release to the local media.

Priority 4: Information Governance

Ensure that the Commission has an effective system to enable it to manage the complexity of information which it receives.

This is an ongoing approach in that the existing processes which the Commission uses are regularly reviewed and revised accordingly with a view towards increasing efficiency within the organisation and in promoting a Lean methodology.

Develop a complaints procedure to ensure that people can make complaints about both service provision and about the Commission itself.

This has been completed. Both complaints policies are available on the Commission's website. The Commission has developed and produced a complaints leaflet. Copies will be distributed during site inspection visits. An electronic version is available on the Commission's website.

Implement an internal retention and disposal schedule to ensure that data is processed in accordance with all relevant statutory and policy requirements.

This has been completed in partnership with Jersey Heritage. However, the Commission retains a significant body of documentation, much of which could be either archived or securely disposed of. To achieve this, the Commission will need to review its administrative capacity.

Undertake an audit of in-house activity, policy and training relating to building security, health and safety, moving and handling, first aid and fire safety.

This is ongoing in that a suite of policies is in the process of development. Attention has been given to developing a schedule of mandatory training for all members of the team. Additionally, attention has been given to the need to ensure that CPD requirements are identified in respect of each staff member with a plan of how these can be met.

Priority 5: Leadership and Delivery

Maintain and develop a system of corporate governance which ensures effective oversight and accountability for the work of the Commission. This will include the development of a suite of policies; maintaining of risk registers; reviewing of the Business Plan and the provision of performance reporting.

The Head of Governance, Policy and Standards has developed a suite of policies and this work is continuing. A risk register is maintained and presented to the Board for periodic review with plans for risk mitigation. A performance plan has similarly been devised. A Business Plan has been created and is the point of reference for both the risk register and the performance report.

Priority 6: Planning

It is important to acknowledge that there are limitations associated with the Commission's capacity to undertake detailed strategic and financial planning in the absence of a plan and timescale associated with the extension of the Commission's regulatory scope (as referred to on page 6) and in the absence of a 3-year financial plan (see below).

Formulate a 3-year financial plan.

This has not yet taken place and cannot be achieved until the Commission has established an accurate baseline budget and has secured reliable and consistent advice and support from the Financial and Business Partnering section at Treasury. It is mutually acknowledged that there were difficulties in this area owing to a number of vacancies in Treasury. However, this situation has improved markedly in recent months and significant progress is now being made in working towards the development of more robust financial planning.

Develop operational links with local stakeholders that have a shared interest in the areas regulated by the Commission e.g. Safeguarding Partnership Board, Office of the Children's Commissioner, Chief Nurse, Medical Practitioners local Responsible Officer.

Operational links are in place and continue to be developed. A Memorandum of Understanding with the Office of the Children's Commissioner is in situ. A Memorandum of Understanding with the Safeguarding Partnership Board exists in draft form and is awaiting sign-off.

3. Confirmation of receipt of required information <i>within the stipulated timescale.</i>			
Has the organisation provided management accounts?	Quarterly	Yes	The Care Commission receives regular updates on income and expenditure at each Board meeting. The end of year financial report will be included in the Care Commission's annual report.
Has the organisation provided an analysis of its operational performance against its business plan, agreed targets and KPIs?	Quarterly	Yes	The Business Plan for 2020 was approved at the March Board. Progress against agreed KPIs will be provided in the Jersey Care Commission's annual report and discussed in the formal quarterly meetings between SPPP and the Care Commission.
Has the organisation provided copies of (non-confidential) Minutes of the Board of Directors or Trustees meetings?	Quarterly	Yes	Minutes of open Board meetings are posted to the Care Commission's website.
Has the organisation provided copies of its latest risk register and in-year management reporting?	Quarterly	Yes	This Care Commission's Risk Management Framework and Risk Register was reviewed in May. It will continue to be reviewed at subsequent Board meeting.
Has the organisation provided a statement of internal control / annual governance statement?	Annual, by June	No	This information will be produced in the Jersey Care Commission's annual report. The Jersey Care Commission has agreed a Governance Framework to include its mission, values and standing orders. This is subject to review and will be considered by the Board in November 2020.
Have formal meetings with department / Responsible Officer been held in accordance with the prescribed timeframes.	Quarterly	Yes	A planned programme of meetings is scheduled in accordance with the requirements of Section 6 of the Framework Agreement (Ref sub-para 65.0).
Have all other material contractual obligations of the organisation, due to date and in respect to States of Jersey funding, either been satisfactorily complied with or alternatively actively considered, documented and waived?	Ongoing	Yes	This information will be provided in the Jersey Care Commission's annual report.
Have all relevant States of Jersey propositions been adhered to?	Ongoing	Yes	This information will be produced in the Jersey Care Commission's annual report.
Actions required:			
If any concerns are raised regarding the above matters, it is imperative that these are raised with both the Accounting Officer and the Governance Officer at the very earliest opportunity. Urgently following which, and as agreed by the Accounting Officer, such matters must be addressed with the organisation.			

4. Consideration of financial performance (to be performed by the Responsible Officer / contract manager in conjunction with the Finance Director or Finance Manager)	
Is the organisation's financial performance materially in line with the business plan?	Yes
Are the forecasted financial projections in the organisation's financial plan realistic and achievable?	Yes
Are material sources of budgeted external funding or income reasonably secure?	Yes (see comments below)
Does the organisation continue to maintain (taking into account agreed government funding) sufficient funds to enable it to meet its financial obligations for the foreseeable future?	Yes (see comments below)
Material considerations:	
<p>The Commission's financial performance is materially in line with the Business Plan. The Finance Manager's most recent report/s can be appended.</p> <p>The forecasted financial projections of the Commission's financial plan are realistic and achievable. The predictions made were conservative in nature.</p> <p>The Commission does not possess full control of its own finances and is limited in regard to its capacity to undertake detailed financial planning. Whilst full delegation of financial decision making is in place, the Commission remains dependent upon finance support from Treasury to prepare forecasts. This posed a difficulty earlier in 2020 due to the existence of vacancies within Treasury. However, this situation is much improved and the Commission meets regularly with Treasury in order to undertake financial planning.</p>	
Actions required:	
<p>If any concerns are raised regarding the above matters, it is imperative that these are raised with both the Accounting Officer and the Governance Officer at the very earliest opportunity. Urgently following which, and as agreed by the Accounting Officer, such matters must be addressed with the organisation.</p>	

5. Consideration of operational performance and contractual obligations	
Is the organisation's operational performance materially in line with their business plan? <i>(Append relevant documentation to this checklist e.g., organisation's update on their business plan.)</i>	Yes
Has the organisation materially achieved / is the organisation on course to materially achieve its annual performance targets? <i>(Append relevant documentation to this checklist e.g., organisation's management information on performance.)</i>	Yes
Does the department's review of key performance indicators support the continued funding of the organisation? <i>(Responsible Officer's analysis of KPIs should be separately document and appended to this checklist.)</i>	Yes
Has the review of the organisation's non-confidential board minutes raised any material concerns that have not been satisfactorily addressed?	No
Has the review of the organisation's latest risk register / in-year management reporting raised any material concerns that have not been satisfactorily addressed?	No
Does the organisation's annual governance statement (statement of internal control) raise any material concerns that have not been satisfactorily addressed?	No
Material considerations:	
None noted.	
Actions required:	
If any concerns are raised regarding the above matters, it is imperative that these are raised with both the Accounting Officer and the Governance Officer at the very earliest opportunity. Urgently following which, and as agreed by the Accounting Officer, such matters must be addressed with the organisation.	

6. Review of year-end unspent award monies / working capital reserves		
TO BE PERFORMED AS PART OF THE REVIEW OF Q4 PERFORMANCE / FINANCIAL POSITION EACH YEAR		
What is the value of unspent funding award monies at year end?		Not applicable for 6 month review
If different from the above, confirm the total value of working capital at year end (current assets less current liabilities and less restricted funds and agreed 'special reserves')		Not applicable for 6 month review
Following review of both departmental policy on carry forwards (see Staff Handbook) and contractual obligations contained within the Funding Agreement do any actions need to be taken (including repayments / confirmation that repayment is either not required or has been actively waived)? Ensure that any such actions have been sanctioned by the Accounting Officer.	N/A	Not applicable for 6 month review
<p>Notes: Consideration of carry forwards is integral to both the consideration of the success of funding already provided and in respect to the award of further funding (ensuring value for money and proper use of public funds). If there are any doubts as to the appropriateness of carry forward levels or their treatments these concerns should be raised with Accounting Officer and Delegated Governance Officer.</p>		
<p>Actions required: If any concerns are raised regarding the above matters, it is imperative that these are raised with both the Accounting Officer and the Governance Officer at the very earliest opportunity. Urgently following which, and as agreed by the Accounting Officer, such matters must be addressed with the organisation.</p>		

7. Consideration of whether the funding is helping to achieve States of Jersey policies and strategic objectives		
Are the States' and / or departmental policies and strategic objectives being actively supported through the organisation's activities being funded?	Yes	Comments: N/A
Considerations:		
None noted.		
Actions required:		
If any concerns are raised regarding the above matters, it is imperative that these are raised with both the Accounting Officer and the Governance Officer at the very earliest opportunity. Urgently following which, and as agreed by the Accounting Officer, such matters must be addressed with the organisation.		

8. Organisation's structure and board composition:

Provide details of the relevant key persons / decision makers, departmental points of contact and board composition:

The Care Commission consists of the following post holders:

Chief Inspector: Audrey Murphy

Head of Governance, Policy and Standards: Bradley Chambers

Regulation Officer: Dave Luscombe

Regulation Officer: Linzi Mudge

Regulation Officer: Geoff Gurney

Regulation Officer: Alli Tandy

Regulation Officer (0.5): Leslie Callander

Administration: Mandy Bates

Administration: Sally Hazley

The Care Commission is governed by a Board of Commissioners.

Chair: Glenn Houston

Commissioner: Lisa Jacobs

Commissioner: Alison Allam

Commissioner: Ann Abraham

Commissioner: Siân Walker-McAllister

The Board ensures effective oversight of the activities of the staff employed by the Commission in discharging its statutory responsibilities under the Regulation of Care Jersey Law (2014). It ensures that the Care Commission acts independently in determining its priorities and in maintaining effective regulatory oversight of those services which come within its sphere of influence.

A copy of the organisational chart can be appended.

Are there any concerns regarding the probity or composition of the board?	No	Comments: N/A
Are there any concerns regarding due process of appointments of board members from the perspective of States Propositions, or States of Jersey reputational considerations.	No	Comments: N/A
Are there any direct or perceived conflicts of interest between the management / board of the ALO and the States of Jersey / department.	No	Comments: N/A
<p>Actions required: If any concerns are raised regarding the above matters, it is imperative that these are raised with both the Accounting Officer and the Governance Officer at the very earliest opportunity. Urgently following which, and as agreed by the Accounting Officer, such matters must be addressed with the organisation.</p>		


Finance team sign off:

The finance team have reviewed the financial information provided by the organisation and are **satisfied** that all matters raised by the finance team in relation to their review have been satisfactorily addressed.

Signature: 	Date: 04/11/2020	Print name and position Tracy Duncan Head of Finance Business Partnering - SPPP
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Responsible Officer sign off:

After consideration of all the above matters it is **recommended** that funding continue to be provided to the organisation.

Signature: 	Date: 06 November 2020	Print name and position Tom Walker Director General, SPPP
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Delegated Governance Officer sign off:

Confirming that this checklist has been satisfactorily completed (n.b. this is not an affirmation or recommendation of the decisions / comments made by the Responsible Officer).

Signature: N/A	Date:	Print Name
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