



Jersey Care
Commission

INSPECTION REPORT

04 Children's Home

Care Home Service

20 October and 26 November 2020

THE JERSEY CARE COMMISSION

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

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

ABOUT THE SERVICE

This is a report of the inspection of a Children's Home. It is one of seven Children's Homes operated by the Government of Jersey. The name and address of the home 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 three children and young people. The home has three bedrooms, a large lounge/dining room, and a kitchen. The home was established in November 2019 and 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	Anna Pospiech
Regulated Activity	A care home for children and young people's residential care
Mandatory conditions of registration	Maximum number of care receivers receiving personal care or personal support: 3 Category of care: Children Age range of Care receivers: 12 to 18
Dates of Inspection	20 October 2020, 26 November 2020
Times of inspection	9.30am to 1.30pm, 3.30pm to 4.30pm
Type of Inspection	Announced
Number of areas for improvement	Three

At the time of the first inspection visit on 20 October 2020 there were no children or young people accommodated in the home.

A second visit was made on 26 November 2020 to meet with one of two care receivers accommodated soon after the first visit.

SUMMARY OF INSPECTION FINDINGS

The inspection visits were announced, and 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 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.

The home was established in November 2019 and since it became operational in January 2020, three young people have been accommodated there, often at short notice. The Regulation Officer noted that the staffing establishment for this home consisted, in part, of staffing working in other care homes. While there was some evidence from this inspection of staff teams working well together to promote 'belongingness', there have been some concerns regarding the staffing arrangements.

Discussions with staff and managers during this inspection confirmed that staffing numbers were at times inadequate, and that at times staff were not appropriately deployed within the service.

The building is homely, well decorated and suitably furnished to a high standard.

The home is registered to accommodate a maximum of three care receivers. However, with three children/young people living there, the home's facilities for staff to 'sleep in' are inadequate. An area for improvement is for the provider to review the home's capacity to accommodate three care receivers and staff with a view to ensuring that staff are not required to sleep over in the home's communal lounge. Any changes will require a new Statement of Purpose which should include a new staff list.

Children's Services have comprehensive safeguarding policies and procedures that align with Regulations and Standards. Children's Services staff receive appropriate training in safeguarding. The effectiveness of this is kept under review by the manager.

There were no safeguarding referrals to the Safeguarding Team made since the home opened in January 2020. The number of notifications to the Commission and

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/>

outcomes for the three children/young people suggests that keeping children and young people safe outside the home has not always been possible. However, the inspection evidenced a range of appropriate and caring responses from the staff team.

The service has a policy on complaints which has been made available to staff, care receivers and their representatives. There had been one complaint within the last 10 months, and this was dealt with appropriately by the staff team. Complaints were reviewed as part of the service's monthly quality monitoring activity.

Children's Services has a policy on safe recruitment, which is in accordance with the Standards and Regulations. The staff group was a mix of experienced and skilled (qualified) staff, however, staffing shortages were noted over several months. The Commission is clear that the failure to supply sufficient numbers of suitably skilled and experienced staff to work in the home has the potential to impact on the safety and wellbeing of the care receivers. This is an area for improvement.

Care records 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 also noted that there was clear evidence of involvement in the plans by the children and young people. A care receiver was able to talk to the Regulation Officer about their personal plan and describe how they are looked after at the Children's Home, supported to attend school and to have contact with their family. The care receiver also confirmed that they are listened to and well supported by a key worker and other members of the staff team.

The Regulation Officer was able to read all the reports completed by the Independent Person between January and June. There were no reports for July, September or October. The registered manager completed reports in April, May, and June and these provided a good account of how the Standards were being met, with appropriate references to good practice and areas for improvement. There were no reports in July, August, or September. Both the Independent Person's and the manager's reports highlighted concerns about the lack of staff supervision due to Covid-19 and staff shortages.

The registered person must ensure that the Independent Person visits the home at least once a month and produces a report about their visit. Where visits are not undertaken by the appointed Independent Person, the Commission must be notified of the reason and of the arrangements in place to appoint an alternative Independent Person. This is an area for improvement.

INSPECTION PROCESS

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

The home was inspected on a day when there were no children or young people accommodated, and therefore the Regulation Officer made a second visit some weeks later to seek the views of the people who use the service. During these two inspection days the Regulation Officer spoke with managerial and other staff and with one care receiver.

During the first inspection visit, records including policies, care records, incidents and complaints were examined. The Regulation Officer undertook an inspection of the premises.

At the conclusion of the first inspection visit, the Regulation Officer provided feedback to the registered manager and to the residential lead officer for Children’s Services.

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 included at the end of the report.

INSPECTION FINDINGS

The service’s Statement of Purpose and conditions on registration

The Care Home’s 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 mandatory and discretionary conditions:

Conditions of Registration	<p><u>Mandatory</u></p> <p>Maximum number of care receivers receiving personal care or personal support: 3 Category of care: Children Age range of Care receivers: 12 to 18 Maximum number of care receivers in each bedroom: Rooms 1 to 3, one person</p> <p><u>Discretionary</u></p> <p>None</p>
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The Regulation Officer examined the home’s staffing arrangements, as set out in the Statement of Purpose. It was noted that plans that had been put in place to provide a stable staff team had not been implemented. The home’s Statement of Purpose should be updated to accurately reflect the current staffing arrangements.

Since opening in early January, the home has accommodated three children/young people, one at a time until October, with a short time (days or a week without children placed) between each new placement.

The inspection of the premises found that the building is clean, homely, well decorated and suitably furnished to a high standard. Each child/young person accommodated at the time of the inspection had the choice of a bedroom with ensuite facilities (toilet and shower) or a bedroom with a separate bathroom. At the time of the inspection, the third bedroom was being used as a sleep-in room for a member of staff each night.

The home is registered to accommodate a maximum of three care receivers. However, with three children/young people living there, the home's facilities for staff to 'sleep in' are inadequate with staff having to use the home's communal lounge for this purpose. This significantly reduces care receivers' access to communal areas each night, and also impacts on the privacy of staff working in the home.

The home's staffing arrangements were discussed with a representative of the registered provider on 24 November and a commitment was given to ensuring that staff working in the home would not be expected to 'sleep over' in the communal lounge. It was therefore acknowledged that the home's capacity to accommodate three children / young people would need to reduce to a maximum of two children / young people.

An area for improvement is for the provider to review the home's capacity to accommodate three care receivers alongside the staffing arrangements required overnight and to submit to the Commission a plan to address this.

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 have comprehensive safeguarding (Safeguarding Partnership Board) policies and procedures that align with Regulations and Standards.

Children's Services staff receive training in safeguarding during their induction and on an on-going basis. The effectiveness of this is kept under review by the manager.

There were no safeguarding referrals to the Safeguarding Team made since the home opened in January 2020.

The number of notifications to the Commission and outcomes for the three children/young people suggests that keeping children and young people safe outside the home has not been possible. There have been numerous reports of care receivers leaving without permission. The subsequent involvement of the police and other statutory agencies has also featured.

However, the inspection evidenced a range of appropriate and caring responses of the staff team. There was evidence that the skills and experience of the staff groups have kept the children/young people safe and well looked after while they were in the home.

The Regulation Officer noted the significant involvement of Child and Adolescent Mental Health (CAMHS) staff in supporting the staff team with risk assessment and care planning for one young person.

Safeguarding incidents, referrals and notifications were reviewed as part of the service's monthly quality monitoring activity and the Independent Person commented on the number of notifications and expressed a concern about staffing levels.

Complaints

The Standards for Care Homes 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 information provided to each child or young person at the time of their admission, 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 10 months, and this was dealt with appropriately by the staff team.

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

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

According to the home's Statement of Purpose, the staffing establishment is a registered manager (who is also the manager of another children's home), a senior shift leader (a deputy manager), a shift leader (senior), and eight residential

childcare officers. This would provide a ratio of ten staff to three children when the home is fully occupied. In practice however, it was noted that as individual children and young people were admitted to the home, on each occasion a team of experienced and skilled (qualified) staff was put in place. These staff were mainly employees from other children's homes.

During the inspection, the lead officer for Residential Care, the manager and the senior shift leader described the three separate staff teams that had been put in place to support each admission.

Staffing levels within the home became depleted between March and June due to Covid-19 and the need for some staff to self-isolate. The Regulation Officer was advised that as staffing became more difficult across children's services, this home's staffing was further reduced.

The Commission escalated concerns regarding the home's staffing arrangements to the registered provider in May and June 2020 expressing concerns about low levels of staffing including frequent lone working, lack of managerial oversight and the appropriate gender mix of staffing.

Staffing shortages had been noted over several months (April, May, June) by the registered manager who reported that there were five staff (full-time equivalent) in post, and three vacancies.

The registered manager also reported to senior management their concerns regarding the absence of supervision and appraisals due to staffing shortages and Covid-19. Supervision meetings were achieved in May but not in June.

In addition, the reports of the Independent Person's visits to the home also highlighted concerns regarding staffing and recommendations to the provider to take steps to ensure the staffing regime is sustainable and appropriate in the longer term.

The Commission is clear that the failure to supply sufficient numbers of suitably skilled and experienced staff to work in the home has the potential to impact on the safety and wellbeing of the care receivers.

At the time of the second inspection visit (November) there was adequate staffing in place to meet the needs of the two young people accommodated. However, this is an area for improvement. For any home, the registered person must put in place a staffing structure (numbers and responsibilities), which is 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.

The manager confirmed that staff shortages and the complexity of support needed for the care receivers meant that monthly supervision sessions did not always take place.

The Regulation Officer highlighted the requirement for staff supervision as set out in the Regulations and Standards. In light of the complexity of the needs and support

requirements of the children and young people using this service, regular staff supervision is necessary to ensure that staff are appropriately supported. The frequency of supervision will be kept under review by the Care Commission.

Care planning

The people to 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 all the care receivers. These were reviewed by the Regulation Officer in respect of the three previous residents. The records also include 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 "Children Looked After" (CLA). Therefore, there is a requirement that care plans or pathway plans and CLA reviews are maintained as part of each care receiver's record.

During the October visit the Regulation Officer reviewed the records for the three previous care receivers and noted that these 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 also noted that there was clear evidence of involvement in the plans by the children and young people.

During the inspection visit in November, a care receiver was able to talk to the Regulation Officer about their personal plan and describe how they were looked after at the Children's Home and supported to attend school and to have contact with family. The care receiver also confirmed that they felt listened to and well supported by a key worker and other members of the staff team.

Monthly quality reports

The quality of care provision 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. Children's Services appointed an Independent Person before registration, to interview in private children, parents,

relatives and staff (provided that they consent); look at premises and records, including care records (if the social worker and the child give their permission); visit unannounced and make recommendations for actions with timescales.

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

Prior to the inspection, the Regulation Officer reviewed all of the reports completed since January 2020 and noted that during the initial Covid-19 lockdown period, the Independent Person had not been able to visit the home. However, there was evidence of discussions held between the Independent Person, the registered manager and staff and requests for written information in April, May and June. There were no reports completed for July, August, September or October.

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, May, and June and in addition to highlighting the staffing issues outlined above, these provided a good account of how the Standards were being met, with appropriate references to good practice and areas for improvement. There were no reports in July, August, or September.

The registered person must ensure that the Independent Person visits the home at least once a month and produces a report about their visit. Where visits are not undertaken by the appointed Independent Person, the Commission must be notified of the reason and of the arrangements in place to appoint an alternative independent person. This is an area for improvement.

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 3 Conditions of Registration (General)</p> <p>To be completed by: Two months from the date of inspection (27th January 2021).</p>	<p>The registered provider must review the home's capacity to accommodate three care receivers alongside the staffing arrangements required overnight and to submit to the Commission a plan to address this.</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 (27th February 2021).</p>	<p>To appoint a staffing structure which is consistent with the home's 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.</p>
<p>Area for Improvement 1</p> <p>Regulation 3 Conditions of Registration (General)</p> <p>To be completed by: Two months from the date of inspection (27th January 2021).</p>	<p>Response by registered provider: The Registered Provider intends to review the home's capacity in regards care receivers and the subsequent staffing arrangements required overnight. A plan will be submitted to the Commission detailing these arrangements.</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 (27th February 2021).</p>	<p>Response by registered provider: A recruitment campaign for both substantive (permanent) and bank (zero hour) residential staff was concluded in October 2020 and the individuals that were successful in obtaining roles have been apportioned to homes across the service. Subsequently, this will permit the home in question to appoint a staffing structure more in line with the Statement of Purpose and ensure that a staff to children ratio does not fall below two members of staff on duty at all times.</p>

<p>Area for Improvement 3</p> <p>Regulation 31: Reviewing quality of service</p> <p>To be completed by: Starting immediately.</p>	<p>The provider must put suitable arrangements in place to report monthly on the quality of care provided and compliance with registration requirements, Standards and Regulations.</p>
	<p>Response by registered provider:</p> <p>The provider will ensure that appropriate arrangements are in place to report monthly on the quality of care provided and compliance with registration requirements, standards and regulations.</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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