



Jersey Care
Commission

INSPECTION REPORT

04 Children's Home

Care Home Service

2 September and 7 September 2021

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	2 September 2021, 7 September 2021
Times of inspection	10.00am to 2.00pm, 12.00pm to 2.00pm
Type of Inspection	Announced
Number of areas for improvement	Two

At the time of this inspection, there were two care receivers accommodated in the home. One of these receivers transitioned to a different home during the first week of September.

SUMMARY OF INSPECTION FINDINGS

The following is a summary of what we found during this inspection. Further information about our findings is contained in the main body of this report.

Overall, the findings of this inspection were positive. A small but dedicated team of staff have supported two young people through some significant challenges. As with the wider service, challenges remain in relation to staff recruitment.

There were three areas of improvement noted in the last inspection which was completed on 26 November 2020. One of these areas has been addressed. Challenges remain in relation to staff structure and recruitment, and this is a factor in the wider sector. There have been challenges in the role of the independent visitor and their ability to visit the home due to Covid 19 restrictions. However, a new independent visitor has now been appointed and reports have been submitted to the Commission for July and August 2021.

There were no safeguarding alerts made during the past 12 months. However, a significant number of notifications have been submitted to the Commission indicating missing episodes (i.e., times when a child or young person leaves the home or is absent without permission): for one resident, (30 notifications) and for the other resident (15 notifications). The provider advised that daily meetings would occur, chaired by the Director of Safeguarding and Care for Children's Service, to discuss ongoing planning for young people, reported as missing.

It is noted that during the year that four emergency placements had occurred. While acknowledging that emergency situations will arise, the Registered Manager needs to be assured that, in each case, such placements are in the best interests of the young person, are time limited and that due consideration is given to the impact of such placements on the other residents and staff team.

INSPECTION PROCESS

This inspection was announced on 2 September 2021, with a phone call two hours in advance of the visit. A further meeting with the Registered Manager was held on 7 September 2021. One Regulation Officer undertook the inspection.

The Children and Young People's Residential Care Standards were referenced throughout the inspection.¹

The primary purpose of this inspection was to:

Follow up on the areas for improvement identified during the inspection undertaken on 26 November 2020.

This inspection focussed on the following lines of enquiry:

- **Safeguarding and safety**
- **Staff recruitment, training, and development**
- **Care planning**
- **Monthly Quality Reports**
- **Care home environment**
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Prior to our inspection visit, all of the information held by the Commission about this service was reviewed, including the previous inspection report.

The Regulation Officer sought the views of the people who use the service, and or their representatives, and spoke with managerial and other staff. The Regulation Officer also spoke with a Children's Service Social Worker for one of the care receivers.

During the inspection, records including policies, care records, incidents and complaints were examined. The inspection included a tour of the building.

At the conclusion of the inspection, the Regulation Officer provided feedback to the senior member of staff.

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 is attached at the end of the report.

INSPECTION FINDINGS

At the last inspection, three areas for improvement were identified and an Improvement Plan was submitted to the Commission by the registered provider setting out how these areas would be addressed.

The Improvement Plan was discussed during this inspection and it was apparent that some of the areas for improvement had been addressed. However there remain ongoing concerns in relation to staffing, and while acknowledging the recent

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/>

recruitment of an independent visitor, the lack of quality assurance oversight in the last year remains a concern.

The Improvement Plan contained three areas for improvement. The first of these related to the need for the provider to review the home's number of residents and related staffing ratios. With four notified emergency placements, all short term, the home has only had two care receivers since the last inspection. The Provider gave an assurance that the home's capacity would be reviewed, and a plan submitted to the Commission. The Commission is still to receive this review.

The second area for improvement related to the staff to children ratio which should not fall below two members of staff on duty at all times. As previously noted, this remains an area of challenge for the wider service. A recruitment drive earlier in the year resulted in a number of new recruits joining the home. There is an induction process which the member of staff was able to describe in detail. Supervision is occurring with the Senior Shift Leader. Several staff have now completed their RQF Level 3 (Regulated Qualification Framework), with the remainder of the permanent team part way through this qualification, or about to commence the training.

The rotas which were reviewed as part of the inspection, indicated that in recent months, in order to maintain two staff on duty, that significant extra shifts were covered by the staff team.

The third area for improvement related to the monthly reporting of quality of care provided and compliance with registration requirements, Standards and Regulations.

It is positive to note that a recently appointed independent visitor has already visited the home with reports submitted to the Commission in July and August.

Safeguarding and safety

Reference is made to Standard 8 which states 'you will feel safe'.
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One resident stated that they felt very safe and cared for in the home. They were positive in relation to the support that had been given during their time at the home.

This included support when transitioning between various homes as well as preparation for leaving the home.

The other resident declined to speak with the Regulation Officer. However, staff reported that the young person was working with other professionals and was developing positive relationships with the staff.

Safeguarding incidents, referrals and notifications are reviewed as part of the service's monthly quality monitoring activity. While acknowledging the recent recruitment of a new independent visitor, there was a significant part of the year in which virtual visits were conducted and the subsequent reports did not reflect on the many 'missing from care' episodes and notifications that had been submitted to the Commission.

With reference to the 'missing from care' episodes, the Commission were advised that the Provider had reviewed 'missing and absent from home' episodes and provided updated guidance on when to report a young person as missing.

The staff team were able to share in detail the process for reporting young people as missing. Records confirmed that ongoing support is provided to the young people in the home following missing episodes. This included details of the reporting process including involving the Police, support for the young person on their return and evidence of further planning from the Provider's daily planning meeting, (the Provider has a daily planning meeting chaired by the Director of Safeguarding and Care for Children's Service). It is noted that for the residents in this home, given the number of notifications, regular multi-agency meetings have occurred to consider safety planning for them.

With reference to the notifications supplied to the Commission, the Senior Member of Staff agreed with the Regulation Officer's request to provide more detail in relation to outcome planning in the notifications.

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

Reference was made to Standard 3 of the Care Home Standards which states: "You will be cared for and helped by the right people with the right values, attitudes, understanding and training."

Staff spoke positively about their recruitment, and of the induction and training provided by the service. Staff training records were reviewed, which demonstrated that detailed safeguarding training had been provided. A recently recruited member of staff spoke positively about their induction and ongoing support from the senior members of staff in the home. This included supervision on a regular basis both formally and informally which they found really helpful. They have undertaken training in the use of the electronic recording system (MOSAIC), in resilience, in the management of violence and aggression (Maybo), and in cyber security.

A senior member of staff was pleased to advise the Regulation Officer that they had been promoted within the service and would be moving to another unit shortly.

The Registered Manager was able to demonstrate a clear understanding of safe recruitment and assured the Regulation Officer that they have access to staff records (including application forms and checklists, interview notes, references, and other documents), which are held by the Government of Jersey's HR department. Records of staff training and development, sickness absence, and supervision are maintained by the Registered Manager.

According to the Statement of Purpose, the staffing establishment consists of a Senior Shift Leader (a Deputy Manager), a Shift Leader (Senior), and five Residential Child Care Officers. This represents (when the care home is full to capacity), a ratio of seven staff to two children/young people.

At the time of the inspection, the staff list included a Senior Shift Leader, a Shift Leader and four permanent Residential Care Officers, with a further member of staff on permanent nights. However due to sickness, there has been significant pressure in recent months on staffing. While recruitment is ongoing, challenges remain for the service as a whole. A temporary solution by the Provider meant that Children's Service Social Workers covered night shifts.

The Senior Shift leader was present throughout the inspection. They spoke with clarity and hope for the young people in the home. They are also very passionate about the staff team and ensuring that new recruits are well supported into the service. Their supportive leadership is reflected in the comments from other staff members which were very positive.

During the inspection, staff discussed the challenges associated with the Covid-19 lockdown. Staff have been required to isolate at various times in the last year.

Senior staff supervision is provided by the Registered Manager. At present this is not occurring on a monthly basis. The Registered Manager has assured the Regulation Officer that supervision records will be updated within a month.

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.

During the preparation of this report, it is noted that further pressure on the home's staffing resources occurred due to the Providers needing to provide support in other homes.

Care planning

Reference was made to Standard 13 which states 'when the time comes, you will be prepared and ready to move on'.

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 care records for both residents were reviewed on the electronic system called MOSIAC which is used throughout the children's service. This allows for the sharing of information between the care home and social workers.

For one resident there was a very specific transition plan. There was clear evidence in relation to the young person being supported to develop good relationships with their new home. The positive relationship between the young person and staff team is clearly evidenced in case recordings.

The Children's Service Social Worker was very positive in relation to the support provided by home staff to the young person. They added that they had visited the home on a number of occasions and found the home very accommodating. They felt that care plans were well managed with the young people actively encouraged to participate in the development of their care plans.

For the other resident, the situation remains less clear. While the ambition is to identify a long-term foster placement, this has proven to be challenging and this uncertainty is a cause of anxiety.

Both young people have comprehensive risk assessments. These are reviewed by the senior members of staff on a regular basis. This includes support plans for the young people following missing episodes. The Provider has daily meetings to discuss the young people who have been reported as missing and, in this arena,

safety plans are discussed. There is a weekly meeting with wider professionals including the Police.

The residential personal plan and care plans for both residents were detailed and had evidenced 'the child's voice' throughout.

Monthly quality reports

Reference was made to Standard 15 which states 'How you are cared for and where you live or stay will be checked and reviewed regularly to sort out any issues and make things better for you and other children and young people.'

The provider is required to appoint an Independent Person who must visit the home and report on the way the home is managed, and the quality of care provided for the children. These visits should be unannounced and should include details of contact with the care receivers.

The Registered Manager and the Registered Provider must consider whether to act on any recommendations made by the Independent Person.

The Regulation Officer was able to read all the reports completed since the last inspection in November 2020. Following a further lockdown associated with Covid 19, the Independent Person completed virtual inspections until April 2021. The Commission raised concerns to the provider in relation to the effectiveness of these visits, especially in relation to the lack of independent scrutiny or oversight of significant safeguarding concerns, i.e., missing episodes.

The Registered Provider appointed a new Independent Person in June 2021 with subsequent monthly visits completed in July and August 2021. The reports of these visits have been received and reviewed by the Commission. The July report was based on a virtual assessment while the August visit was conducted in person.

While acknowledging the recent appointment of a new Independent Person by the provider, this is an area for improvement.

Care home environment

Reference was made to Standard 2: "Settling in to where you will live or stay will be handled gently and you will feel welcomed to a friendly and caring, safe, homely setting.'

One care receiver commented that the atmosphere at the home was good. They did not like the location, given its proximity to a primary school. They confirmed that they had 'decorated' their own bedroom and were part of discussions in relation to decoration of the communal parts of the home.

The proximity of the home to a primary school has been raised by the home residents and other professionals. The Registered Provider should consider the long-term plans for this home.

The home is a small, detached property with three bedrooms. One bedroom is ensuite with a house bathroom used by the other resident. The home is well presented and feels 'homely'. To the rear of the property is an enclosed garden.

Young people are supported on admission into the home with time taken by staff to help them settle. During this time, the staff team ensure that the young person understands how the home functions and start to 'build a picture' of the young person's hopes and fears.

The Young Person's Guide was reviewed in the inspection with improvement ideas discussed with the staff team. The Registered Manager has given a commitment to update this document without further delay.

While it is acknowledged that there are occasions where emergency placements must be facilitated, the impact on the home is significant. The Registered Manager has little input in these decisions other than to support the young person. The nature of these placements often means that the decision to 'accommodate' a young person is taken by Senior Managers within the Provider service. The Commission has been notified of four such admissions this year. It is recognised that these placements were for a few days. However, the third bedroom is normally used as an office and staff sleep over room, therefore emergency placements also cause practical disruption to the running of the home. For example, identifying alternative sleeping and bathing facilities for the staff overnight is sometimes a challenge.

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>Ref: Regulation 31 (1) Standard 15.7</p> <p>To be completed by: 30 October 2021</p>	<p>The Registered Provider to ensure that the Independent Visitor attends on a monthly basis. Reports should continue to be forwarded to the Commission</p>
	<p>Response by registered provider:</p> <p>The Registered Provider has taken measures to ensure adequate Independent Visitor arrangements are in place. Monthly visits are conducted by the allocated Independent Person and reports forwarded to the commission.</p>
<p>Area for Improvement 2</p> <p>Ref: Regulation 17 Standard 7</p> <p>To be completed by: 7 November 2021</p>	<p>To appoint a staffing structure that enables the Registered Manager to achieve a staffing rota of two members of staff on duty at all times and to advise the Commission of the plan in relation to staffing to ensure that this structure is maintained</p>
	<p>Response by registered provider:</p> <p>The Registered Manager initiated an amended rota where two staff is on duty each shift and so ensuring that adequate cover is in place at all times.</p>
<p>Area for Improvement 3</p> <p>Ref: Regulation 3</p> <p>To be completed by: 7 November 2021</p>	<p>The Registered Provider to forward a copy of the review and plan in relation to the home's capacity undertaken in January 2021.</p>
	<p>Response by registered provider:</p> <p>The Registered Provider will forward a copy of the aforementioned review in relation to the home's capacity at the first opportunity.</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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