



INSPECTION REPORT

03 Children's Home

Care Home Service

15 October 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 kitchen / diner and two lounge areas. It has an enclosed rear garden and separate garage area. 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	Alison Morrison
Regulated Activity	A care home for children and young people's residential care
Conditions of Registration	Mandatory Maximum number of care receivers receiving personal care or personal support: 3 Category of care: Children Age range of Care receivers: 12 to 18 in the following rooms: Rooms 1-3. One person in each room Discretionary Alison Morrison registered as manager of 03 Children's Home must complete a Level 5 Diploma in Leadership and Management in Health and Social Care to be completed by 6 December 2022
Dates of Inspection	15 October 2021

Times of Inspection	11.30am – 15:45pm
Type of Inspection	Announced with short notice
Number of areas for improvement	Two
Number of care receivers using the service on the day of the inspection	One

At the time of this inspection the home had three care receivers registered at the home, although two were at other addresses at the time.

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 inspection was positive. The previous inspection had highlighted three areas for improvement. It is positive to note that two of three have been resolved while challenges remain in relation to the third which relates to the staffing structure.

The staffing structure remains an area for improvement. There is an ongoing recruitment campaign for the service which has had some success. For this home, it is positive to note the recent addition of a Senior Residential Child Care Officer, who will aid the Registered Manager in supervision tasks. The home currently has four vacancies, and while acknowledging the dedication of the staff team, the continued need for them to cover extra shifts is not sustainable. This is an area for improvement.

The home is a detached property. The current layout of the property means that when three care receivers are in residence, staff lose the sleep-in room and one of the lounges becomes a sleep-in room thus reducing access to this room for the care receivers. It is also noted that the fabric of the home has been damaged and a timelier redecoration plan would enhance the presentation and 'feel' of the home. This is an area for improvement.

The Registered Manager also manages another home within the service. This has led to challenges relating to staff supervision and appraisals. The Registered Manager advised the Regulation Officers that there is a plan for this situation to be resolved in the near future.

One care receiver spoke with the Regulation Officers. They advised that they had settled quickly into the home, that staff were very supportive and that they felt safe. They advised that they had been involved in the development of their care plan.

A Children's Service Social Worker was also spoken to. They were very positive in relation to the home environment and for the care provided to a care receiver. They

had visited the home on a number of occasions and times and found the staff team to be responsive and supportive.

The staff team spoke positively in relation to a recent care receiver who had successfully transitioned into another care environment. From looking at the records this is an area of good practice. The team added that they have benefitted from the support from an external mental health service called 'Headsight'.

INSPECTION PROCESS

This inspection was announced and completed on 15 October 2021, with a phone call to the Manager the day before the visit. This was to ensure that the Registered Manager would be available during the visit and to confirm the service's infection prevention and control arrangements. Two Regulation Officers undertook the inspection.

The primary purpose of this inspection was to follow up on the areas for improvement identified during the inspection undertaken on 10 September 2020.

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

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**

Prior to our inspection visit, all of the information held by the Commission about this service was reviewed, including the previous inspection reports. This included any notifications and any changes to the service's Statement of Purpose.

The Regulation Officers sought the views of the people who use the service and spoke with managerial and other staff.

On the day of the inspection, the home had one resident. They were happy to engage with the Regulation Officers and to share the experiences of life at the home.

The views of a Social Worker were also obtained as part of the inspection process. All discussions were face to face.

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/>

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 Officers 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 is attached at the end of the report.

INSPECTION FINDINGS

At the previous 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 positive to note that there have been some improvements.

The first of these related to the home's Statement of Purpose. This has been reviewed on a number of occasions in the last twelve months with the most recent update provided to the Commission on 9 October 2021. The Statement of Purpose is a document outlining the operation of the home and includes details of staff, their qualifications, and admission and support policies for the residents. It also confirms the rostered staffing numbers for the home and in this case states that there will always be two members of staff on duty.

The second area for improvement related to staff HR records. This was reviewed by the provider and assurances given to the Commission which state that Registered Managers have access to all HR records which are held centrally by the Government of Jersey. The Registered Manager has confirmed that this is the case.

The third area for improvement stated that the provider needed to 'appoint a staffing structure more in line with the original 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.' This remains an ongoing challenge for the home and for the wider service. Staff confirmed that the last twelve months have been challenging with Covid 19 issues. They expressed that the impact of staff sicknesses, some long term, have exacerbated the problem. There have been a number of recruitment drives in the year which have seen some success for the service as a whole.

The rotas, which were reviewed in this inspection, indicated staff covering a number of extra shifts on a weekly basis in order to ensure two staff on duty at all times. It is positive to note that a significant number of staff (over 65%), have completed their RQF (Regulated Qualification Framework) level 3. The remaining members of staff have started or are about to start their RQF level 3.

Safeguarding and safety

Reference is made to Standard 8 which states 'you will feel safe'.

One young person was spoken to the home and they confirmed that they felt 'safe' there. They confirmed that the staff team were very supportive, and that they felt that they had settled well.

The staff team are very supportive of the young people in their care, and they all commented on the young people positively. While noting that there have been a significant number of missing from care episodes in the last year, staff remain committed to ongoing care and support for them. They are very keen to explore new ways of supporting the young people and this has included training from mental health professionals.

Two members of staff confirmed that their recruitment, induction, and training had been a positive experience. This included safeguarding training. Staff are encouraged to undertake further training. Both added that there had been challenges in relation to supervision, including from the impact of Covid 19, the Registered Manager managing two homes, and ongoing staffing challenges within the home. It is positive to note that the plans for supervision are in place and the recent recruitment of a senior member of staff has helped with this.

The Commission has been sent a number of notifications in relation to missing from care episodes. For one young person there were 70 such notifications. It is evident from the case recordings that the staff team have attempted a number of strategies to encourage the young person to remain within the home. The staff team remain passionate in their wish to support the young person. Case recordings also indicate a positive relationship between the young person and staff members. 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.

With reference to the notifications supplied to the Commission, the Registered Manager 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."

Children's Services have very clear and robust policies and procedures in relation to safe recruitment. The Registered Manager was able to share their understanding of these policies.

Records of staff training and development, sickness absence, and supervision are maintained by the Registered Manager. The Registered Manager uses a training

matrix to ensure their staff team access the appropriate training in a timely manner. The Government of Jersey holds all staff recruitment details in a central location. This includes application forms and checklists, interview notes, references, and other documents. The Registered Manager has assured the Regulation Officers that they have access to staff records and have seen copies of all documents relating to their staff. One Regulation Officer met with People Hub, separately to the inspection visit, to examine a number of these records.

The Statement of Purpose sets out in detail the staffing requirements for the home. As a minimum, it states that there will always be two staff on duty in the home. Overnight, there will be a waking member of staff and also one on a sleeping shift. Staffing will also be amended should the individual needs of the young people require further support.

Staff induction will include mandatory training in First Aid, fire safety, safe handling, safeguarding, food hygiene and Maybo (training in managing violence and aggression). All staff will be trained to QCF level 3 in Health and Social care or equivalent or be in the process of obtaining such a qualification.

Staff spoken to at the inspection confirm this is the case. They added that 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.

According to the Statement of Purpose, the staffing establishment consists of a Registered Manager who also oversees another home, a shift leader (senior), and twelve residential child care officers.

At the time of the inspection, the staff list included eight permanent residential care officers, with a further two part time staff working nights, with some use of bank (temporary) staff. The Regulation Officers noted that one member of staff has needed to absent for a prolonged period and that this has had the impact of further exacerbating difficulties associated with maintaining appropriate staffing numbers.

Members of staff felt that the home had responded well to Covid 19 challenges in the last year.

The Regulation Officers noted a strong sense of dedication to the young people in the home from the staff team. Staff spoke with pride of some of the achievements of the young people.

Staff reported that supervision has been more of challenge due to staffing and managerial challenges. However, the recent appointment of a senior member of staff will support the Registered Manager to ensure that all staff have access to monthly supervision. The staff group meet regularly in relation to new admissions and to discuss issues with their residents. Members of staff also felt the use of clinical supervision, provided by an external agency, had been very positive. The Registered Manager advised that there is an ongoing recruitment campaign and that they will be involved throughout this process. They advised that there were four vacancies at the time of the inspection.

The Registered Manager confirmed that they would complete their QCF level 5 by the end of January. This was a discretionary registration requirement.

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 all three 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. The home also maintains paper records for the residents which provide staff with a very quick reference and summary point of information.

The staff team spoke with pride of a recent resident who has successfully transitioned into foster care. They felt that this was a positive outcome for the young person and ongoing support plans from the home are positive and appropriate. The care plan and its recordings are clear and demonstrate the young person's full participation in the care planning process. Reference was also made to the support provided to the young person to develop positive relationships in their new home.

The Children's Service Social Worker was very positive in relation to home staff and of their support for a young person. They felt the staff team were approachable, open, and passionate about the young people in their care. They confirmed that care plans were child-focused and that the young person with whom they were working, had actively participated in the care plan development.

At the time of the inspection, the two other residents were staying in another home. One will return to this home and the staff team are already planning for this, including the relationships that will develop in the home. The plan for the other young person indicates a move to another placement. Again, support will be offered in the transition period.

The young people in the home have detailed care plans and risk assessments. This includes planning for missing episodes. The Commission has received a number of notifications from this home in the last year in relation to missing from care episodes. These are discussed on a daily basis by the provider with a weekly meeting with other professionals chaired by the Director of Safeguarding.

Discussions with the staff team indicated that the specific needs of the young people are discussed. The staff team have asked for further mental health support in order for them to be able to support one of the residents. This includes the use of clinical supervision.

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 on 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 Officers were able to read all of 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 Registered Provider appointed a new Independent Person in June 2021 with subsequent monthly visits completed in July, August, and September 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 and September visits were conducted in person. The Commission understands that a further visit was undertaken in October. The reports are detailed and its positive to note that recommendations made are followed through in subsequent visits.

The Registered Manager also completes monthly quality assurance reports for the Provider. Again, these are detailed documents and were made available to the Regulation Officers.

A Children's Service Social Worker was spoken to and was keen to confirm that they were very happy with the care home and of the care being provided to the young person. They confirmed excellent communication from the home. They added that they had completed weekly visits at various times of the day.

Care home environment

Reference is made to Standard 6 - Where you live or stay will be comfortable, safe and accessible and 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.'

The home is a detached property. Externally, the property is in good order. To the rear of the property is an enclosed garden. It has a lawned area and an area for growing vegetables and plants. There is a storage shed in this area which has been substantially damaged. It is unclear if this is repairable.

The property also benefits from a large garage which is used for storage of equipment and bicycles.

The home is accessed through a rear door which goes directly into a large kitchen. The kitchen includes a dining area. At the time of inspection, the young person was in this area with staff members. The interaction between them all was positive and supportive. The young person later confirmed to Regulation Officers that they felt relaxed in the home and were happy to be there. They added that the introduction into the home had been clear and helpful. They have been able to plan decorations for their own room.

To the rear of the property are two lounge areas. One is being set up as a games room. At present, this room also acts as a staff sleep in room with the mattress and bedding stored behind the sofa. This means that when used by staff, residents cannot access the communal space. The Regulation Officers also highlighted concerns about the lack of suitable facilities for staff using this area.

Both rooms would benefit from redecoration.

On the first floor are two bathrooms, both in good order. Currently there are three double bedrooms with a small fourth bedroom which is used as an office. This room had previously been used as a staff sleep in room.

It was noted that, on the stairs and landing are a number of areas of damaged walls. They have been partially repaired but this needs to be completed. One of the bedrooms has been redecorated to a high standard and there are plans to redecorate the other bedrooms.

It is noted that the inspection report of 10 September 2020 highlighted the need for a staff sleepover room. The provider should consider the use of the rooms of the home with some re-configuration of the space to make it more 'homely'. The home was clean and tidy with cleaning rotas and schedules in place.

IMPROVEMENT PLAN

There were two 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 17</p> <p>Standard 7</p> <p>To be completed by: 1 month from the date of inspection ().</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> <hr/> <p>Response by registered provider: A recruitment campaign for both substantive (permanent) and Bank (zero hours) is ongoing. Vacant posts are going to advert regular but getting new starters with the skill set required has not always be successful. The campaign will be on going until all post are filled and then providing training and support to retain staff.</p>
<p>Area for Improvement 2</p> <p>Ref: Standard 6</p> <p>To be completed by: 2 months from the date of inspection.</p>	<p>The provider to review the home's occupancy level and to re-establish a staff sleep in room. For repairs and redecoration to be completed in a timely manner.</p> <hr/> <p>Response by registered provider: The plan is for Hautlieu House to become a two bedded home which will re-establish a staff sleep in room. This has been agreed by Senior Management, however this cannot happen until a suitable home becomes available for a young person to move into.</p> <p>Over the last 6 weeks the home has started to be redecorated and new furniture has been purchased.</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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