

Summary Report

Secure Children's Home

Care Home Service

9 and 24 March 2022

The full report can be accessed from here.

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 report.

There were eight areas for improvement at the last inspection in November 2021, and these had not all been resolved. It is of concern that there has been no improvement in many areas since the last inspection. Further detail is provided in the report.

Overall, the Regulation Officer was concerned about the safety and wellbeing of both young people and staff at this secure children's home. There has been no Registered Manager since September 2021, and the Interim Manager has no authority for decision making. This has contributed to the development of a chaotic culture with varied levels of understanding and interpretation of the guidelines and routines for the young people in the home. This is an area for improvement.

Staff consulted were motivated and wanted to promote positive outcomes for young people. However, there was a lack of induction programme for new staff and staff seemed uncertain of their roles and responsibilities. To ensure the safety of both staff and young people at this home, the Provider should review the Statement of Purpose to consider whether the current ratio of four staff for all care receivers is appropriate for this group of young people. At times, it was reported that there are less than four staff on duty, due to the low number of staff in the team. Staff are currently spending time away from supporting the young people when answering the door or telephone and this leaves a reduced number of staff on duty. This is an area for improvement.

It was identified during the previous inspection that the environment is not homely. This remains the case. There has been ongoing damage to the environment. Damaged fixtures, furnishings, fittings and structures are often not repaired in a timely manner. The doors to bedrooms resemble prison doors. These have not been changed despite the assurance provided at the last inspection. Staff did not

feel that they had sufficient training to enable them to feel confident in managing challenging behaviour. This is an area for improvement.

A medications inspection was completed by the Lead Pharmacist which did not indicate any concerns. However, there is no medications policy. Policies for admissions, restraint, searches, and visiting should also be in place. This is an area for improvement.

It is acknowledged that there has been an improvement in the number and quality of notification of incidents submitted to the Commission since the previous inspection. This is not always consistent or timely and this was discussed and acknowledged by the Interim Manager.

The inspection in November 2021 included a requirement that the Young People's Guide be reviewed and updated to more fully reflect how the service operates. This remains outstanding and must be resolved as an action from this report.

This Secure Children's Home has to meet the needs of a variety of young people. As part of the Statement of Purpose, all young people should receive an assessment from the Child and Adolescent Mental Health Service (CAMHS), within 72 hours of admission. The Interim Manager was unable to confirm that this had happened for the last young person admitted to this service. Additionally, CAMHS need a robust role in care planning for some of the young people in this home. Some of the staff did not attend clinical supervision and there was confusion regarding the care plan for one young person. This is an area for improvement.

Young people are supported to access support from an advocacy provider. It was evident that complaints are taken seriously and are thoroughly investigated. There are regular visits from a Children's Rights Officer. This is an area of good practice.

The sports hall is currently used by an external organisation for a significant part of the week. This means that young people cannot use this facility when they are motivated to do so. The Standards state that facilities cannot be used for other

purposes. It is an area for improvement that the external organisation is given notice to guit and that these facilities be for the sole use of care receivers.

All staff members need to receive regular structured supervision. As a result of the low staff numbers, it is not practicable for supervision to be provided. Were it to take place, it would interfere with the capacity of staff to undertake their duties in supporting the young people and could potentially place both care receivers and staff at risk. This matter must be addressed, and supervision must be provided. Additionally, the challenging nature of the work at this home indicates that supervision should be given on a more regular basis than the minimum set out in the Standards.

IMPROVEMENT PLAN

There were 12 areas for improvement identified during this inspection. The table below is the registered provider's response to the inspection findings.

Area for Improvement 1

Ref: Regulation 5, 16 and 17

To be completed by:Action required by 25 April 2022

The Registered Provider must review the recruitment and staffing arrangements in respect of training and competency. There must be a robust induction period for all new staff. The service must follow safe recruitment processes. The required number of staff must be on duty at all times.

Response by registered provider:

We note the Jersey Care Commission acknowledges that recruitment and retention challenges across the sector remain prevalent. The Secure Children's Home has a clear intention of substantive recruitment of a skilled workforce as well as ensuring additional staffing is available as the occupancy and acuity of any young persons at the unit is managed.

The Commission is aware that we have recently undertaken a recruitment campaign that is ongoing at this time.

An expression of interest is also due to go out on 25th April to all residential homes across CYPES to provide further support to the Secure Children's Home. However, we are aware of concerns around risks and impact to other homes and so are working closely with Managers to ensure that any risks are mitigated.

As part of the Improvement Plan we are also in the process of reviewing the staffing model and profile of staff required for the unit. Our aim is to ensure staffing reflects both the secure and therapeutic functions at the unit.

We are also undertaking exit interviews with the most recent staff who have resigned in order to understand their reasons, and to inform our improvement strategies as part of our people and culture plan.

In terms of staffing we have ensured that staffing is matched to the requirement for support of young persons at all times, and staffing levels have been maintained aligned to the level of occupancy to the unit. We are in the process of further expanding our workforce to support in the event of higher levels of occupancy and dependency at the unit.

Safe recruitment and induction processes are in place in line with Government of Jersey policies.

This action is partly completed with ongoing requirements for monitoring.

Area for Improvement 2

Ref: Regulation 5

To be completed by: Action required by 25 April 2022

The Registered Provider must recruit a permanent manager to be registered. The Registered Manager must be given authority to manage the service.

Response by registered provider:

An experienced Manager has been identified and will be making an application for registration with the JCC. The Registered Manager has the full support of a dedicated Improvement Team and daily access to the Senior Leadership Team within CYPES. In addition, the Registered Manager will be supported through the weekly Operational Oversight and Improvement Group.

Area for Improvement 3

Ref: Standard 6.7

To be completed by: Action required by 4 April 2022

The Registered Provider to give notice to the club using the sports hall with not longer than three months to vacate the building.

Response by registered provider:

We can confirm that notice has been served and acknowledged. Sports Jersey is working with the club to identify alternative accommodation. The notice period is 3 months, but we anticipate the club will identify a suitable alternative by the end of May. Notice had already been provided by the end of March 2022.

This action is completed.

Area for Improvement 4

Ref: Regulation 3

To be completed by: Action required by 29 March 2022 The Registered Provider must provide an assurance that unregistered rooms will not be used and that young people will not be admitted to the home unless a registered room and appropriate staffing is available.

Response by registered provider:

No further admissions have taken place since the Improvement Notice has been issued. Any further requests for admission can only be considered into regulated rooms at the unit. There is only one room available (25th April 2022) that could accept an admission at the current time.

There is no intention to utilise unregulated capacity within the facility, but it should be noted this may increase the risk of off-island placement should there be the requirement for custodial pathway or pathways consistent with Secure Accommodation Orders.

This action is completed.

Area for Improvement 5

Ref: Regulation 20

To be completed by:Action required by 25 April 2022

The Registered Provider must review the Statement of Purpose and ensure that it reflects the service currently provided.

Response by registered provider:

A copy of the revised Statement of Purpose has been sent to the Commission, and this will remain under constant review. The newly appointed Director General for CYPES has commissioned a task and finish group to review the model of service at the Secure Children's Home, and specifically to focus on the 2 predominant pathways to the unit which have been in place for the past 2 years. These being a custodial pathway and a secure accommodation order pathway.

In terms of dedicated Child and Adolescent Mental Health support for the unit I can confirm that our Head of Service, Darren Bowring has provided a revised structure of support that is included in the revised Statement of Purpose. I can also confirm a meeting is taking place on 27th April to finalise these arrangements

Young persons currently accommodated at the unit have dedicated access to CAMHS support which includes a Consultant Psychiatrist who subsequently discusses the recommended care planning and interventions with staff.

This action is completed.

Area for Improvement 6

Ref: Standard 1

To be completed by: Action required by 25 April 2022

The Young Person's Guide must be reviewed to ensure it clearly sets out exactly what young people can expect in relation to the care they will receive.

Response by registered provider:

A young person's guide has been reviewed and further developed, and a copy has been submitted to the Commission. We consider this piece of work to be ongoing as the Improvement Plan continues at the unit, meaning that additional functions such as access to the gym, crafts and arts support and other therapeutic activities are increased. We are also engaging with the Office of the Children's Commissioner in the ongoing development of the guide.

The Children's Guide is in place and will have further development.

Area for Improvement 7

Ref: Standard 6, Regulation 18

To be completed by: Plan of action required by 25 April 2022

The Registered Provider must ensure that improvements are made to the care home environment to make it more homely. Repairs must be undertaken in a timely manner.

Response by registered provider:

This home is a secure unit and we acknowledge that physical improvements are required at the unit, whilst also ensuring the unit is able to operate in its intention to provide secure accommodation and custodial sentence. The unit therefore requires a high level of security consistent with other secure units, but, also further developments with therapeutic conditions.

The repairs and maintenance improvements to the premises remain ongoing. Through the direction of the Operational Oversight and Improvement Group

there is a dedicated capital plan being developed for longer term changes needed as well as a reactive plan in place for more immediate changes.

The medium to longer term scheduling of works has needed to change, as new considerations and practicalities about completion of specific tasks have arisen, but the improvement team at the home continue to drive this forward.

We are also seeking a service agreement with HMP Le Moye to provide secure maintenance services in addition to Jersey Property Holdings. Their specialist engineers have been to the unit and believe that this can be easily met. This will ensure that repairs are carried out rapidly and that the environment will be appropriately secure.

The practicalities of fitting the bedroom doors have meant that there is a potential of further delays to completion, possibly extending into months. In order to prevent this level of delay we are again undertaking assessment of the current facilities so that short term safety and assurance can be provided before the longer term fixtures coming into place.

Since the Improvement notice, some windows have been replaced and the remaining units are planned for completion within the next 3 weeks. Anti-ligature handles have also been fitted to external and corridor doors.

Locks have been replaced and further repairs are continuously being implemented according to the security requirements of the unit. Broken call panels have also been made safe whilst replacement units are sought from the hospital. This should be completed by the end of April.

Plans to finalise replacement furnishing requirements have been scheduled for 28th April.

The required works are not fully completed at this stage. Clear plans are, however, now developed to address the issues identified by the Jersey Care Commission. We are working with Jersey Property Holdings to progress the improvement plans at pace which is dependent on maintenance supply and resourcing.

Area for Improvement 8

Ref: Standard 11

To be completed by: Action required by 25 April 2022

There will be a robust education provision at this home, to include a variety of activities if the young person does not engage in education. Young people should be able to access education at any time in the school day with a curriculum which meets their needs.

Response by registered provider:

If a young person is registered at a school then it is the schools responsibility to send staff to the Secure Children's Home which is co-ordinated by our Inclusion team at CYPES. If a young person isn't registered with a school then the inclusion team will provide direct educational support which includes the allocation of a transitional worker.

Going forward we will introduce further transitional support for a period of up to 3 weeks prior to leaving this Secure Children's Home.

In terms of a future model, we are developing further plans for on and off site learning support.

We are also developing a new learning environment (classroom at the unit). We aim to have this in place by the new term period in September.

This action is complete and educational compliance is in place, but the further improvements outlined will be in completed by September 2022.

Area for Improvement 9

Ref: Standard 8

To be completed by:Action required by 25 April 2022

There will be policies and procedures in place to include medications, admissions and visiting. All staff will be clear as to policies to be followed and their role.

Response by registered provider:

Policies have been developed for medication administration, admissions and visiting. In addition the assessment area of the unit has now been refurbished.

This action is completed.

Area for Improvement 10

Ref: Standard

To be completed by:
Action required by 25 April

2022

The Registered Provider must review the training provided to all staff, in particular techniques for managing challenging behaviour and for supporting young people with mental health needs.

Response by registered provider:

In terms of staff training the most urgent focus is on induction and MAYBO training, and department plans have been shared with the Commission.

Training plans to support young people with mental health needs have been developed and will be rolled out.

This action is partly completed with ongoing requirements for monitoring.

Area for Improvement 11

Ref: Regulation 5

To be completed by: Action required by 25 April 2022

The Registered Provider must ensure a robust service from CAMHS, ensuring that all young people have a baseline assessment on admission. Following this assessment, appropriate support and care planning must involve CAMHS and staff must attend clinical supervision sessions. For any young person in this secure home for mental health reasons, CAMHS must be a significant part of the team around the child and any changes in care plan should be agreed with them. Staff should have appropriate training to support young people with mental health needs.

Response by registered provider:

Plans have been developed with the CAMHS team to agree a framework of support for the unit. CAMHS professionals will lead the care planning requirements and, we will ensure further engagement with specialist providers within the UK regarding any specialist management and care needs.

We will support staff to attend clinical supervision and have discussed its importance with the team. The management team at this Secure Children's Home have also met with the clinical psychologist to discuss this requirement, and to develop plans to support staff training and development.

It should be noted that CAMHS intervention and support will reflect the bespoke needs of the young person, and whilst a universal offer of baseline assessment and access to support is now in place, the care interventions will be determined by the care planning requirement.

This action is complete.

Area for Improvement 12

Ref: Standard 7, Regulation 17

To be completed by: Action required by 25 April 2022

The Registered Provider must ensure that all staff at this home receive regular supervision at a more frequent level than that required by the Standards, due to the complex nature of the work. Supervision should not be completed during time when young people are being supported, unless there is a significant increase in the number of staff on duty.

Response by registered provider:

Supervision plans for staff supporting both therapeutic and secure pathways are being developed as part of the workforce plan for the unit. For any health and care related requirements there are existing supervision policies in place.

This action is partially completed, but there is an ongoing requirement.