



Jersey Care  
Commission

# **INSPECTION REPORT**

**01 Children's Home**

**Care Home Service**

**2 and 9 December 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 has 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 three-bedroom detached bungalow and is registered to provide residential care for three children and young people. The home has a lounge, a dining room, conservatory and a kitchen. The home became registered with the Commission on 4 December 2019.

Registered Provider	Government of Jersey Children's Services Accountable Officer: Rob Sainsbury (Interim Director General Children, Young People, Education and Skills)
Registered Manager	Lucy Reynolds
Regulated Activity	A care home for children and young people's residential care
Mandatory conditions of registration	Maximum number: 3 Children (aged 12 to 18) Rooms 1 to 3, one person
Dates of Inspection	2 and 9 December 2021
Type of Inspection	Announced

Number of areas for improvement	Two
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At the time of this inspection, there were three young people accommodated in the home.

## **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 one area for improvement. This related to the storage of HR records and has been resolved.

The Provider appointed Lucy Reynolds as the Registered Manager in December 2021 with the home previously being managed by a registered manager who had oversight of two homes. The Registered Manager has significant experience of working in and managing UK children's homes and is keen to share this experience with the staff team. As she was new to post at the time of the inspection, Lucy was in the process of getting to know and becoming familiar with the various needs of the care receivers in the home, each of whom were able to confirm that they had started to form a positive relationship with her.

The staff team is well established and experienced. Several staff members were consulted during the inspection and visit and each confirmed that they felt positive about the appointment of a new manager with sole responsibility for the home.

There were two areas for improvement from this inspection. The first relates to there being sufficient staff numbers in the service to consistently meet the needs of the care receivers. At the time of the inspection, staff were needing to cover additional shifts and this is not sustainable in the long-term.

The second area for improvement relates to medicines management and competency. The Regulation Officer notes that there have been changes to the service's medicines policy. Clarity is required to ensure that, the correct recording processes are being followed; that medicines are stored appropriately, and that risk assessments are undertaken to determine whether any of the care receivers could safely self-administer medicines.

The Registered Manager advised that the home is leased from a private individual and that the lease will expire in March 2022. Clarity over the owners plans for the property is required as a matter of urgency to ensure stability and security for the care receivers. Should the lease be signed, the Registered Manager has ideas for improving the home environment which could benefit from some refurbishment. It is very positive to note the involvement by the care receivers in the decoration undertaken to date.

## **INSPECTION PROCESS**

This inspection was announced and undertaken over two days and concluded on 9 December 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. It is noted that the Registered Manager had recently come to post and consequently, a follow up visit was arranged on 9 December 2021 with both the Senior Shift Leader and the Registered Manager. One Regulation Officer undertook the inspection.

The primary purpose of this inspection was to follow up on the area for improvement identified during the inspection undertaken on 30 June 2020.

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

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<sup>1</sup> 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/>

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, information submitted to the Commission by the service since registration was reviewed. This included any notifications and any changes to the service's Statement of Purpose.

The Regulation Officer sought the views of the people who use the service and spoke with managerial and other staff. Two of the three residents were spoken with during the inspection. The views of the residents' social workers were also obtained as part of the inspection process.

During the inspection, records including policies, care records, incidents and complaints were examined.

At the conclusion of the inspection, the Regulation Officer 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 attached at the end of the report.

## **INSPECTION FINDINGS**

At the previous inspection, undertaken on 30 June 2020, one area for improvement was identified. This stated, 'All existing staff HR records from past appointments are transferred to and kept by the Registered Manager.' The Provider confirmed that the

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Registered Manager has access to all files held centrally in the Government of Jersey's the Human Resources Department. The Registered Manager confirmed this to be the case. Some records, which include training and supervision records, are maintained at the Home.

Lucy Reynolds started as the manager on the 2 December 2021 and is now the Registered Manager.

### **Safeguarding and safety**

Reference is made to Standard 8 which states 'you will feel safe'.
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During the inspection, two care receivers were consulted. Each confirmed that they felt 'safe' in the home, and that they are involved in the planning within the home. Each spoke positively about the new Registered Manager. The staff team spoke positively about the care receivers and expressed that they were keen to enhance their knowledge and skill base in order to support the care receivers. They discussed the notification of incidents reported to the Commission throughout the past year. There were 51 notifications in relation to missing episodes where care receivers cannot be contacted for a significant period of time. The staff team understood the process for reporting the care receivers as missing and accepted the advice from the Regulation Officer to elaborate on the information in the notification to include what they did to support the care receiver.

The Regulation Officer was unable to find clear evidence of return home interviews which should be undertaken with a care receiver within 24 hours of the missing report. The Registered Manager will undertake a review of this with both the staff team and the service which undertake the interviews.

The Commission also received five notifications in relation to incidents of care receivers self-harming. The Regulation Officer was able to see evidence of positive support being provided to care receivers from the home staff team in the case recordings. There were also four notifications in relation to care receivers being arrested. Recordings were clear and detailed in respect of these incidents and in the support provided to the care receivers.

The Commission was notified of one incident in relation to peer-to-peer bullying. It was evident that this incident had been handled appropriately by the staff team and the Registered Manager.

One theme of the inspection related to medicines management. The Regulation Officer noted that there was a secure storage cabinet including a safe for controlled medicines. Although there were no prescribed medicines in the home, there were a number of 'over the counter' medicines in the cabinet. The process for recording and dispensing of these medicines was unclear. The Registered Manager agreed to undertake an audit of medicine management in the home including a review of staff training and competency. This needs to accord to the Service's medicines policy. This is an area for improvement.

The home has a Statement of Purpose which sets out how the service will support the care receivers living there. The Registered Manager was in the process of reviewing this document and an updated Statement of Purpose will be provided to the Commission in due course.

The home has a Children and Young People's Guide which was discussed. The Registered Manager confirmed that she was in the process of revising this document with engagement with the current care receivers, and that this may culminate in a filmed version being produced.

**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."

The staff team is currently stable and includes a number of very experienced team members, some of whom have worked in the service for over 20 years. The staff team shared their recent experience of the home including the challenges of having a single manager overseeing two homes. They felt that this had been difficult at times, especially in relation to the provision of consistent supervision, training and

planning for the care receivers in the home. They are pleased with the appointment of a dedicated manager in the home.

It was apparent that the team members who were spoken with were passionate about the work they do in supporting care receivers.

The recently appointed Registered Manager has significant experience of working in and managing residential children's homes throughout the UK and has been keen to share this knowledge with the staff team. Care receivers were positive in their view of the new manager and confirmed that they have been involved in the design and decoration of the home.

The Registered Manager had already held a number of team meetings to share her thoughts and ideas relating to improvements in the home and of the care that they provide to care receivers. Team member supervision and appraisals are planned.

Children's Services have policies and procedures which set out the process for safe recruitment of their staff. The Registered Manager is familiar with these policies.

The Government of Jersey holds all staff recruitment details in a central location.

The Regulation Officer met with the People Hub (HR department), to examine Human Resource (HR) records for a number of staff at this home and was satisfied that they were compliant with safe recruitment policies which include an application form, DBS (Disclosure and Barring Service) certificates and references.

The Registered Manager maintains records of staff training and development, sickness absence and supervision. The Registered Manager received these records during a handover period with the previous manager. The training matrix seen by the Regulation Officer confirmed that mandatory training was in place. However, it is recognised that there have been challenges in the provision of face to face training as a result of Covid 19 requirements. The Registered Manager is reviewing the training needs for her staff team.

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. At the time of inspection, staff confirmed that they were able to maintain this level of staffing although they acknowledged that this was only

possible due to them covering extra shifts. The Provider needs to ensure sufficient staff are in place to meet the needs of the service across all of their homes. This is an area for improvement.

Staff members also indicated challenges in providing staff support for another home in the service and that this was having an adverse impact on the consistency of staffing in their home.

Staff induction includes 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 RQF level 3 in Health and Social care or equivalent or be in the process of obtaining such a qualification. Staff confirmed this to be the case.

The Statement of Purpose also states that 50% of staff on duty will hold a RQF (Regulated Qualification framework) Level 3 and it was confirmed that this is in place.

According to the Statement of Purpose, the staffing establishment consists of a Registered Manager, a senior shift leader, a shift leader, and twelve residential childcare officers. At the time of inspection there were two vacancies for residential childcare officers. The Provider needs to consider a recruitment plan.

## **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 which enables staff to have an immediate point of reference in relation to each of the care receivers. The Regulation Officer discussed with the staff team ways in which this information could be improved to provide information to

staff unfamiliar the home (such as bank staff covering shifts at short notice), to understand the needs of care receivers.

The care records include detailed assessments and care plans for the care receivers. It was evident that there is regular review of these plans with oversight from an independent reviewing officer.

It was noted that there had been an emergency admission to the home during the previous week. All emergency placements of young people should be reviewed within 72 hours of the placement occurring. The Registered Manager advised that they had had limited opportunity to fully consider the appropriateness of the placement or of the potential impact on the other care receivers. The Registered Manager is keen to introduce compatibility risk assessments (CRA) for potential care receivers before they move into the home. There was no evidence of a review of the placement having taken place.

The Regulation Officer spoke with one of the care receivers in the home. They confirmed that they were settled in the home and that they had no concerns about their placement. They were positive about the new manager and were engaged in decision making in the home. The care receiver described some challenges in relation to managing appointments and staff confirmed that the care receiver had 10 professionals working with them at the time of the inspection. The Registered Manager advised that they will explore this further with a view towards identifying a more manageable way for care receivers to receive professional support and input.

One of the social care professionals working with a care receiver advised that the home was always welcoming, that staff were keen to work with them and were open to finding creative ways to support the care receivers. A health care professional shared similar thoughts about the home, adding that they believed that the staff team were committed to care receivers, seeking external advice and support when necessary to support them.

The staff team speak positively about the care receivers that are currently living in the home. They also speak proudly in relation to a former resident who transitioned

to another home. They felt that the care plan for that care receiver had been effective with a positive outcome being achieved for them. They continued to offer outreach for a number of weeks to support the placement.

### **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 Care Commission has received reports from the Provider's Independent Person since the last inspection in June 2020. It is noted that due to Covid 19 restrictions a number of virtual visits were undertaken in the early part of 2021. The Registered Provider appointed a new Independent Person in June 2021 and physical visits were completed from July until December. Reports from these visits have been reviewed by a Regulation Officer. The last visit was on December 1<sup>st</sup>, 2021 and the Commission is awaiting this report. The reports are detailed and its positive to note that recommendations made are followed through in subsequent visits to ensure completion or progress.

The Registered Manager also completes monthly quality assurance reports for the Provider. Some of these are incomplete and this is due in part to the previous Registered Manager having oversight of two care homes. The recently appointed Registered Manager understands the importance of quality assurance reports and provided an assurance that these will be updated.

## 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.'

The property is a large, detached bungalow. The property has been leased from a private landlord for a number of years. Of concern is the lease which currently expires in April 2022. In order to achieve stability and appropriate planning for each of the care receivers, this needs a resolution as a matter of urgency.

The home is located within 200m of a beach. Externally there is a small, enclosed private garden which is laid to lawn. The home benefits from a large conservatory which accesses the enclosed garden. To the front to the property is a parking area. Externally the property is in a good state of repair although would benefit from some decoration should the lease be agreed.

On entering the property, it is evident that thought has been taken in the decoration and feel of the home, which is very welcoming. The Registered Manager explained that further updates to the décor will be completed in the near future. This will include both the carpets and decoration. The care receivers were actively involved in this process and prepared an interior design PowerPoint presentation to reflect their thoughts and hopes for the redecoration. The engagement of the care receivers in this process was positive and represents an area of good practice.

On entering the home, a large hallway to the left contains the bedrooms both for the care receivers and a staff sleep-in room. The sleep-in room also contains an office area with a lockable filing cabinet for the safe storage of sensitive information and files.

The house bathrooms are clean but would benefit from updating as the suites are currently dated, being painted/tiled in avocado and pink.

The lounge area is welcoming with comfortable sofas. A dining room separates the lounge from the kitchen. Care receivers confirmed that the dining room is well used both for meals and for general 'chat' at the end of the day.

The kitchen was clean and well presented. Input of care receiver choice was evident in menu planning. Care receivers are encouraged and supported in catering tasks. To the rear of the property is an area containing laundry facilities and care receivers confirmed that they are supported to do their own laundry.

The garage is generally used for storage with a number of shelving units, freezers and fridges in this area. The Regulation Officer was shown copies of cleaning schedules together with maintenance schedules for fire and emergency lighting equipment. Fire alarms tests need to be undertaken and recorded appropriately. This will include fire evacuation tests.

## IMPROVEMENT PLAN

There were 2 areas for improvement identified during this inspection. The table below is the registered provider's response to the inspection findings.

<p><b>Area for Improvement 1</b></p> <p>Regulation 17</p> <p>Standard 7</p> <p><b>To be completed by: February 2022</b></p>	<p>To appoint a staffing structure as per its Statement of Purpose 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><b>Response by registered provider:</b> A full time member of staff has now started and we have had another staff member move from another home, meaning we are fully staffed.</p>
<p><b>Area for Improvement 2</b></p> <p>Regulation</p> <p>Standard 8</p> <p><b>To be completed by: February 2022</b></p>	<p>To ensure that the service Policy for Medication management is shared with the staff team and is fully adhered to. To ensure that competency training assessments are reviewed and updated</p> <hr/> <p><b>Response by registered provider:</b> This is ongoing and I, the Registered Manager have met with the Children's Home Improvement Manager and the Learning and Development Manager to discuss training, policy and procedure and have suggested a trusted provider. Medication management is currently being improved by way of coaching and mentoring staff. This is an ongoing area for improvement across the residential service and a long term solution to training and competency is being worked on.</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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