



Jersey Care  
Commission

## **Summary Report**

**03 Children's Home**

**Care Home Service**

**21 July 2022**

## 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.

There are six areas for improvement identified at this inspection. Two areas for improvement identified at the last inspection regarding the need for an appropriate staffing structure, and the plan to reduce from three care receivers to two, have not been resolved.

Staffing is problematic at this home. This includes appropriate arrangements for the absence of the Registered Manager, which has had a detrimental impact on the leadership of the staff team. Staff who did not work permanently at his home are regularly being seconded from other homes and are not able to easily access information about the care plans of young people.

The Regulation Officer noted that, as with other Children's Service homes, staff take appropriate action when young people are missing. However, there remains a lack of robust multi-agency action and, at this home, there was evidence that this placed staff at risk of harm. This is an area for improvement.

There was evidence of improvements in outcomes for one young person living at this home, although the recent admission of two further children has had a negative impact on their emotional wellbeing.

There are safe recruitment processes in place. Staff reported an increase in training provision. Medications training remains an unmet need for staff at this home. This is an area for improvement.

Staff have not received appropriate training to support the emotional wellbeing of one young person. Specific mental health training is an area for improvement.

Two children had been admitted to this home despite the outcome of an impact assessment which raised concerns for the impact this could have on the permanent resident. Following these admissions, there had been increased concerns for the safety of both care receivers and staff.

The young person who has lived for a number of years at this home stated that their emotional wellbeing had been impacted by the arrival of new children. They did not feel that their own needs were being met. There was evidence that the higher level of needs of the children were having an impact on the emotional wellbeing of others.

## IMPROVEMENT PLAN

There were six 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><b>Ref:</b> Regulation 8 (1)</p> <p><b>To be completed by:</b> 30 September 2022</p>	<p>The Registered Provider must ensure that care receivers are protected against the risks of receiving inappropriate or unsafe care. Impact assessments must be completed and followed before any new care receiver is admitted to the service. The Service should review its occupancy levels as agreed at the last inspection. The Registered Person must inform the Commission of arrangements to be made to ensure that the needs of all three young people currently residing at the facility are consistently met.</p>
	<p><b>Response by registered provider:</b></p> <p>As highlighted within the report an impact risk assessment was completed prior to the admission of new care receivers. Additional risk assessments were completed that involved input from all care receivers and care staff.</p> <p>The home has changed its statement of purpose to reflect the placement of two young people, releasing the lounge/playroom for full use of the care receivers.</p> <p>Care staff attend meetings and visit a care receiver within a different home.</p>

<b>Area for Improvement 2</b>  <b>Ref:</b> Standard 2  <b>To be completed:</b> with immediate effect	Compatibility risk assessments to be completed prior to all admissions. Consideration to be given to identifying how the needs of all care receivers will be met following a new admission.
	<b>Response by registered provider:</b>  The impact risk assessment tool used prior to the admission of the new care receivers also highlighted the compatibility of all young people. A review of the tools used are underway as the service develops its referral pathway. Individual risk assessments are completed for all care receivers.

<b>Area for Improvement 3</b>  <b>Ref:</b> Standard  <b>To be completed by:</b> 30 September 2022	Bespoke mental health training should be arranged for staff at this home
	<b>Response by registered provider:</b>  The staff team receive weekly clinical supervision from Headsight psychotherapist where reflection and learning focus on the specific needs and presentation of the care receivers and how staff respond and meets their needs. Bespoke DBT training has been provided from CAMHS 15 <sup>th</sup> September to some staff members with further training planned in conjunction with Headsight psychotherapist 23 <sup>rd</sup> September. Mental Health training is being sought by our Learning and Development Officer and will be part of the training and development plan for all residential staff.

<p><b>Area for Improvement 4</b></p> <p><b>Ref:</b> Regulation 17 (4)</p> <p><b>To be completed by:</b> 30 September 2022</p>	<p>Appropriate numbers of skilled and qualified staff must be in place to consistently meet the needs of all care receivers. A plan must be in place for a suitable interim arrangement for the management and supervision of staff in the absence of the Registered Manager.</p> <hr/> <p><b>Response by registered provider:</b></p> <p>03 Children’s Home staffing has been increased by 4.5. This increases senior staff support to two (from one) and support workers to 11.5 (from 8). This aims to provide additional management support when both the manager and senior staff are not available. An agency residential manager has been appointed to this home, commenced 20<sup>th</sup> September. 6 staff hold a QCF Level 3 qualification (or equivalent) and two staff are currently completing the award, ensuring there are at least 50% of support workers on duty at any time have completed a minimum of Level 3 Diploma in Children’s Residential Care (or equivalent)</p>
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<p><b>Area for Improvement 5</b></p> <p><b>Ref:</b> Regulation 14 (3)</p> <p><b>To be completed by:</b> 30 September 2022</p>	<p>The medications policy has been reviewed and updated. The Provider must put in place a training programme to ensure that all staff are adequately trained and competent in the dispensing and/or management of medication.</p> <hr/> <p><b>Response by registered provider:</b></p> <p>All staff are required to attend Medication Awareness training accessed through Virtual College. All 03 children’s home staff are completing this.</p> <p>The Learning and Development Manager is sourcing additional Medication training as a stand alone unit obtained through Highlands College or the Vocational Training Centre.</p> <p>Annual competency checks will be completed by trained QCF Assessors. QCF Assessor training is underway in 2022 to increase assessor capacity. This includes 1 x senior staff at this home.</p>
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	The Medication Management and Policy and Procedure (2022) is under review with Registered Managers and CYPES Health and Safety Manager to ensure a consistent approach to medication training, care and support systems.
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<b>Area for Improvement 6</b>  <b>Ref:</b> Standard 8.4  <b>To be completed by:</b> 30 September 2022	There will be policy and procedures which are in line with multi-agency procedures to support children/young people who are absent or missing. The policy will be clear and be followed by all agencies.
	<b>Response by registered provider:</b>  There is a multi-agency procedure and missing from care policy in place. The SPB commissioned a review which will be considered as part of a multi-agency workshop. This was planned 19 <sup>th</sup> September 2022 however was rescheduled due to the passing of HRH.

The full report can be accessed from [here](#).