



**Jersey Care
Commission**

INSPECTION REPORT

Eden House

**Care Home Service
(Short Breaks Centre)**

**Le Cloches
St Clements
JE2 6NQ**

**29 September 2022 and
12 October 2022**

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 Eden House short breaks children's home. The service is situated in the parish of St Clement. There is a supermarket within walking distance. The home has two vehicles which are used to support care receivers with social activities and transportation to and from school. The location allows easy access to the main coastal road, bus services and local beaches. The service became registered with the Commission on 6 December 2019.

The self-contained flat is used for teenage care receivers, who are on a pathway to adulthood plan and is fully equipped to assess and help develop independence and daily living skills.

Eden House short breaks service allows care receivers to spend a period of time, including an overnight stay, away from home. During this time, the young person will be engaged in a variety of activities of their choosing, both within Eden House and within the local community. The support which is provided is based on a social work assessment of need that indicates the level of support required and the specific outcomes to be achieved.

All stays are planned with the care receiver and their families and are also inclusive of the wider support systems in place, such as school and social clubs.

The home currently provides a service for 12 care receivers. The staff team consists of nine full time residential childcare officers (RCCO), the Registered Manager and a part time cleaner. This service has one vacancy currently. Staff cover 24 hour shifts to provide continuity for care receivers, with shifts starting at 2pm. The service is also supported by a cleaner and the Registered Manager is present within the home five days per week.

This service currently operates six day per week, with the current age range of the care receivers being nine to seventeen years old.

Regulated Activity	Care Home
Conditions of Registration	Type of care: personal care, personal support Category of care: children and young people Maximum number of care receivers: three Maximum number in receipt of personal care / support: three Age range of care receivers: 0 - 18 Maximum number of care receivers that can be accommodated in the following rooms: bedrooms 1 and 2 - one person, flat - one person
Dates of Inspection	27 September 2022 and 12 October 2022
Times of Inspection	10am to 12pm and 6.15pm to 7.15pm
Type of Inspection	Announced
Number of areas for improvement	None
Number of care receivers accommodated on the day of the inspection	One

The Care Home is operated by the Government of Jersey and the registered manager is Chloe Burt.

Since the last inspection on 8 July 2021, the Commission has received an updated copy of this home's Statement of Purpose on 8 August 2022. This was to reflect changes in the staff team.

At the time of the last inspection a discretionary condition was in place for this home in regard to the Registered Manager's portfolio for her Level 5 Diploma in Leadership in Health and Social Care. The portfolio was going through a quality assurance process in order to award a qualification certificate. The Commission received the qualification certificate in March 2022, so removed the discretionary condition from this service's certificate of registration.

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.

The findings of this inspection were positive, with no areas for improvement found. There was evidence that care receivers were being provided with a service that is safe, takes their wishes and preferences into account and adopts communication models to suit the individual needs of the care receivers.

In regard to working in this home, the feedback from staff was very positive. They enjoyed their work supporting care receivers, felt supported by their manager in a very well run home.

The feedback from relatives of care receivers approached was positive, with many comments expressing genuine contentment and pleasure in regard to the care delivered to their loved ones.

There are always two staff on duty, which is in line with this home's Statement of Purpose. The Regulation Officer noted a strong staff team ethos of openness and learning in this home, which was led by a respected Registered Manager.

Upon reviewing recruitment records, some the staff in this home had been in the service for many years. This is balanced with three new staff joining the team earlier this year.

Staff induction processes in this home are robust. There is an induction booklet in place. Several were viewed by the Regulation Officer and were found to be appropriately signed off by the staff member and the Registered Manager when the task had been completed. New staff have a period where they are supernumerary to the two staff on duty. The Registered Manager shared that, on one occasion, where a new staff member had limited care experience, they were able to apply this measure for four weeks in order to ensure that they were competent and gained knowledge and expertise from more experienced colleagues. This was confirmed by the staff member concerned and is a good area of practice.

The Registered Manager reported that they could provide specialist short break care for up to 21 care receivers per week, however they currently provide care for 12 individuals. The home operates careful matching considerations to make the care experience the best as it can be, whilst considering the individual needs of care receivers. This is an area of good practice.

The Regulation Officer viewed the personal files of care receivers. The files were immaculately presented and contained all the necessary documents. There was evidence that important documents had been reviewed and that relatives had been consulted in relation to support plans and other care documentation and where necessary parents had signed the document.

The support plans for each care receiver were person centred, to a high standard and co-produced with care receivers, their families, the care receiver's social worker and other specialist professionals. This is an area of good practice.

All care receivers who access this service communicate in a variety of ways. There was visible evidence of the individual communication needs being met around this home, where communication boards/tools would be changed dependent on which care receiver was staying that night. This is an area of good practice.

The environment of the home was found to be clean and homely. Furniture is minimal due to the needs of the care receivers. All care receivers are given the opportunity to bring personal items to this home, including their own bedding and toys.

INSPECTION PROCESS

This inspection was announced and took place on 29 September 2022, with a follow up inspection visit on 12 October 2022, to observe care being delivered to a care receiver. Notice of the inspection visit was given to the Registered Manager one day before the visit and was carried out by one Regulation Officer. This was to ensure that the Registered Manager would be available during the visit as there was no guarantee that other staff would be in the home at the time of the inspection.

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

This inspection focussed on the following lines of enquiry:

- Safety of care receivers
- Training of staff (including, safe recruitment, induction, and supervision)
- Care and support of care receivers

Prior to the inspection visit, all of the information held by the Commission about this service was reviewed, including the previous inspection report, notifications, correspondence, independent visitor reports and the home's Statement of Purpose.

¹ The Children and Young People Residential Care Standards and all other Care Standards can be accessed on the Commission's website at <https://carecommission.ie/Standards/>

Only the Registered Manager was present in the home of the first day of inspection. Three other staff were spoken to as part of this inspection, with their comments and feedback contained in the body of this report.

Following the inspection, contact was made with three relatives to provide feedback on their experiences of the service provided, all three responded, and their feedback is contained in the body of this report.

One professional provided feedback of their views of the care delivered to children and young people in this home.

A review of safe recruitment practice was also carried out with the Government of Jersey Human Resources (HR) department on 14 October 2022.

During the inspection, records including policies, care records, training records, incidents and complaints were examined. This inspection also included a tour of the premises.

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.

INSPECTION FINDINGS

At the last inspection, there were no areas for improvement identified. Similarly, this inspection also found no areas for improvement. This home has policies and procedures in place that are adhered to by staff and the home is led by a Registered Manager who is driven to provide the best possible care to care receivers. The staff team are dedicated to their role, enjoy their work, and actively encourage individual and collective learning.

Training of staff (including safe recruitment, induction, and supervision)

The Standards outline that at all times there should be competent and skilled staff available. Staff should be provided with an adequate induction, relevant training, supervision, and development opportunities

The Regulation Officer was assured that safe recruitment practice had been followed for the three staff who had joined the team earlier this year. References and a criminal record check were in place before staff started their roles. The Regulation Officer also undertook a review of Disclosure and Barring Service (DBS) checks for all staff, as these need to be renewed every three years. All DBS checks were in place at the time of the inspection. This is an area of good practice.

There are adequate staff to cover the staffing requirements of this home. The majority of the staff have been at this home for many years, which provides for consistency for care receivers.

The Regulation Officer conducted enquiries into the induction procedure followed in this home. Staff files were accessed and found to be in good order, with their induction booklets easily accessible. Induction booklets were comprehensive and signed off by the staff member and Registered Manager when a task was completed satisfactorily.

One fairly new staff member spoken to as part of this inspection gave very positive feedback about their induction and made the following comments:

'I felt under no pressure in my induction period to provide support to care receivers and was given plenty of time to understand my role and get to know the care receivers well'.

'My induction into this home was totally different to my last employer, the staff team were so supportive, and I was supernumerary to staff numbers for an extended period'.

'With my last employer, I felt anxious and ill prepared before starting a shift, here it is the opposite, there is nothing to be worried about, with an approachable and friendly team'.

'I have been able to undertake lots of training as part of my probationary period, which has helped me build upon my limited experience of care work'.

The Registered Manager has recently developed a competency framework for all new starters, which will be used service wide. The framework sets out the expertise, knowledge and tasks staff will need to achieve in their probationary period. The competencies should ensure that care receivers are provided with good quality care consistently. The Commission welcomes this development.

The Registered Manager supplied a training matrix to the Regulation Officer as part of the inspection process. The training matrix evidenced that mandatory training had been provided to all staff and that staff had also undertaken training specific to the needs of the care receivers. Six of the ten staff members had completed their Regulated Qualification Framework (RQF) Level 3 Health and Social care, with two in progress and a further two staff to begin in 2023. The team in this home have undertaken a high level of training. This is an area of good practice.

As part of this inspection process, staff feedback was positive about the training they had received. This included both mandatory training, and training which is specific to the needs of the care receivers they provide care for.

The central staff supervision log was viewed by the Regulation Officer and found to be in good order, with regular supervision being given to staff. This is a good area of practice. The Registered Manager commented that there is a culture of openness and honesty with the staff team where issues can be discussed both formally and informally. The Registered Manager confirmed that she receives monthly supervision with her line manager. She reported that this is of good quality, that she feels listened to and supported and that her manager is readily accessible when needed. This was confirmed by the staff spoken to who made the following comments:

‘Supervision is really good, whilst it follows a process, it is relaxed, and we are able to reflect on our roles, but also other influences in our personal lives, sometimes supervision is over a cup of tea, or we go for walk’.

‘Supervision is relaxed where there is space to reflect together on how to improve care receivers’ experience in this home’.

Two senior staff provided feedback about supervision and shared, *‘We have a policy in this home where we swap supervision of staff every six months, which provides fresh oversight of staff and greater learning opportunities’.*

‘We also have a regular weekly team meeting where we select a couple of care receivers to review their care plans or discuss areas where care receivers had become distressed or refused to undertake activities. We have a strong learning culture in this home, where we reflect together as a staff team to find solutions and provide better care for our care receivers’.

In respect of the Registered Manager for this home, the staff spoken to as part of this inspection provided comment on their management style and the impact on the operation of this home:

‘She listens, is fair and understanding, gets things done and does what she has agreed to do’.

‘I respect her, she hands on and she has done the job’.

‘She is approachable, down to earth and knows what she’s doing’.

This home was also accredited in December 2019 by the National Autistic Society (NAS) as an organisation that is committed to understanding autism and setting the standard for autism practice. The NAS described this home as an ‘excellent’ service with ‘robust policies, procedures and training’ for staff with a ‘strong vision and leadership’. The Regulation Officer noted that they found nothing from this inspection to dispute these findings.

Care and support

The Standards outline that people in receipt of care and support should experience compassion, dignity, and respect. Care receivers, where appropriate should be involved in all decisions relating to their care and support in a way that respects their rights, individuality, and beliefs.

The home has an up to date Statement of Purpose. This home does not have a standardised Young Person's Guide, given the range of needs of the care receivers who access this service. Information about this home is tailored to the individual care receiver's communication needs as part of their transition plan to access this service. It may be visual with just pictures, for example the home, the staff team and their bedroom or have some limited descriptive words.

The Registered Manager shared with the Regulation Officer what a typical transition plan for a care receiver would look like, including methods of communication with care receivers about the home and its purpose.

The Registered Manager commented that it was critical to get transition planning right at an early stage with care receivers and would involve collaboration with the care receivers' relatives to ensure that the transition plan is successful. The Regulation Officer was satisfied that care receivers are provided with information about this home as part of their transition plan.

Staffing level in this home meets the Statement of Purpose, with all care receivers having at least a ratio of 1:1, with some care receivers with additional needs having a 2:1 ratio. One relative who provided feedback, reported that *'respite has only been cancelled once due to staffing shortage (re Covid)'*.

The communication needs of care receivers provides an additional challenge in this home. However, the Regulation Officer felt assured that the communication needs of care receivers were being met. Communication assessments were evident in care receivers' personal files and the use of individual tools was evident throughout the home. These tools, such as communication boards or iPads provided opportunity for care receivers to express choice or how they were feeling emotionally

using the 'zones of regulation' model. The majority of staff are also trained in Makaton, SPELL and NAS specific autism training, all of which are specific to the group of care receivers accessing this home.

As part of the second inspection visit on 12 October 2022, the Regulation Officer evidenced one of these communication aids in use, with a care receiver, around choice for their evening meal. One of the primary roles of this home is to enhance care receivers daily living and independence skills. Staff spoken to were able to evidence significant improvements in care receivers' skills in these areas.

The home environment is very clean and tidy, with furniture that suits the needs of the care receivers. Bedroom furniture is basic; however, this is designed to be so to reduce stimuli. Locks were noted on the bedroom furniture by the Regulation Officer; however, they were satisfied that the locks were only used for certain care receivers with additional risks.

The paint colours in this home have been specially selected in line with advice from the NAS, which helps reduce stress and anxiety of care receivers.

The care receivers' personal files were immaculately presented, were very user friendly and only included the latest documentation, with older documentation archived. The contents were well thought through and contained the following:

- Short Break Support plan
- Seizure plan (if necessary)
- Emergency contact details
- Accident and Emergency Passport
- Risk assessments
- Fire evacuation plan
- Sessional plan for activities in and outside of the home
- Communication assessment and passport

Some of the documentation had been co-produced with relatives and have been signed by relatives in terms of consent or agreeing with the content. This is a good area of practice.

The home also has a communication book that follows care receivers between this home and the care receivers' relatives. These were of high quality and included pictures of care receivers undertaking activities. The home keeps a second copy on site, just in case the primary book is lost or damaged. This is a good area of practice.

Sessional plans are completed for care receivers each time they stay at this home. These plans detail activities that are planned with the care receiver in and outside the home and take into account their individual needs, steps to take to mitigate risk and meet targets that have been set to develop daily living skills. During the second inspection visit on 12 October 2022, the Regulation Officer viewed a care receiver's sessional plan. This was clear and took into account preference, choice and risk assessment for any activities undertaken. This is a good area of practice.

Only one care receiver was present during the second inspection visit. The care receiver appeared content and expressed happiness with the care he was receiving through gestures and the use of limited sign language.

Staff members commented that one of their roles is to work with care receivers to build independence and self-care skills. Staff spoken to provided examples of care where they had been able to improve skills and competence in these areas for care receivers.

Three relatives provided feedback on the care and support their children receive at this home; a sample of their comments were:

'We are very pleased and impressed with the quality of care; the staff seem very capable and are kind and warm. The house is kept very clean and is well appointed.'

'I believe that they have learned to communicate with xx effectively and have taken on board our suggestions.'

'I personally have a great relationship with all the staff working at Eden house and find them all very easy to deal with to me they feel like part of our family, and I feel all staff care for xx as much as I do'.

'Xx is always so happy to go to Eden house and is very disappointed if for some reason they are unable to go so this speaks a lot for me and xx is flying out the door as soon as they arrive to collect them'

'We rarely have any issues but any we come across are dealt with immediately, so we are very happy'.

'The quality of care given is excellent. We have a great rapport and there is nothing I can't say to them'.

'Xx always displays delight when we tell them it's Friday and after school they go to Eden'.

'The manager and her team do a remarkable job and provide a wonderful service.'

'We trust them completely with xx's care. We have never been let down'

The professional who provided feedback as part of this inspection, supports six young people who access care in this home and shared the following comments:

'The staff at Eden are able to provide a good quality of care to all young people in their care. Eden staffing is tailored to each young person's needs, and each young person has a bespoke plan relevant to their individual needs'.

'The home manager and staff have developed a good working relationship with complex needs, and in my experience will flag up any issues immediately. They are also as flexible as possible and will endeavour to work with SW and families to facilitate any changes to routines'.

'Over two and a half years now, I have only received positive comments, regarding the staff, service and manager at Eden'.

‘During my contact with relatives, ‘whenever Eden is spoken about I receive a reaction of a big smile or a thumbs up. I have been told on one occasion by a young person, I am not allowed to book a visit on a Tuesday as this is Eden day and he does not want to miss it’.

‘In conclusion I feel that Eden is a well-run caring setting, which is run for the benefit of the young people attending. It is a valuable resource which is valued by young people, parents and professionals’.

Safeguarding and safety

Reference is made to Standard 8 which states ‘you will feel safe’. This means that service providers should have robust safeguarding policies and procedures in place which are kept under review. Staff working in the service should be familiar with the safeguarding arrangements and should make referrals to other agencies when appropriate.

Fire alarm checks are carried out on a daily basis. Fire drills are carried out on an annual basis; however, the latest drill was not carried on schedule. This was rectified during the inspection period. This home has an annual Health and Safety check, which is due in October 2022.

The Commission only received four notifications of incidents since the last inspection. Three were in relation to medical interventions and the fourth was in relation to the safeguarding of a care receiver.

Appropriate referrals were made to the Children and Families Hub, and the matter was investigated by Children’s Social Care and their multi-agency partners. The Registered Manager also reported that there has been learning outcomes from the other notifications.

Testament to the quality of care provided to care receivers is that no notifications of staff being assaulted by care receivers has been received by the Commission. The Registered Manager reported that the match of the care receivers was vitally

important in reducing stimuli in the home and this, alongside an experienced and well trained staff group, resulted in very person centred approaches, where incidents are de-escalated quickly.

Although the home has not had any significant notifiable events, the Registered Manager was able to verbalise the procedure should this happen. The Regulation Officer was satisfied that the home has an identified procedure for reporting health and safety matters within the organisation.

No complaints have been made by care receivers, relative or professionals since the last inspection in July 2021. The Regulation Officer contacted three relatives of care receivers, with two responding and the feedback is contained in the body of this report.

This home has a medication policy in place and staff have been trained in the dispensing and administration of prescribed and over the counter medications (including controlled medications). The Regulation Officer viewed the Medication Administration Records for several care receivers, these were found to be in good order with appropriate audit procedures in place weekly. The storage of the prescribed medication was good, with controlled medications stored separately. Each care receiver has a medication file, with their photograph on the front, details of the medications, a copy of the prescription, details of any known allergies and parental consent form. This is an area of good practice.

IMPROVEMENT PLAN

There were no areas for improvement identified during this inspection and an Improvement Plan has not been issued.

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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