

Summary Report

Secure Children's Home

Care Home Service

31 August, 5 September & 13 September 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.

At the time of the last inspection in March 2022 a total of twelve areas for improvement were noted, which resulted in an Improvement Notice being served to the Registered Provider.

The service has made improvements in eight of the twelve areas for improvement identified at the time of the last inspection. However, four areas for improvement remain and one new area for improvement was identified during this inspection, totalling five areas for improvement.

New staff have been recruited to the home, including senior shift leaders. A review of the staff rota evidenced that the number of staff on duty was commensurate with the home's Statement of Purpose. Safe recruitment processes had been followed and a new induction procedure had been trialled, with feedback from a staff member evidenced this had been successful. All staff had access to a training programme. This is no longer an area for improvement.

At the time of the last inspection in March 2022 an interim manager was in place. The need for a permanent Registered Manager was an area for improvement. An application was received by the Commission and a Registered Manager has been in place since 14 July 2022. This is no longer an area for improvement.

The home now benefits from the sole use of the sports hall. This is no longer an area for improvement.

The Registered Provider has ensured that no unregistered rooms have been used since the last inspection. This is no longer an area for improvement.

At the last inspection, the Statement of Purpose required review to reflect the service currently provided. This has been completed and is no longer an area for improvement. The Regulation Officers conducting the inspection were impressed to see that a child friendly version of the Statement of Purpose had been developed.

The Young Person's Guide required review at the last inspection to clearly set out what children and young people could expect, in relation to the care they receive. This has been completed and is no longer an area for improvement.

The home environment at the time of the last inspection required significant improvement and repair. Redecoration of some bedrooms has been completed, but some further work is still required. The Registered Provider has also been unable to progress the building works to improve the environment to make it more homely. This remains an area for improvement.

At the time of inspection, care receivers are accessing two other separate lounge areas on-site, which is currently meeting this need. However, if further care receivers are admitted, this may compromise this arrangement. It is imperative that the building works and refurbishment are completed as soon as possible.

The inspection was carried out before the new academic term had resumed in the on-site education provision; The education provision for care receivers was an area for improvement at the last inspection. The Regulation Officers were assured that throughout the summer break, relationships were maintained between the main tutor and one care receiver. However, for another care receiver no educational plans were in place when the new term started. This remains an area for improvement.

Policies and procedures in respect of medications, admissions and visiting were not in place at the time of the last inspection. This has now been rectified by the Registered Provider and is no longer an area for improvement.

Specific training in relation to managing challenging behaviour and supporting children and young person's mental health needs was an area for improvement at the time of the last inspection.

Training has been undertaken with new staff as part of their induction and refresher training has been completed by existing staff in managing challenging behaviour. Three staff have completed mental health training and several staff are completing or have completed additional training in applied therapeutic skills, with plans in place for the remaining staff to undertake this training over the next six months. Importantly, the staff team will be able to access trauma informed practice training in November 2022. This is no longer an area for improvement.

The Commission remain concerned that a recommended review of the de-escalation and physical intervention model has not been completed, which was an area of improvement. This remains an area for improvement.

At the time of the last inspection in March 2022, it was evident that there was no agreed framework whereby Child and Adolescent Mental Health Service (CAMHS) would be the lead agency in respect of supporting the mental health needs of the care receivers in the home. In addition, staff were not receiving the clinical supervision necessary to provide the care and support for children and young people with mental health and therapeutic needs. Only one care receiver had been admitted to the home since the last inspection. The Regulation Officer was provided with evidence that an assessment from the CAMHS, within 72 hours of admission had taken place. Staff had also been receiving weekly clinical supervision from CAMHS. Although there had been a break in this provision over the summer, it was intended for this to be ongoing. This was evidence of good practice.

The Registered Provider has developed this framework with CAMHS, and they are now leading in this area of care for the care receivers. This is no longer an area for improvement.

The supervision of staff was identified as an area for improvement at the time of the last inspection. There is evidence of improvement in this area, however the Regulation Officers were not satisfied that regular supervision had taken place for all staff over the summer period and the Registered Manager was unable to provide documentation to the Regulation Officers detailing supervision schedules for staff. This remains an area for improvement.

A decision was made by the Registered Manager at the end of July 2022, to largely separate the care needs of the two care receivers in the home. Three professionals who provided feedback for this inspection understood the reasoning for the separation of the care receivers in this home, however questioned if this decision remained in the best interests of these care receivers. Whilst the Commission understands the reasoning for this decision, a review of this arrangement has been requested in respect of the care receivers' rights.

At the time of the last inspection, it was evidenced that there was a lack of leadership and a chaotic culture had developed which resulted in concerns for the safety and wellbeing of children, young people and staff. The Regulation Officers evidenced that the changes made in respect of the leadership team have made a significant impact in respect of culture and how children and young people are cared for in the home.

New employees have joined the staff team, some with considerable experience and others with less experience, however the shift rota that has been adopted provides a blend of experienced staff to meet the needs of the care receivers.

The staff team currently stands at 15, with plans to expand this to 18, which will provide additional staff to help provide care support and continue development of the home.

The staff consulted provided positive feedback on the changes in the home over the last five months, especially regarding leadership, staff availability to cover shifts and ensuring structure to the care that is provided to care receivers. Staff had built positive relationship with the care receivers, which they felt had a positive impact on outcomes for the care receivers and improved staff morale/confidence.

The Regulation Officers were satisfied that there had been improvement in the number and quality of notification of incidents submitted to the Commission since the previous inspection. The quantity of notifications had also reduced, which in some way evidenced stability and care that is meeting the needs of the care receivers.

The home continues to offer care receivers access to support from an advocacy provider. The Commission is aware that a Human Rights Information and Advice Officer regularly visits the home to ensure that care receivers are listened to, their rights are respected and acted upon by those who care for them. These are areas of good practice.

The Regulation Officers identified that the transition plan for one care receiver was not adequate in terms of on-going contact with his substantive home in the community. Without a well thought through transition plan, the transition outcome is likely to be compromised and could lead to instability in the care receiver's home. This is an area for improvement.

Overall, the Regulation Officers were impressed by the Registered Provider's and Registered Manager response to the last inspection and how they had addressed eight of the twelve areas for improvement. The improvement journey has required significant investment of time and dedication to this task and the Commission would like to acknowledge the endeavour of the Registered Manager and his staff team in this regard.

IMPROVEMENT PLAN

At the time of the last inspection in March 2022 a total of twelve areas for improvement were noted, which resulted in an Improvement Notice being served to the Registered Provider.

The service has made improvements in eight of the twelve areas for improvement identified at the time of the last inspection. However, four areas for improvement remain and one new area for improvement was identified during this inspection: totalling five areas for improvement. The table below is the registered provider's response to the inspection findings.

Area for Improvement 1	The Registered Provider must ensure that
	improvements are made to the care home
Ref: Regulation 18,	environment (to include the internal Courtyard and
Standard 6	visitor's room) to make it more homely. A timeline for
	the repairs and refurbishment must be provided.
To be completed by: Plan	
of action required by 31	Response by registered provider:
December 2022	Response by registered provider.
December 2022	
	Extensive refurbishment, repairs and upgrades have
	been made throughout the home in 2022.
	Registered bedrooms have been redecorated and
	new bedding has been purchased. The Visitor's
	Room has been fully refurbished and this is now a
	comfortable and welcoming space for young people
	to meet with their relatives and any other significant
	people.
	The Admissions/Welcome Room has also been
	refurbished and redecorated. The space is now
	bright, comfortable and fit for purpose.
	Damaged windows have been replaced throughout
	the property improving the appearance of the
	courtyard considerably. The football area, which is
	well used by the young people, has been cleaned
	and the lines renewed. Plans are in place to further
	upgrade the outside spaces with the addition of an
	outside eating area and new plants.
	New living and dining room furniture has been
	purchased and will be in place once the upgrade of
	purchased and will be in place once the upgrade of

the lounge and dining room has been completed. This is scheduled for the end of October, once the architect plans are revised and the builders are able to gain access to the required areas. These plans are shared with the Jersey Care Commission, and it is hoped all planned works can be completed within the calendar year.
(It should further be noted that classrooms were refurbished and redecorated in time for the September term).

Area for Improvement 2	There will be a robust education provision at this home, to include a variety of activities if the care
Ref: Regulation 28, Standard 11	receiver does not engage in education. Care receivers should be able to access education at any time in the school day with a curriculum which meets
To be completed by: Immediate action required	their needs.
	Response by registered provider:
	The education for children at Greenfields is provided by their usual school and teachers attend the site, providing lessons in the on-site classrooms.
	Those children who are not in school have their education needs met via the Virtual Head and through Intensive Support Services.
	At the time of the report, there were two children at the home. One received a full timetable and had done so for a number of months. The other young person was to be educated by the same teachers but both children could not be taught together due to behavioural issues.
	There was a shortage of teachers at this time and the only education offer available was prior to the school day starting for the student on a full-time curriculum. As a result, one child had a severely reduced timetable.
	Until staff are onboarded in January 2023, it is unlikely that any increased offer could be made via the Virtual School. In response to the requirement, the Head of Education, clarified the service proposal going forwards: "For any future young people joining Greenfields, Victoria Bisson (Virtual Head) must be

informed, and an education plan will then be put in place with immediate effect taking into account where the young person is currently on roll at (up to the age of 16) and their needs."
This will be incorporated into Greenfield's Statement of Purpose.
During school holidays, teachers have continued to support outdoor activities with Greenfield's staff, maintaining relationships and providing continuity for our residents.
Young people are offered a variety of planned and unplanned activities when not in education by the home staff. On site, these include a variety of sports in the hall which is now fully available, crafts, games, and cooking.
All outside activities are dependent upon the young person's admission status and permissions. We aim to take children outside accessing sports and activities that are healthy and fun alongside or in the absence of an education provision. Staff work closely with the teachers and support many activities as part of the curriculum.

Area for Improvement 3 Ref: Regulation 16 and 17, Standard 7.11	The Registered Provider must review and formulate a plan relating to the de-escalation and physical intervention model, to include the training provided to all staff in respect of managing challenging behaviour.
To be completed by:	
Action required by 31 December 2022	Response by registered provider:
	In order to review the de-escalation and physical intervention model, a number of enquiries have been made of model providers and secure home providers in the UK and it is proposed that the service will explore alternative Prevention and Management of Violence and Aggression (PMVA) models over the next 6 months.
	During this time, the staff at Greenfields will receive further training in additional MAYBO holds to enable staff to better manage more extreme behaviours. In addition, weekly embedding sessions are planned using scenarios and reflective practice.

In 2022, all staff in Greenfields have received MAYBO training. A new induction was also introduced which meant that all new starters received MAYBO training prior to starting work in the home. Identified staff have received training in debriefing and are booked to attend 'Train the Trainer' sessions to renew skills and to deliver ongoing training to staff. Any trainers will be expected to refresh their skills quarterly by linking in with on island MAYBO providers. The PMVA policy for the services has been redrafted incorporating trauma informed behaviour
management strategies and is awaiting ratification.

 Area for Improvement 4 Ref: Standard 7.14, Regulation 17 To be completed by: immediate action required 	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 care receivers are being supported, unless there is a significant increase in the number of staff on duty.
	Response by registered provider:
	Considerable work has been undertaken to ensure that all staff within the home receive comprehensive supervision each month. Each staff member has an assigned supervisor and has signed a supervision contract which outlines the expectations for both parties to undertake purposeful supervision. In addition, the supervision template and structure has been revised to make it more relevant and consistent with the requirements of work in a secure home. Each supervision date is recorded monthly and then the data centralised to a calendar year view to ensure supervision is facilitated as required each month.
	It is acknowledged that supervision was difficult to
	conduct in the summer period when there was considerable amounts of annual leave taken by the staff team and a number of new colleagues that joined the home. However, all staff received

supervision in September an moving forward.	d will continue to do so
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Area for Improvement 5	The Registered Provider must ensure that the
	transition plans for care receivers are co-produced
Ref: Regulation 8, 9	with their substantive care givers in the community to
Standard 13	ensure that relationships are re-established and
	strengthened to improve outcomes for care receivers.
To be completed by:	Response by registered provider:
Immediate action required	·····
inimodiate detter required	The Greenfields team continue to work
	collaboratively with Social Work colleagues and
	(where appropriate) other children's homes to ensure
	robust transition plans are in place for young people
	when returning to the community.
	These plane are outlined over a number of weeks
	These plans are outlined over a number of weeks
	and should reflect a phased and progressive return to
	the community for a young person. These plans
	should be reviewed regularly and alongside the
	young people in question.
	Depart plane have been imported by staffing deficit
	Recent plans have been impacted by staffing deficit
	in the substantive home of the young people
	returning and so staff from the Greenfields team have
	helped provide some initial support for these young
	people when transitioning back.
	This has belond maintain continuity and consistency
	This has helped maintain continuity and consistency
	for the young people and ensured they have
	individuals with strongly established relationships that
	are supporting them.
	Moving forward, young people should be placed
	within the home alongside an 'exit plan' for them,
	5 1 ,
	which will outline what is hoped to be achieved whilst
	the young person is residing at Greenfields and how
	the transition back to the community is to be
	facilitated.

The full report can be accessed from <u>here.</u>