



**Jersey Care
Commission**

INSPECTION REPORT

Oakwell

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

**Park Estate, Rue Des Genets
St. Brelade JE3 8EQ**

18 and 25 October 2022

THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014, all services carrying out any regulated activity 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 Oakwell Short Breaks Centre which is a Children's Home. Oakwell is a five-bedroom bungalow in a quiet estate in St Brelade. It was extensively refurbished in 2014, which included improving access to all areas of the property by the care receivers. The home has a fully equipped interactive sensory room, a hydrotherapy pool, and interactive communication systems for children.

There is a large open plan lounge/diner/kitchen, with direct access to the bedrooms and to the large well maintained garden. There is equipment available to support children with their mobility requirements such as tracking hoist systems, wet rooms and height adjustable baths, and wheelchair accessible vehicles.

One of the bedrooms is a staff sleep-in room, which is next to the office, away from care receivers main living area and bedrooms.

Short breaks are for children and young people with disabilities. They provide an opportunity for them to spend time away from their primary carers. Children and young people can take part in a range of fun activities. Short breaks can enable children and young people to develop their independence, emotional resilience, and confidence.

Short Breaks also help parents and carers to have a break from their caring responsibilities. Short breaks can be overnight but are also available for shorter periods of three hours.

The home became registered with the Commission on 4 December 2019.

Registered Provider	Government of Jersey Children's Services Accountable Officer: Robert Sainsbury (Interim Director General Children, Young People, Education and Skills).
Registered Manager	Julie Osborne
Regulated Activity	A care home for children and young people's residential care (short breaks).
Mandatory conditions of registration	Type of care: nursing care, personal care, and personal support. Category of Care: Children and Young People (0 to 18) Maximum number of care receivers at any one time: 5 Age range of care receivers: 0-18 years Maximum number of care receivers that can be accommodated in the following rooms: Rooms 1-5. One person in each room.
Discretionary conditions	None
Dates of Inspection	18 and 25 October 2022
Times of Inspection	10am to 2pm & 10am to 11.15am
Type of Inspection	Announced
Number of areas for improvement	None

The Care Home is operated by Government of Jersey Children's Social Care Service and the registered manager is Julie Osborne.

At the time of this inspection, there were 12 children and young people receiving care from the service, with accepted referrals for a further three children and young people to access this service over the next few months.

Since the last inspection on 2 and 3 November 2021, the Commission received a revised Statement of Purpose on the 14 April and 18 October 2022. This was to reflect the qualifications of staff and a change of hours of a registered nurse.

A discretionary condition for the Registered Manager to complete a Level 5 Diploma in Leadership and Management in Health and Social Care remained in place at the time of the last inspection. The Registered Manager had completed the Diploma, however had not been awarded certification at that time. The Commission received a copy of the qualification certificate on the 14 March 2022 and duly issued a revised certificate of registration, removing this discretionary condition on 28 March 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 were no areas of improvement identified during this inspection, with the Regulation Officers being assured that care receivers accessing this service are safeguarded and provided with a high standard of care by a dedicated staff team, in an environment that is well planned and child friendly.

Upon entering Oakwell, there is a spacious open plan living area, with designated play areas for care receivers alongside a kitchen, dining table, three computer desks and a couple of sofas. The living space is decorated to a high standard, with children and young people in mind.

There are five themed bedrooms, which offers choice to care receivers accessing this home. Care receivers also benefit from access to a sensory room, a hydrotherapy pool and two bathrooms specifically designed for children and young people with physical and sensory needs. In summary, the Regulation Officers found the environment at Oakwell to be impressive and somewhere that children and young would enjoy attending and would meet their additional needs.

The staff team has been stable since the last inspection in November 2021, with no new staff joining the team. The staff spoken to as part of this inspection reported high levels of job satisfaction and spoke with fondness and warmth for care receivers who access this service. This Registered Manager for this home is well respected by her staff team, who appear a close-knit team where professional challenge is standard, and they work to a common goal.

This home operates careful matching procedures for all care receivers accessing this service, which significantly reduces negative stimuli for care receivers and improves their care experience. Consequently, this home has had no incidents of concern that require notification to the Commission. This is a good area of practice.

The personal care files of care receivers were of an excellent standard. They contained high quality documentation about the care receivers in respect of their overall needs and how care would be delivered to them for optimal outcomes. The Regulation Officers evidenced a strong focus on communication, medical and sensory needs, given the cohort of care receivers that access this service. There was also evidence of regular reviews of these care plans. This is a good area of practice.

The Registered Manager reported a strong emphasis on working closely with parents and relatives of care receivers and could evidence how care receiver care plans are co-produced with relatives and signed by them to agree the care delivered to children and young people. Feedback from the two relatives of care receivers was positive and they confirmed a close working relationship with both the staff and Registered Manager.

The Registered Manager for this home ensured that all the necessary training, health and safety and building maintenance was in place for this service to run smoothly, safely, and effectively. Health and Safety files were easily accessible for staff and where necessary staff sign off was evident for certain procedures.

The supervision files of staff were completed to a high standard and there was evidence of supervision being given to staff every month. Feedback from staff spoken with as part of this inspection described supervision as a positive experience that they valued.

It was evident that the medications policy in the home was being adhered to. All staff had been trained in administration and dispensing of medication, including the completion of competency assessments that were reviewed on an annual basis. There was clear evidence of weekly audits and stock check of medications undertaken by the Registered Nurses employed in this home. This is a good area of practice.

Two care receivers were spoken to as part of this inspection. They provided positive feedback of the care they receive and how much they enjoy accessing the service Oakwell offers.

INSPECTION PROCESS

This inspection was announced and was completed on 18 October 2022, with a follow up visit on the 25 October 2022 to observe care being delivered to two care receivers and to seek their feedback on the care they receive at this home.

Notice of the inspection visit was given to the Registered Manager one day before the visit and was carried out by two Regulation Officers. 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 Care Home Standards were referenced throughout the inspection.¹

This inspection focussed on the following lines of enquiry:

- **Safety**
- **Care and support**
- **Training**

Prior to our 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, variation applications and this service's Statement of Purpose.

The Regulation Officers sought the views of the following to triangulate feedback on the delivery of care to children and young people accessing this service:

- Two care receivers.
- Two relatives of care receivers.
- Seven staff, one of whom was a registered nurse.
- Five professionals who have contact with this service.

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

At the conclusion of the inspection, the Regulation Officers 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 improvement plan is attached at the end of the report.

¹ The Care Home and all other Care Standards can be accessed on the Commission's website at <https://carecommission.je/Standards/>

INSPECTION FINDINGS

At the last inspection in November 2021, no areas for improvement were identified that required any follow up on this visit. This inspection evidenced a well-run home, led by a respected Registered Manager and a dedicated and motivated staff team. No areas for improvement were identified during this inspection.

Safety

The Standards outline the Provider's responsibility to ensure that people will feel safe and are kept safe. Care receivers will have the right to live safely and free from harm.

Only one notifiable event was reported to the Commission since the last inspection in November 2021, and this was not a safeguarding concern. Upon enquiry with the Registered Manager regarding the safeguarding of care receivers, they made the following observations:

- careful matching of the care receivers is undertaken to reduce stimuli for the care receivers.
- the ratio of trained and experienced staff meets the needs of all the care receivers.
- short break support plans are of high quality, with a strong emphasis on the communication needs of the care receivers and knowing them very well.
- many of the children and young people who access the service have been attending for many years.

Children and Young People who access this Service are safeguarded and well cared for.

Health and Safety policies and procedures were based on best practice, were up to date and were stored in an accessible format for staff. Where necessary staff sign-off for particular policies was noted by the Regulation Officers. This is an area of good practice.

The Registered Manager had also improved her knowledge and record keeping of the building inspection and maintenance schedules since the last inspection, which ensures that the building is safe for care receivers and staff and that equipment was regularly serviced and checked.

No new members of staff have joined the staff team since the last inspection in November 2021, however the Regulation Officers were able to evidence that criminal record checks (Disclosure and Barring Service) were all up to date, as these checks need to be updated every three years.

This home has a regularly reviewed medications policy in place. The medications were stored appropriately, with each care receiver having their own medication file and care plan. The Regulation Officers undertook an audit of care receivers' medication files and evidenced compliance with the policy. There was also evidence of regular weekly internal audits, which were undertaken by the registered nurses on the staff team to check medication given to care receivers had been signed off appropriately. Stock checks of prescribed medications were completed by the registered nurses, which is a good and safe area of practice.

All staff undertake a level 3 course in the safe handling of medication through the Qualifications and Credit Framework (QCF), which is assessed by a registered nurse and verified through the hospital education centre. There is a policy in place for competency sign-off, which is completed by the registered nurses and reviewed annually. Staff without the QCF qualification are not allowed to administer medication. This is an area of good practice.

Many of the care receivers require specialist support in relation to how they are fed and cared for. Staff are given training by the registered nurses on site to ensure they are competent in providing delegated nursing care tasks.

The Regulation Officers noted that the vast majority of care receivers had been prescribed paracetamol, with parental authority. The prescription for paracetamol is written up on the Medication Administration Record (MAR), however, this was not noted on their medication care plans. The Registered Manager commented that paracetamol is a PRN medication (meaning administration of medication that is not scheduled), however accepted that it would be prudent to add this to medication care plans, to include protocols about contacting parents and relatives if paracetamol was to be administered.

A recent fire safety risk assessment was undertaken by the States of Jersey Fire Service. The recommendations from this assessment have been adopted and completed. The Regulation Officers evidenced regular fire drills, fire training, equipment maintenance checks and regular weekly fire safety audit checks.

All staff undertake training commensurate with their role in relation to Health and Safety. In particular for the cohort accessing this home is moving and handling, infection control and first aid (to include cardiopulmonary resuscitation - CPR).

Bespoke manual handling training takes place annually, with a requirement that all staff complete this. This home uses tracking hoists in all the bedrooms and bathrooms, as well as a back-up freestanding unit. There is a sign-off procedure regarding competency to use hoisting equipment as part of the staff induction process, with this being reviewed on an annual basis. The Regulation Officers noted that a tag on all hoisting equipment detailed when the apparatus was last serviced and when this was due for review. The Registered Manager stated that she also undertakes a monthly visual check of the hoisting equipment.

Care and support

<p>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.</p>

This home's Statement of Purpose was updated and sent to the Commission on the day of the initial inspection. This was due to changes on the in working hours of one of the nursing staff.

The Children and Young Person's Guide was viewed by the Regulation Officers. This was in a basic informative format, however in discussion with the Registered Manager the Regulation Officers understood that care receivers who access this service have their own individual communication needs, so providing them with information about the Service had to be delivered in their communication style. The Registered Manager reported that the Guide is adapted accordingly and is co-produced with the help of parents, the care receiver's school and the Speech and Language Therapy team.

Staffing levels are adequate to meet the needs of care receivers, with assessments informing the staffing ratio that care receivers require. Where staffing levels fall below what is deemed adequate and safe, for example due to staff illness, the Registered Manager will make the decision to cancel short breaks. However, this seldom happens as the staff team will fill shifts when necessary to provide continuity for care receivers and their families.

Feedback from parents/carers and professionals was that when there is staff illness, this sometimes results in short breaks being cancelled. However, this does not happen often. One parent/carer also commented that *'as they are allocated a Monday for their child's short break, they miss out as the home closes on bank holidays'*. The Regulation Officer discussed this issue with the Registered Manager and was satisfied that consideration was given to offering care receivers an alternative night when they became available.

Feedback from a professional about the staff team at this home was that staff *'are very committed, caring and knowledgeable and each child is treated according to their individual needs, and they have choices around activities and participation'*. Another professional commented, *'the team at Oakwell are a hugely dedicated group of people who strive to provide the highest quality of care for the young people who access this provision'*.

At the time of this inspection, the home had accepted three new referrals. The Registered Manager reported that preparation and planning were essential in the development of an individualised transition plan for children and young people to access short breaks at Oakwell. The Regulation Officers were assured that the transition planning process had clear and concise objectives and that the plan was co-produced with parents, relatives and professionals involved to promote a smooth transition.

Care receivers' personal care files were viewed by the Regulation Officers. These were deemed to be of a high standard and were easily accessible by staff. The files only included the latest documentation, with older documentation archived. The contents of the personal care files contained the following:

- Short Break Support plan
- Behaviour 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

There was evidence of regular review of the documentation, most of which had been co-produced with parents/relatives and other key professionals, such as Speech and Language therapy and Physiotherapists.

Feedback from a professional reported that *'parents also feedback to us very positively and there is very good communication between the house manager and ourselves'*.

Care plans were also signed by parents/relatives to agree consent for care plans to be delivered by staff. Parents/carers confirmed that they are consulted regarding

their child's individual care plans and agree with the care provided. One parent/carer commented, *'that they are really on top of the paperwork at the home'*. This is a good area of practice.

Communication with parents and relatives of care receivers accessing this service is important to how this home operates. To aid information sharing between Oakwell and the care receivers' home, a communication book is in place to facilitate the sharing of important information, such as accounts of what activities care receivers have undertaken, with the parents/carers also providing feedback on anything important that Oakwell staff should know.

One parent/carer commented that *'the registered manager or their child's keyworkers will text, email or call when they need to feedback about their child'*. Another parent/carer remarked that they *'would like to know which staff are on duty so they can prepare their child for the short break and also have a point of contact'*.

The Regulation Officer has advised the Registered Manager to consider introducing this idea, as children and young people will be better prepared and know who will be supporting them on their short break.

The Registered Manager completes an annual satisfaction survey with parents and relatives of care receivers to seek feedback on the service and how the service could improve, however responses have been limited. The Registered Manager is considering the possibility of introducing a coffee morning for parents and relatives as a way of seeking service feedback. This is a good area of practice.

Staff prepare sessional plans 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 consider their individual needs, alongside risk assessment to mitigate any potential harm to care receivers. A professional who has regular contact with this home commented, *'the children are happy accessing this service and have been reported to be stimulated on returning home and the feedback from parents is very positive and they are happy with the quality of care provided to their children'*.

On the 25 October 2022, a Regulation Officer engaged with two care receivers to seek their views of the care they receive at Oakwell. Both care receivers were positive about the care they receive, with staff able to communicate with them with ease and at their pace. The care receivers appeared very content and relaxed with staff and the Regulation Officer observed genuine warmth towards the care receivers from staff, alongside a happy and fun atmosphere.

During the delivery of care observation, the Regulation Officer evidenced staff providing care receivers with choice and seeking their views about the morning activity. Staff were also observed to allow care receivers a level of independence and only provide support when necessary or where care receivers invited them to do so. Staff clearly respected care receivers' rights to autonomy and dignity, whilst balancing the care receivers' additional needs.

The Registered Manager reflected that the key to delivering high quality care is understanding the individual communication needs of each care receiver and ensuring their voice is heard, alongside the wishes of the parents and relatives. During the initial inspection visit, staff demonstrated to the Regulation Officers several individual communication aids of care receivers who access Oakwell and how these were used to provide care receivers with choice and a voice.

Alongside care receivers' individual communication aids, this home has a range of specialised play/communication equipment, such as 'Eyegaze', which is controlled by eye movement. This equipment not only provides care receivers with play and entertainment opportunities, but also has the potential to develop other communication styles for care receivers.

The Regulation Officers had confidence that care receivers accessing this service were given opportunities for their wishes and feeling to be heard and that staff actively listened to care receivers.

Professionals who have regular contact with the staff and Registered Manger provided the following feedback:

'One care receiver has indicated they really enjoy her sessions'.

'The team at Oakwell work hard to develop their knowledge and understanding of a variety of needs so that they are able to deliver high quality of care'.

'The young people we see in school enjoy their time at Oakwell. They come into school happy, well presented and well prepared for school. The young people are also happy to know that they are going to Oakwell after school and are always pleased to see the staff! To me, this speaks volumes!'.

'Over the last few years, we have worked closely when we have needed to in order to ensure consistency for our young people as well as sharing knowledge, understanding and good practice'.

In summary, the feedback provided to the Regulation Officers by care receivers, their parents or relatives and professionals has been positive about the care delivered to children and young people who access this service.

Training

<p>The Standards outline that at all times there should be competent and skilled staff available. Staff should be provided with a range of relevant training and development opportunities.</p>

The home operates a robust and thorough induction policy. Staff personnel files were viewed by the Regulation Officers, which evidenced that induction and competency checklists were completed and signed off. Although, no new staff had joined the team since the last inspection, the Regulation Officers did engage with the newest member of the staff team who joined the service in August 2021. The staff member described their induction as 'excellent' and that they *'did not feel pushed to undertake care where they had not gained experience or were confident in delivering'*. The staff member also described their team as a *'friendly helping team, who were always open to providing advice'*.

The staff personnel files were completed to a high standard, which included evidence that monthly supervision had taken place and copies of all the mandatory and supplementary training certificates that the staff member had undertaken. The Registered Manager also holds a central training matrix, which is regularly updated and identifies when refresher training is required for staff. This is an area of good practice.

Oakwell provides additional training to staff, such as using visual aids, Positive Behaviour Support (levels 1 and 2), children rights (with an emphasis on disability rights and law) and Makaton training. Oakwell also collaborates closely with colleagues in another residential home, who specialise in delivering care to children and young people with Autism, sharing knowledge, skills and training across both homes.

As Oakwell is a Governmental service, staff are subject to appraisal and continued professional development (CPD) through 'My Conversation, My Goals', which identifies objectives for staff to meet and how their development will be enhanced. CPD is also a key part of formal monthly supervision, where staff can identify their own training and development needs.

Staff feedback regarding formal monthly Supervision was positive and that they valued this opportunity. Staff reported that there is a staff meeting every week, where any issues are discussed openly to find solutions and often care plans are reviewed to check they are current and reflect the changing needs of care receivers. This is a good area of 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.



Jersey Care Commission
1st Floor, Capital House
8 Church Street
Jersey JE2 3NN

Tel: 01534 445801
Website: www.carecommission.je
Enquiries: enquiries@carecommission.je