



**Jersey Care
Commission**

Summary REPORT

02 Children's Home

Care Home Service

**25 August and
2 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.

Following the last inspection in July 2021 there were two areas of improvement. The service has made improvements in both of these areas, however this inspection highlighted six areas for improvement, these are detailed below:

There was no Registered Manager present in the home at the time of initial inspection on 25 August 2022 and senior staff members had also not been present due to various reasons, leaving only junior grades of staff on shift.

A Registered Manager from another home had been providing daily oversight of the home, however during the inspection period they left the service. Both senior members of staff returned to work during the inspection period after some leave.

The oversight provided by another Registered Manager was not adequate and has left the home without appropriate leadership. This is an area for improvement.

At the time of the second inspection visit, a major care planning decision was being made for one of the care receivers. Upon enquiry with staff, including a senior staff member they felt unsupported by management and did not have contingency plans in place for the potential outcomes of the care planning decision. This further evidenced the need for a Registered Manager in this home to lead on such matters.

Staff spoke of feeling listened to by their immediate line management. However, this did not translate into positive change and left staff feeling frustrated. It is imperative that a Registered Manager is secured as soon as possible to enable the voice of staff to be heard at senior levels in the organisation.

The formal supervision of staff had been poor, with the central supervision log being inadequate. Supervision for June 2022 showed compliance with the expected Standard. However, July 2022 only recorded one out of ten staff receiving supervision and no staff in August 2022 received supervision. This is an area for improvement.

In addition to formal supervision, Clinical supervision continues to be delivered to staff in this home, which is a good area of practice and should provide for better care, support and outcomes for care receivers through trauma informed care. However, feedback from the professional delivering this supervision expressed that the staff team *'appeared to be leading the field with regards to their care giving, actions and reflections on how care receivers should be supported in Jersey. This unfortunately has not been the case during the last fifteen months, as progress has stalled, which has reduced the consistency and effectiveness of the staff team'*.

Although this is not an area for improvement in this inspection, the use of clinical supervision and staff engagement in this process would benefit from a review by the Registered Provider to ensure that therapeutic trauma informed practice and care are embedded in this home. This matter will be revisited in the next inspection.

The staffing ratio recommended following a risk assessment in April 2022 is commensurate with the needs of the care receivers in this home. However, there has been considerable pressures in meeting this recommendation. Even with staff working additional shifts, the staffing ratios have fallen below what is required, especially over the summer months. This is an area for improvement.

The homes current Statement of Purpose does not reflect the current staff ratios required to meet the care receivers' needs. This is an area for improvement.

A recommendation from the risk assessment in relation to security of the home was to have a security bell and camera installed on the outside entrances of the home. This was completed, however owing to software issues the equipment is not compatible with the home's IT equipment, so does not work. This is an area for improvement.

One staff member who joined the home in October 2021 reported that her induction was very limited, and she was on shift straight away. New staff should have an adequate induction period, backed up by a robust procedure. This is an area for improvement.

The care receivers were often missing from their home or absent without the consent of staff, with sixty-eight missing notifications since the last inspection; this would result in staff implementing care receivers' individual missing protocols. Personal safety plans were in place and regular multi-agency meetings were undertaken to consider contextual safeguarding for these care receivers. The safety plans are person centred and provide for a detailed individual response to care receivers. The Commission understands that the Safeguarding Partnership Board has undertaken a multi-agency review of children missing from care and work is being completed to review the multi-agency policy.

The staff team were clearly under significant pressure during the inspection period, however a positive theme that became clear was their commitment and duty of care to the care receivers, alongside an understanding of the care receiver's life journey. Staff spoke with fondness for the care receivers; however, this was balanced against concern for their welfare when out in the community.

The staff team are to be commended for continuing to provide adequate care, with limited management oversight.

Staff training was also a good area of practice, with all staff having completed Level Two Applied Therapeutic Skills training and eight out of ten staff having completed Level Three. Eight staff had also completed Non-Violence Resistance (NVR) training.

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>Area for Improvement 1</p> <p>Ref: Regulation 3 and 5 Standard 7.9</p> <p>To be completed by: 31 October 2022</p>	<p>The Registered Provider must ensure that a Registered Manager is appointed to this home.</p>
	<p>Response by Registered Provider:</p> <p>An experienced interim manager is now in place, supporting the home and team.</p>
<p>Area for Improvement 2</p> <p>Ref: Regulation 17 Standard 7.14</p> <p>To be completed by: Immediate action required</p>	<p>The Registered Provider must ensure that all staff at this home receive regular supervision to enable them to provide care to care receivers to an appropriate standard.</p>
	<p>Response by Registered Provider:</p> <p>Staff at the home will receive regular supervision in line with standard 7.14 with a minimum of 4 times per year and or more frequent if individual needs demands this. The focus of supervision will be to develop and build on good practice, develop their knowledge, skills, and competence through agreed support to ensure that professional relationships and sound judgement in the workplace are maintained.</p>
<p>Area for Improvement 3</p> <p>Ref: Regulation 17 Standard 7.9</p>	<p>The Registered Provider must ensure there are sufficient staff to meet the needs of the care receivers in this home (as per the current risk assessment), and that staff are not working</p>

<p>To be completed by: 30 November 2022</p>	<p>excessive additional hours, which are over the mandated threshold of 48 hours.</p>
	<p>Response by Registered Provider:</p> <p>The home currently has one young person in placement. The staffing levels have reverted back to the 2 staff per session that the home was established to provide. This has significantly reduced the need for additional staff cover.</p> <p>The interim manager is in place. Two senior staff have returned from extended leave and there have been three new permanent staff recruited to the home. Recruitment continues to fill all permanent positions.</p> <p>There have been 8 new zero hour bank staff recruited, which once inducted will support the staff team and allow the home manager to keep within the 48hr threshold.</p>

<p>Area for Improvement 4</p> <p>Ref: Regulation 20 Standard 1.1</p> <p>To be completed by: 20 October 2022</p>	<p>The Registered Provider must update the current Statement of Purpose to reflect the current staffing ratios for care receivers.</p>
	<p>Response by Registered Provider:</p> <p>The statement of purpose accurately reflects the two staff per session day and night as the increase is no longer required. The SOP is under full review and will be submitted to the care commission detailing how staff will be allocated to children and young people going forward.</p>

<p>Area for Improvement 5</p> <p>Ref: Regulation 18 Standard 8.2</p>	<p>The Register Provider must ensure that the security of this home is rectified in line with the recommendations of the current risk assessment. Specifically, the security bell/camera is not working and needs to be repaired.</p>
<p>To be completed by: Immediate action required</p>	<p>Response by Registered Provider:</p> <p>The issue that initiated the need for security cameras is no longer an acute need or concern.</p> <p>Monitoring of security is reviewed daily, and the external doorbell camera has not been implemented due to government software restrictions. There is a full government review of security cameras and that is expected to resolve broader issues.</p> <p>As an interim measure, the home will purchase separate mobile broadband that will connect to the Wi-Fi to enable the camera to be used on the homes mobile telephone. This will be place at the point of the next inspection.</p>

<p>Area for Improvement 6</p> <p>Ref: Regulation 17 Standard 7.10</p>	<p>The Registered Provider must ensure that the home's Induction Policy is adhered to and that new employees are given appropriate induction support.</p>
<p>To be completed by: Immediate action required for any new employees</p>	<p>Response by Registered Provider:</p> <p>All new staff will be inducted in line with organisational policy and also within the commissions standard/regulations. Staff will receive mandatory training, supervised practice via shadowing (minimum 5 shifts of shadowing) and competence will be assessed and signed off by a suitably qualified practitioner.</p>

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