



Jersey Care  
Commission

# **INSPECTION REPORT**

**03 Children's Home**

**Care Home Service**

**4 April 2023**

## 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 a Children's Home service. It is one of eight Children's Homes operated by the Government of Jersey. The name and address of the home has not been included in this report to preserve the privacy and confidentiality of the children and young people who live there.

The service is operated in a two-storey building with four bedrooms, a large kitchen/diner and two lounge areas. The service is registered to provide residential care for two children and young people. The service is well located with access to shops, cafes, and good transport links.

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

Regulated Activity	Care home
Conditions of Registration	<u>Mandatory</u>  Type of care: personal care/personal support  Category of care: Children and young people  Maximum number of care receivers: two  Age range of care receivers: 7 to 18 years old

	Maximum number of care receivers that can be accommodated in the following rooms: 1 and 2.
Date of Inspection	4 April 2023
Times of Inspection	10am to 1.30pm
Type of Inspection	Announced
Number of areas for improvement	Five
Number of care receivers accommodated on the day of the inspection	Restricted to prevent the identification of the care receivers

The Government of Jersey operates this Children's Care Home through the Children, Young People, Education and Skills (CYPES) department.

At the time of the last inspection, interim arrangements were in place, where the Service Lead for Children's Homes was overseeing the management of this home. A manager designate took over the management of this home on 20 September 2022, with the registration process completed on 28 November 2022.

Following a significant reorganisation of Children's Homes in March 2023, the Registered Manager changed on 9 March 2023 to the current incumbent.

The Commission received an application from the Registered Provider to vary a condition on this service's registration on three occasions since the last inspection in July 2022. These were:

1. 7 September 2022 – To reduce the number of bedrooms available for care receivers to two.
2. 16 February 2023 - To increase the age range from 12 to 18 years old to 7 to 18 years old and the bedrooms available for care receivers to three.
3. 9 March 2023 – to reduce the number of bedrooms available to care receivers to two.

The Commission received an updated copy of the service's Statement of Purpose on 19 April 2023. This was submitted in agreement with the Registered Manager following a significant change in the staffing of this service.

## 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.

In March 2023, there was a significant restructuring within the children's homes in Jersey, resulting in staff, registered managers, children, and young people transferring between children's homes into the broader service.

One of the areas for improvement identified in the last inspection in July 2022 no longer applies to this service. This was area for improvement three, which required that the Registered Provider arranged bespoke mental health training for staff.

Three previous areas for improvement have also been successfully addressed. Two of the areas concerning impact and compatibility risk assessments, when it is proposed that new care receivers be accommodated in this service are now in place. The third area for improvement was the use of the multi-agency 'missing from care' policy. Although the Commission had not received any 'missing from care' notifications in recent months, evidence from professionals in the wider service assured the regulation officers that this policy was now working more successfully. In consequence, it is no longer an area for improvement.

Two areas for improvement remain. The first area relates to needing more appropriate numbers of skilled and qualified staff to consistently meet the needs of care receivers. The second area of improvement that remains unresolved is in ensuring that staff are adequately trained and competent in dispensing and administering of medicines.

Three additional areas for improvement were also identified as part of this inspection, taking the total number of areas for improvement to five.

The regulation officers viewed the personnel information of all care workers in this service. Only one staff member had the required Level 3 diploma in residential care; the remaining staff members needed the required diploma and were not working towards it.

Regarding mandatory training, the regulation officers were unable to evidence that the training completed by the staff team met the required level of training as set out in the Children's Home Care Standards. This included the RQF Level 3 medications module needed to administer and dispense medication. Therefore, these continue to be areas for improvement.

The regulation officers noted non-compliance with the Jersey Fire and Rescue Fire Precautions Logbook, which is a requirement of the Fire Precautions (Jersey) Law 1977. There were no entries for mandatory fire alarm tests (weekly), emergency lighting checks (monthly), or evidence of a recent fire drill since August 2022 (every six months). This is an area for improvement.

The recording of fridge and freezer temperatures were not recorded consistently by the staff team. This is an area for improvement.

The regulation officers noted a comprehensive reflective supervision model in this service, which included the opportunity for group supervision. This provided the staff team with a reflective space to develop their understanding of the care receivers' needs. This is an area of good practice.

The Registered Manager provides monthly reports to the Service Lead for Children's Homes. The regulation officers noted the report for March 2023 to be comprehensive and the Children's Care Homes Standards were reflected throughout. This is an area of good practice.

The care records of care receivers in this service were thorough. All the necessary documentation was present to enable an understanding of the needs of care receivers and how to manage, mitigate or reduce any risks that have been identified. This is an area of good practice.

The Children and Young Person's Guide requires revision to reflect the change in the age range of care receivers accessing care and support. This is an area for improvement.

The regulation officers were assured that there had been sufficient management oversight of care receivers' care plans. There was also evidence of regular care planning meetings for children in this service. This is an area of good practice.

During this inspection, the regulation officers were informed that some of the existing care staff would change within the next week. This decision, made by the service recognised the need for a more experienced and appropriately trained staff team to deliver care and support in this service. Given this situation, the Commission will undertake a focused inspection of the areas of improvement identified in this report in approximately three months' time.

## INSPECTION PROCESS

This announced inspection was completed on 4 April 2023. Notice of the inspection visit was given to the Registered Manager on the day before the visit. This was to make sure that the Registered Manager would be available during the visit.

Two regulation officers conducted this inspection.

The Children's Care Home Standards were referenced throughout the inspection.<sup>1</sup>

The inspection focussed on the following lines of enquiry:

- **Management of the service**
- **Care and support**
- **Choice and safety.**

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

Before the inspection visit, all of the information held by the Commission about this service was reviewed, including the previous inspection reports.

The regulation officers established contact with one care receiver and this contact was face-to-face.

The views of one professional were also obtained as part of the inspection process.

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 Registered Manager.

This report outlines 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.

## **INSPECTION FINDINGS**

At the last inspection, six areas for improvement were identified and an improvement plan was submitted to the Commission by the Registered Provider setting out how these areas would be addressed.

The improvement plan was discussed during this inspection, and insufficient progress had yet to be made in two areas for improvement identified in the last inspection in July 2022. Three areas for improvement have been successfully addressed and one area for improvement no longer applies to this service. For clarity, each area for improvement is set out below, with the response from the Provider and an update on the current situation.

**Area for improvement 1:** 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.

*Response by the Register Provider: 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.*

*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.*

*Care staff attend meetings and visit a care receiver within a different home.*

Current situation: Impact risk assessments are now regularly completed where there are new admissions to this service. This is no longer an area for improvement.

**Area for improvement 2:** 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.

*Response by the Register Provider: 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.*



Current situation: The regulation officers viewed a sample impact risk assessment and are assured that risks associated with meeting the needs of all care receivers in this service are part of an admission process. This is no longer an area for improvement.

**Area for improvement 3:** Bespoke mental health training should be arranged for staff at this home.

*Response by the Register Provider: The staff team receives weekly clinical supervision from a 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 on 15 September to some staff members, with further training planned in conjunction with Headsight psychotherapist on 23 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.*

Current situation: This area for improvement no longer applies to this service.

**Area for improvement 4:** 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.

*Response by the Register Provider: 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 eight). 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, commencing 20th September.*

*Six 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)*

Current situation: At the time of the inspection, six care workers delivered care and support in this service. Only one care worker had the required Level 3 Diploma in Residential Care (or equivalent). The mandatory training completed by the remaining care staff was not adequate. Two staff members had no experience of caring for children or young people before working in this service. This remains an area for improvement.

**Area for improvement 5:** 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.

*Response by the Register Provider: All staff are required to attend Medication Awareness training accessed through Virtual College. All 03 children's home staff are completing this.*

*The Learning and Development Manager is sourcing additional Medication training as a stand-alone unit obtained through Highlands College or the Vocational Training Centre.*

*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.*

*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.*

Current situation: Only one staff member had completed the required Level 3 medications model. One staff member had achieved a level 2 qualification, with another having completed basic medication awareness training. However, this does not meet the required training standards. The remaining three staff had yet to undertake any medication training, and none had competency sign-off from a qualified professional.

**Area for improvement 6:** 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.

*Response by the Register Provider: 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 for 19 September 2022 however was rescheduled due to the passing of HRH.*

Current situation: The findings of the proposed multi-agency review are yet to be published. Although, there has not been 'missing from care' notifications to the Commission from this service in recent months, evidence from professionals in the wider children's home service is that the current missing from care policy is providing appropriate safeguarding measures for those children and young people absent or missing from care. This is no longer an area for improvement.

### **Management of the service**

<p>The Standards outline the Provider's responsibility to make sure that where people stay is right for them and safe. There will be a management structure in place, with an integrated organisational and governance framework, which is appropriate to the needs, size, and complexity of the service.</p>
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CYPES operates this service on behalf of the Government of Jersey. Therefore, the service benefits from governance structures and a host of policies and procedures. Children and young people who access this service are 'looked after' by the Minister for Children and Education, who discharges this responsibility to the Children's Social Care Service.

Due to a significant restructuring in early March 2023, children, young people, and care staff transferred between different children's care homes within the wider service. At the time of this inspection, this service had only been operating with the current staff team for just over a month.

This service has revised its Statement of Purpose to reflect the current care receivers' needs and changes to the staff team. The Children and Young Person's Guide requires revision to reflect the age range of the care receivers who can access this service. This is an area for improvement.

The Registered Manager's March 2023 monthly report provided to the Service Lead for Children's Homes was viewed by the regulation officers and was found to be comprehensive. The Standards for Children's Care Homes were referenced throughout. Behaviour management incidents were also reviewed, learning was noted, and action plans were implemented to mitigate future incidents. This is an area of good practice.

It was noted by the regulation officers that several logs, such as behaviour management incidents or missing from care episodes, had not been completed since August 2022. It is acknowledged that the monthly report detailed above addresses such issues.

However, it is recommended that there is standardisation across the children's home service. The Registered Manager agreed to take this issue to the next standardisation meeting with other registered managers.

The supervision model in place was found to be comprehensive and offered care staff opportunities for individual and group reflective supervision. The Registered Manager provided examples of how supervision has been used to expand the knowledge and understanding of care staff to improve the care and support provided to care receivers in this home.

The Registered Manager has considerable relevant experience and knowledge concerning the needs of care receivers in this service. The experience and expertise of the staff team who provide the care and support in this service concerned the regulation officers. The Registered Manager provided assurance and examples to the regulation officers that this was recognised and that they had been proactive in equipping the staff team with some additional skills and an understanding of the care receivers' needs.

Concerning the Registered Manager, a professional made the following comment:

*'The Registered Manager is very child focused and keen to address any deficits in care from having a staff team that is new and that the child doesn't know well.'*

Monthly reports from an independent visitor have been maintained since the last inspection in July 2022 and are considered comprehensive by the regulation officers. These reports remain integral in identifying deficits or where good areas of practice are identified.

At the time of the inspection, one care worker out of six met the mandatory training requirements in this service and had direct experience of working in a children's home. This included the absence of medication training, which was an area for improvement from the last inspection in July 2022.

An additional concern to the regulation officers was that two care staff had no experience working directly with children and importantly care staff lacked training in trauma-informed practice. This service has recognised the need to have a more experienced and appropriately trained staff team, with plans to address this imminently. However, this is an area for improvement.

No complaints have been made about this service since the last inspection in July 2022.

## 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 on-site care receiver records in this service were found to be comprehensive. They would give the reader an understanding of the care receivers' lived experiences and developmental needs. Notably, the Registered Manager makes sure that care staff read and sign off care plans, risk assessments, behaviour management plans and other documentation that are essential in providing the necessary care and support to children and young people in this service. The records also recorded dates of health and dental appointments and visits from social workers and professionals. This is an area of good practice.

The Registered Manager shared that care staff handovers are not always recorded in writing when shifts change, which would be best practice. This is not a breach of the Standards, as handovers are taking place. However, in the interests of promoting best practice in the service, the regulation officers strongly recommends that this is put in place.

Regular management oversight was present on care receivers' electronic records in line with this service's timescales for best practice. However, it was noted by regulation officers that not all children looked after reviews were completed within timescales.

In addition, an audit of these records highlighted that placement moves for some care receivers did not trigger further reviews as per child looked after procedures. The Registered Provider needs to improve this area of practice to make sure children's and young people's plans are reviewed when they move placement.

The risk assessments, behaviour management plans and care/placement plans viewed by the regulation officers appeared comprehensive.

There was evidence of regular review of these documents, which assured the regulation officers that the care and support provided to care receivers reflected their changing needs. Care planning meetings also take place bi-weekly to make sure any changes in care needs are identified and documentation can be updated.

Children accessing care and support in this service are provided with various activities to promote their physical, emotional, and social development. There was evidence of written risk assessment concerning these activities, reflecting the needs of the care receivers. The Registered Manager also gave examples of dynamic risk assessment where staff had to respond to changing events to reduce risks of care receivers coming to harm.

The Registered Manager reported that they have access to a clinical psychologist to provide support and advice about the children and young people in this service. The Registered Manager stated that this had been integral in helping understand the impact of the lived experience of the children and young people in this service. Specialist support and intervention are also available to the children and young people in this service. This is an area of good practice.

Children and young people have access to health, dental and optical facilities in this service. All care receivers access full-time education. The Registered Manager has made sure that care receivers are provided with structure and routine. The regulation officers reviewed the daily notes relating to care receivers and it was apparent that this was taking place.

The Registered Manager provided examples of staff responses to children and young people in this service, where they were treated with dignity and respect. This included how the Registered Manager supported care staff in challenging situations to respond in a trauma-informed way to help children and young people achieve better outcomes. This is an area of good practice.

A professional who has regular contact with this service made the following comment:

*'I always find a homely feel to the house and am able to sit in the lounge and talk with young people and children, alone or with staff, whatever is appropriate.'*

### **Choice and safety**

The Standards outline the Provider's responsibility to make sure that people will feel safe and are kept safe. People will be supported, enabled, and empowered to be as independent and autonomous as practicable. People's rights will be supported and protected.

The planned multi-agency revision of the 'missing from care' policy is yet to be completed. The regulation officers are aware of anecdotal evidence in the wider children's home service that the current multi-agency response provides appropriate safeguarding measures to children and young people when they are absent or missing from care. There is clear evidence that the concerns regarding the 'missing from care' policy at the last inspection have reduced significantly, therefore this is no longer an area for improvement. However, the Commission recommends that the proposed revision of this policy is completed.

Of concern to the regulation officers was this service's failure to comply with the Jersey Fire and Rescue Fire Precautions Logbook, which is a requirement of the Fire Precautions (Jersey) Law 1977. No entries for fire alarm tests, emergency lighting checks, or fire drills have been undertaken since August 2022. The Registered Manager advised the regulation officers that this would be addressed immediately. As this was a finding of the inspection, it is an area for improvement.

The recording of freezer and fridge temperatures was sporadic in this service. This placed care receivers and care staff at risk of food and drink being unfit for consumption or food poisoning. This is an area for improvement.

Impact and Compatibility risk assessments are used in this and the broader children's homes service. The regulation officers were assured that these assessments identified any risks and how they would be mitigated concerning matching children and young people in this home.



The successful use of these assessments' was evident in the children's home restructure in March 2023. This is no longer an area for improvement.

The regulation officers were provided with evidence of the children and young people in this home having choices over their daily activities. They contribute to the weekly meal planner and have a choice concerning age-appropriate television programmes. This home benefits from two reception rooms, allowing children and young people to have their own space.

Children and young people in this service are provided with pocket money and a clothing allowance, and they are given a choice in how these allowances are spent. Appropriate arrangements are in place to manage these allowances to prevent inappropriate use or financial abuse.

Care receivers' bedrooms were viewed as part of this inspection. Bedrooms were personalised, warm and comfortable.

Care staff complete a daily task sheet, including cleaning schedules within the service, to make sure infection control measures are in place. The Control of Substances Hazardous to Health (COSHH) policy had just been updated in this service and the Health and Safety Certificate was within date (June 2022). The home presented as warm, homely, and well maintained.

## IMPROVEMENT PLAN

There were seven 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> Standard 5.11</p> <p><b>To be completed by:</b> 1 month from the inspection date (4 April 2023).</p>	<p>Appropriate numbers of skilled and qualified staff must be in place to consistently meet the needs of all care receivers.</p> <hr/> <p><b>Response of Registered Provider:</b></p> <p>As per discussion at the time of the inspection, the registered manager informed the inspector that it had been recognised that the staff team did not meet the required standards of the children's home, senior management had also acknowledged this and a more experienced and qualified staff team would be working in the home from 10th April (six days following the inspection), following this the registered manager confirmed with the inspector that the staff team now met the current standards with a blend of experienced, permanent and qualified staff.</p>
<p><b>Area for Improvement 2</b></p> <p><b>Ref:</b> Standard 11.8</p> <p><b>To be completed by:</b> 3 months from the inspection date (4 April 2023).</p>	<p>The medications policy has been reviewed and updated. The Registered Provider must put in place a training programme to ensure that all staff are adequately trained and competent in the dispensing and management of medication.</p> <hr/> <p><b>Response of Registered Provider:</b></p> <p>In discussions with JCC it has been agreed that considering that not all children living in mainstream children's homes are taking regular medication and it is unrealistic for staff to be observed administering medication to children to ensure they complete the CQF competencies to achieve their qualification. A medication policy is in place and as registered manager I will ensure that all staff complete Medication Awareness training on virtual college, Basic Life training, there are two members of staff administering any medication, there is a lockable medication cabinet, medication administered is detailed in the child's Personal Plan, there is a</p>

	medication risk assessment in place, staff complete MAR sheets and that as registered manager I complete weekly medication audits. In addition, the registered manager will complete annual competency checks with all staff.
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<p><b>Area for Improvement 3</b></p> <p><b>Ref:</b> Standard 10.3 and 10.10</p> <p><b>To be completed by:</b> To be actioned immediately</p>	<p>The Registered Provider must make sure that this service complies with Fire Precautions (Jersey) Law 1977 regarding the completion of fire alarm tests, emergency lighting checks and fire drills as detailed in the Jersey Fire and Rescue Fire Precautions Logbook.</p>
	<p><b>Response of Registered Provider:</b></p> <p>This improvement was remedied immediately with weekly, monthly, six monthly and annually checks being completed and recorded in the fire logbook provided. In addition, since the inspector visited the home G4S have been to carry out independent checks, again this has been recorded in the fire logbooks provided.</p>

<p><b>Area for Improvement 4</b></p> <p><b>Ref:</b> Standard 10.10</p> <p><b>To be completed by:</b> To be actioned immediately</p>	<p>Fridge and Freezer temperatures must be recorded daily to protect the safety and welfare of care receivers and staff.</p>
	<p><b>Response of Registered Provider:</b></p> <p>This area of improvement has been remedied with immediate effect; the fridge/freezer temperatures have been recorded daily up until the 28.05.23. The young people have not been in the home since this time therefore the fridge and freezer have not been in use and there have been no food items in the fridge or freezer. Once the young people return to the home the fridge / freezer will be re-stocked and the monitoring of the temperatures will be recorded daily in addition to using food labels, covering of food and checks on use by and best before dates.</p>

<b>Area for Improvement 5</b>	The Children and Young Person's Guide must be revised to reflect the age range of care receivers in this service.
<b>Ref:</b> Standard 1.2	<p data-bbox="608 353 1399 403"><b>Response of Registered Provider:</b></p> <p data-bbox="608 403 1399 573">The young person's guide has been reviewed and updated; a copy of the guide has been forwarded to the inspector.</p>
<b>To be completed by:</b> 1 month from the inspection date (4 April 2023).	

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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