



**Jersey Care
Commission**

INSPECTION REPORT

Field View

Care Home Service

**La Grande Route de St Martin
St Saviour, JE2 7GS**

25 May 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 Field View, one of two provisions providing 18 to 21 year old care experienced young adults with semi-independent supported accommodation.

Fieldview aims to 'support and prepare young people who cannot live in their own homes and who do not necessarily have the skills, or the experience of semi-independent living, that will enable them to cope ahead of transitioning onto independence.'

The service is situated in the parish of St Saviour, with good transport links to St Helier. There are several shops and a petrol station nearby. The building where the service is delivered is set out on three floors, has six bedrooms, and an enclosed garden area. The service became registered with the Commission on 6 December 2019.

Regulated Activity	Care home
Conditions of Registration	<u>Mandatory</u> Type of care: personal care, personal support Category of care: young adults

	<p>Maximum number of care receivers: 5 Maximum number in receipt of personal care/personal support: 5</p> <p>Age range of care receivers: 18-21</p> <p>Maximum number of care receivers that can be accommodated in the following rooms:</p> <p>Bedrooms 1, 2, 3, 4 and 5 = 1</p>
Date and times of Inspection	25 May 2023 – 11.30am to 4.30pm
Type of Inspection	Unannounced
Number of areas for improvement	None
Number of care receivers accommodated on the day of the inspection	Restricted to protect the identity of the care receivers in this service

Field View is operated by the Government of Jersey.

Since the last inspection in July 2021, the Commission has not received any applications to vary the conditions of registration of this service. However, a previous variation of conditions expired on 23 December 2022, resulting in the age range for care receivers reverting back to 18 to 21 years old.

The Statement of Purpose was reviewed as part of the inspection, and the Commission received an updated version on 26 May 2023.

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 last inspection was conducted between 7 June and 7 July 2022, resulting in two areas of improvement being identified for this service. Permanent and bank staffing levels are now sufficient to ensure that annual leave and sickness periods are covered in line with this service's Statement of Purpose. The regulation officers were assured that no lone working was taking place in this service.

In respect of all staff completing medications management training, this no longer applies to this service as the care receivers self-administer their own medication. No areas for improvement were identified as a result of this inspection.

Notifications received by the Commission from this service have reduced significantly since the last inspection and reflected greater stability in this service. Regulation officers heard from care staff about how they had successfully endeavoured to build trusting and reliable relationships with care receivers, which had resulted in fewer notifications to the Commission. This is an area of good practice.

Care receivers' files were found to be in order and followed data protection principles, given the age range of the young adults accessing this service. There was evidence of using independence skills checklists on all care receivers' files and regular reviews at least three monthly.

The care staff's attitude to delivering care in this service was person-centred and based on a consistent whole-team approach. Support plans were built on care receivers' strengths and were outcomes-based. Care staff gave examples of supporting care receivers through challenging situations while maintaining positive regard, respect, and boundaries for better outcomes. This is an area of good practice in this service.

Since the last inspection, several care receivers have successfully transitioned to independent or semi-independent living. Care staff provided examples of how care receivers were supported and involved in planning their transition. In addition, this service has offered post-transition support where young adults request this.

Care staff spoke positively regarding the training offered in this service, notably the Trauma Recovery Model and Applied Therapeutic Skills. Care staff provided examples of how they had incorporated this learning into the everyday support they provide to care receivers in this service.

The last inspection in June and July 2022 identified some need for clarification between the roles of care staff and the personal advisors allocated to care receivers as part of the leaving care offer of the Government of Jersey. The Registered Manager and care staff provided examples of how this had improved, resulting in more coherent support plans and better outcomes for care receivers.

The regulation officers recognized the staff team's dedication, commitment, and determination during this inspection, alongside a genuine fondness from care staff for the care receivers accessing this service.

INSPECTION PROCESS

This inspection was unannounced and was completed on 25 May 2023. Two regulation officers carried out the inspection.

The Care Home Standards were referenced throughout the inspection.¹

This inspection focussed on the following lines of enquiry:

- **Management of the service**
- **Care and support**
- **Choice and safety**
- **Review of the areas of improvement from the last inspection of this service in June and July 2022.**

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

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

The Regulation Officer sought the views of the young adults who use the service and spoke with managerial and other staff. This contact was made by email, with one young adult responding.

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

Records, including policies, care records, incidents, and complaints, were examined during the inspection. 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.

INSPECTION FINDINGS

Following the completion of the last inspection in July 2022, two 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 it was positive to note that improvements had been made. There was now adequate permanent and bank care staff to cover sickness and annual leave to prevent lone working in this service. Due to the current care receivers' needs, the requirement for staff to have completed medication training no longer applies to this service. However, care staff have completed medication awareness training online.

The Registered Manager also reported that although staff do not need to complete the Level 3 medications training module, there is a medium-term plan to address this, as care staff may carry out shifts in other children's home services.

No areas for improvement were identified as a result of this inspection.

Management of the service

The Standards outline the Provider's responsibility to ensure 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.

The Government of Jersey operates this service through Children, Young People, Education and Skills. Therefore, the service benefits from organisational governance structures, policies, and procedures. Young adults who access this service are defined as care-experienced individuals who are accessing supported living through this service.

One of the regulation officers viewed the service development plan for this service. This was comprehensive and assured the Regulation Officer that the Registered Provider understood this service's ongoing workforce pressures and future planning needs.

Independent Visitor reports are completed monthly for this service. These are comprehensive and relate to the Children's Home Care Standards. The Registered Manager provided positive feedback regarding their relationship with the Independent Visitor. The Registered Manager reported that recommendations from these reports are placed on a tracker and are regularly reviewed by the senior leadership of CYPES. This is an area of good practice.

The Registered Manager has accurate records of complaints about this service, including the nature and outcome of the complaint.

The regulation officers examined several logs, such as the prescribed medication, admission/discharge, safeguarding, incident, and the room search log. These were found to be in order and an area of good practice.

There are currently two vacancies in this service, both for senior members of the care team. The Registered Manager advised these roles were going to be advertised soon. Since the last inspection, no new care staff have joined the staff team; however, the regulation officers are aware from previous inspections that this service has a comprehensive induction policy, which is standard across residential services in the wider organisation.

One of the regulation officers viewed staff rotas for the last three months. Most staff had completed regular overtime shifts to cover sickness and annual leave. However, it was noted that there had been a reduction over the last six weeks to an acceptable level as per the Children's Home Standards. No lone working was identified in this service and is therefore no longer an area for improvement.

The care staff team is up to date with all mandatory training requirements, apart from first aid and basic life support. A plan was in place to address this, with all care staff scheduled to undertake this training on 4 October 2023.

Care staff who were spoken with on the day of inspection provided positive feedback regarding the quantity and quality of the training in this service, expressing that trauma-informed training had enhanced their care practice and outcomes for the young adults they support. One staff member commented that the 'Trauma Recovery Model' training they had recently completed was 'the best training they had ever undertaken.'

Supervision of care staff is completed by the Registered Manager and senior care worker, and the frequency was evidenced to be within the requirements of the Standards. Care staff spoken to on the day of the inspection reported that supervision met their personal needs and provided a reflective space for discussion about the care receivers' needs. A new appraisal process had also been put in place earlier in 2023 by the wider governmental organisation, with the Registered Manager reporting that approx. 70 to 80% of appraisals had been completed.

The Property Log inspected by the regulation officers was found to be comprehensive. It contained up-to-date policies and procedures in respect of the safe operation of this service, such as:

- Health and Safety policy
- Control of Substances Hazardous to Health (COSHH) policy
- Fire procedures and safety plans

Handovers take place during every shift handover, and these are recorded. In addition, there are daily checklists for care staff to complete to ensure the service remains operational and of a high standard regarding the environment and the delivery of support to the care receivers.

The recently revised Statement of Purpose was reviewed for this service and found to be fit for purpose and reflected the needs of the current care receivers. This service has a comprehensive Young Person's Guide in place. This guide also provides care receivers with an extensive understanding of what support they can expect from the service and what expectations are required from them.

The regulation officers noted that the Registered Manager was accommodating, helpful, and open to the inspection process. The staff team met on the day of inspection expressed passion and dedication for the support they provide young adults who access this service. Care staff gave several examples of situations where young adults were successfully supported to achieve and transition to independent or semi-independent living.

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's main living area where this service is delivered is homely and functional. The environment was clean, tidy, and appeared well-maintained. Care receivers' rooms were not accessed during the inspection to respect their privacy.

There have been new admissions to this home since the last inspection. Impact risk assessments are completed as part of the preadmission process to ensure the service has carefully considered all the areas of impact for the care receiver, the existing residents, and the staff team. This is an area of good practice.

Given the age range of the care receivers in this service, information on the personal files viewed by the regulation officers was limited due to data protection principles. The documents present related to the individual support needs of the care receivers, detailing any risks and identifying targets through independence skills checklists. Where consent was required, there was evidence of signed documentation.

The regulation officers noted regular review of key documents, such as independence skills checklists and care receivers' pathway plans. The independent skills checklist assesses the strengths and deficits of care receivers' independent living skills. Following this initial skills assessment, the care receiver and their keyworker co-produce a plan to address any identified needs.

Staff gave examples of how they supported care receivers to prepare for independent or semi-independent living. This included the required practical skills and other tasks such as accessing income support, employment, or educational opportunities. Staff also undertake regular key work sessions with care receivers. These are person-centred and can be formal or informal according to the wishes and feelings of the individual concerned.

Staff spoke with passion, fondness, and the importance of developing a trusting and reliable relationship with care receivers in this service. Care staff reflected that it is imperative to understand care receivers lived experiences, past trauma, and how this had impacted their functioning. In addition, staff spoke of a consistent whole-team approach in delivering person-centred care that will provide the environment for care receivers accessing this service to be successful and achieve their goals.

The Registered Manager and staff spoke positively about the relationship between the service and the care receivers' personal advisors. There were now clear roles and expectations, resulting in better outcomes and more clarity for care receivers regarding who provides the support they need.

Care receivers accessing this service often have challenging relationships with relatives and those close to them. Staff provided examples of how they have supported care receivers to improve these relationships and help them negotiate difficulties in a non-judgemental approach and through reflective discussions.

This service has a visiting policy, which sets out clear expectations to care receivers and visitors. Risk assessments are undertaken by this service to make sure care receivers and staff are kept safe.

Care receivers were approached to provide feedback on this service. One care receiver reported the following:

- they felt well-supported by the staff
- that staff listened when they felt worried or upset
- that care staff supported them in accessing employment
- they are involved with making decisions about their life, but *'sometimes things are just sprung on them.'*
- they wanted extended visiting hours or the option of visitors staying overnight.

Choice and safety

The Standards outline the Provider's responsibility to ensure 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 service has plans to renovate the kitchen used by care receivers and has involved them in the design and décor. In addition, care receivers have also been consulted in the redecoration and design of a second reception room. These are areas of good practice.

This service provides two meals a week for care receivers. Likes, dislikes, and allergens are considered, with choices provided to the care receivers.

This service has a food hygiene policy, and staff are trained to ensure the environment is clean, contamination measures are in place, and the food provided is safe for consumption. The Environmental Health Department will shortly inspect this service regarding the 'Eat Safe' kite mark and will be awarding a star rating.

Care receivers can personalise their bedrooms, for example, the décor or when furniture needs replacing. Care staff do not routinely enter care receivers' rooms without permission or when they are not in the home; however, once a month, a room check is undertaken with the care receivers present to make sure that it is fit for habitation and to identify any fire risks or maintenance issues. This service records all occasions where care receivers' rooms have been entered and the outcome of these events.

Care receivers in this service are young adults with capacity, so they can make their own choices regarding lifestyle and decisions about their lives. However, should the care staff have reason to believe a care receiver is at risk of harm, they will report this to the appropriate authority. Risk assessment in this respect is dynamic and considers any events or incidents that may impact a care receiver's vulnerability.

Care receivers in this service are responsible for administering their own medication, and therefore there is no requirement for staff to complete the required medication training.

The regulation officers examined criminal record checks (Disclosure and Barring Service). Up-to-date checks were in place for all but one staff member, with the regulation officers satisfied with the explanation from the Registered Manager in this regard.

This service has a comprehensive Control of Substances Hazardous to Health (COSHH) policy. The regulation officers noted that cleaning materials were stored appropriately as per this policy. Colour-coded cleaning processes are also used in this service.

The fire precautions logbook was examined by the regulation officers. All checks, tests, and fire drills were routinely carried out per the recommended schedules, with the last fire drill completed on 23 April 2023. There is a current fire safety certificate in place, and equipment, including the alarm system, are serviced annually.

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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