



**Jersey Care
Commission**

INSPECTION REPORT

Eden House

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

Le Cloches

St Clements

JE2 6NQ

22 June and 4 July 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 80 of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 (as amended) 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 Eden House short breaks children's home. The service is situated in the parish of St Clement and is operated by the Government of Jersey.

There is a supermarket within walking distance. The home has two vehicles that support care receivers to access social activities and transportation to and from school. The location allows easy access to the main coastal road, bus services, and local beaches.

The self-contained flat is used for teenage care receivers on a pathway to adulthood plan and is fully equipped to assess and help develop independence and daily living skills.

Eden House short breaks service allows care receivers to spend a period of time, including an overnight stay, away from home. During this time, the young person will be engaged in various activities of their choosing, both within Eden House and the local community. The support which is provided is based on a social work assessment of need that indicates the level of support required and the specific outcomes to be achieved.

All stays are planned with the care receiver and their families, including wider support systems such as school and social clubs.

The home currently provides a service for 12 care receivers. The staff team comprises of nine full-time residential childcare officers (RCCO), the Registered Manager, and a part-time cleaner. This service currently has two vacancies. Care staff cover 24-hour shifts to provide continuity for care receivers, with shift handover starting at 2pm. A domestic cleaner also supports this service, and the Registered Manager is present within the home five days per week.

This service currently operates six days per week, with the current age range of the care receivers being nine to seventeen years old.

Regulated Activity	Care Home
Conditions of Registration	Type of care: personal care, personal support Category of care: children and young people Maximum number of care receivers: three Maximum number in receipt of personal care/support: three Age range of care receivers: 0 - 18 Maximum number of care receivers that can be accommodated in the following rooms: bedrooms 1 and 2 - one person, flat - one person
Dates of Inspection	22 June and 4 July 2023
Times of Inspection	10am to 12.15pm and 4pm to 5.30pm
Type of Inspection	The first visit was unannounced. The second visit was announced.
Number of areas for improvement	None
Number of care receivers accommodated on the day of the inspection	Two

Since the last inspection on 29 September and 12 October 2022, no applications for variation of conditions of registration have been made to the Commission. There are no discretionary conditions applied to 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.

No areas for improvement were identified as part of the last inspection on 29 September and 12 October 2022. Similarly, this inspection did not identify any areas for improvement.

No complaints or notifications of notifiable events have been made to the Commission about this service. In addition, no complaints have been made directly to this service by care receivers or the parents/carers. However, the Registered Manager provided examples of how care staff advocate for children and young people who access this service through individual communication styles and observations. This is an area of good practice.

Independent visitors undertake monthly visits to this service and produce monthly quality assurance reports for this service and the wider organisation. The Regulation Officer reviewed the reports since the last inspection and noted them to be thorough. Where independent visitors made recommendations, these were acted upon by the service.

The Regulation Officer was assured that mandatory training and staff supervision was carried out per the Children's Home Standards.

Personal care files, including care plans for children and young people who access this service, were comprehensive, collaborative, and co-produced with parents/carers and other professionals. This is an area of good practice.

The Regulation Officer evidenced regular collaboration with parents/carers in the co-production of care plans, risk assessments, and session plans. This is an area of good practice.

Communication assessments resulted in communication tools being actively used with children and young people who access this service. Consequently, children and young people are offered choices and consulted regarding the care they receive. This is an area of good practice.

The Regulation Officer was satisfied that the management of medications in this service was comprehensive and had improved on the excellent practice evidenced in the last inspection.

Care staff in this service are passionate, skilled, and dedicated in their care and support role for children and young people who access this service. Positive individualised communication methods are used extensively and provide evidence of children and young people achieving and progressing in agreed targets and goals.

Notably, feedback from parents/carers and professionals consulted during this inspection was positive about this service.

Overall, this service is well-led, effective, and organised.

INSPECTION PROCESS

This inspection was unannounced and was completed on 22 June 2023. The Regulation Officer undertook an additional inspection visit on 4 July 2023 to observe the delivery of care to care receivers.

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**

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

The Regulation Officer sought the views of the people who use the service and or their representatives and spoke with managerial and other staff.

The Regulation Officer contacted three relatives of the care receivers who access this service. This contact was made by email, and two relatives responded.

The views of two professionals were also obtained as part of 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 Officer provided feedback to the Registered Manager. This report outlines our findings and includes areas of good practice identified during the inspection.

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 June 2022, no areas for improvement were identified that required any follow-up on this visit. No areas for improvement were identified during 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.

CYPES operates this service on behalf of the Government of Jersey. Therefore, this service benefits from governance structures, policies, and procedures.

This service has strong governance in place regarding policies and procedures. Each policy area is in a separate paper file with associated procedures and service-specific risk assessments. Where training was required concerning a policy, copies of staff training certificates were present, and the Registered Manager ensured that staff were conversant with the policy, procedure, and service risk assessment. This is an area of good practice.

The Regulation Officer was satisfied that the complement of staff was sufficient to meet the requirements of the care receivers who access this service, albeit there were currently two vacancies. Additional shifts were being covered by bank staff and existing care staff.

A comprehensive service development plan is in place for this service. The Plan identified five priority areas, which include having a skilled, compassionate, and committed workforce and improving outcomes for children and young people who access this short breaks service.

In addition, the Registered Manager produces monthly management reports, which include a section on the development of the service. Action plans are reviewed, updated, and added. Examples of the action plans for June 2023 were:

- The development of a quarterly newsletter for parents/carers and a child/young person friendly version through different mediums.
- All staff are to attend trauma-informed and applied therapeutic skills training and embed this into the delivery of care.
- A 'step-down' process to be developed for children and young people where their assessed needs change, to include how this will be communicated in their preferred communication style.
- Further development of communication tools to capture the child's voice.

The Regulation Officer examined the central supervision record and training matrix. Care staff had completed all mandatory training, and monthly supervision was provided.

The induction of new care staff continues to be consistent and of a high standard. Feedback from a staff member who has joined this service since the last inspection provided positive views on their induction experience. As part of new care staff induction, they do not undertake overnight care until they have completed at least six weeks on the rota.

No direct complaints have been made concerning this service. However, the Registered Manager shared that the staff team remains vigilant to the observational feedback of care receivers, especially those with communication barriers. The Registered Manager provided an example of listening to non-verbal communication, resulting in a positive care plan change for one care receiver. This is an area of good practice.

Independent visitors complete monthly quality assurance reports for this service. These reports are comprehensive and detail areas of good practice and service deficits. Importantly, these reports are read by senior and political leaders in the wider organisation and acted upon where necessary.

The Regulation Officer noted that consent is obtained from care receivers (where they have capacity) or parents/carers for the independent visitors to view care receivers' personal information.

The Registered Manager undertakes regular quality assurance activity in this service, for example, reviewing care receivers' files, observing care delivery, and conducting medication audits.

Care staff spoken to as part of this inspection provided positive feedback about working in this service and were complimentary regarding the support and guidance they receive from the Registered Manager.

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>
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This service has a basic framework for the child and young person's guide, however, is modified to meet the individual communication needs of the care receivers who access this service. Information is also provided to parents/carers about this service, with the Registered Manager also planning to develop a parent/carer handbook.

Parents and carers are fully consulted as part of the induction process of new care receivers to this service. The Regulation Officer noted significant parent/carer input into documentation on the care receiver's personal files, for instance, the Short Breaks Support Plan and medication care plan.

Importantly, all essential documentation, including consents and plans, was signed by a parent/carer, and approval was sought from care receivers to agree to their care plan. This is an area of good practice.

Induction to this service for new care receivers is comprehensive and involves parents/carers. This usually takes place over a minimum of four weeks; however, it can be extended due to the care receiver's individual needs. This service also works closely with education professionals and will visit schools to spend time getting to know the care receivers and their needs.

The Regulation Officer observed care being delivered to care receivers. Care staff provided care with dignity, respect, and kindness. Care staff promoted independence and allowed care receivers time to complete a task before intervening with support or waiting to be asked for help by the care receiver. Care staff showed pleasure in care receivers' achievements and demonstrated genuine fondness.

Care staff within this service ensure that the environment where care is delivered is clean, tidy, and fit for purpose. The Regulation Officer noted an attention to detail, reflecting children and young people's preferences and communication styles.

The Regulation Officer noted the short breaks support plan was a comprehensive document that would provide any reader with the necessary information to understand a care receiver's needs and how to meet these needs. However, this document is reviewed as and when required if there is a change in care receiver needs or at least every six months. Keyworkers are responsible for keeping personal files and plans updated.

This service operates a communication book that accompanies children and young people at school or home. This allows educators, parents, and carers to share information with this service. In turn, this service provides feedback on the care receivers' experience, both written and through photographs. This is an area of good practice.

For each short break, care staff produce sessional plans detailing the activities that will be undertaken and the targets the care receiver is working towards. Risk assessments and a checklist feed into these plans to help understand and mitigate any risks related to the chosen activities.

Some care receivers who access this service have specific communication needs. Communication assessments were evident in care receivers' files. Personal communication tools like communication boards or iPads were prominent throughout the home.

The Registered Manager provided examples of communication boards in use in this service and how over time, children and young people's range of communication are improved and, in one particular case, has been life-changing for one care receiver, their family, and school.

Care staff in this service have received specialist communication training, such as Makaton. In addition, the majority of staff are also trained in the National Autistic Society SPELL (Structure, Positive approaches and expectations, Empathy, Low arousal, and Links) framework, which is relevant to the majority of the care receivers who access this service.

Transition planning for young people leaving this service who are transferring to adult services is well planned. Adult support workers initially shadow care staff from this service over several weeks before gradually taking over the care and familiarising the care receiver with the new provision.

A professional consulted during this inspection who has regular contact with the staff and Registered Manager in this service gave the following feedback:

'Each young person is treated as an individual with service tailored to their needs, and staff have good relationships with them. Given some young people's needs and challenges, this is no mean feat.'

'The house manager is also available to me and parents to discuss any concerns and issues are resolved quickly.'

'In summary, I confirm that Eden provides an excellent service with Children at the heart of all they do. All the staff I have observed are committed to the young people in their care, are open and clear with professionals and parents.'

'The home is homely, and every effort is made to support the young people and ensure they are comfortable during their stays.'

'I have worked in complex needs for two and a half years and have six young people attending Eden. During this time, I have only received positive comments regarding the staff, service, and manager at Eden.'

'During home visits, whenever Eden is spoken about, I receive a big smile or a thumbs-up reaction.'

'It [Eden House] is a valuable resource valued by young people, parents, and professionals.'

Parents and Carers consulted as part of this inspection provided the following comments:

'Xxxx absolutely loves going there for his sleepover and looks forward to it each week. The staff are all wonderful, and xxxx likes them all. I am 100% satisfied with the service, and we are always very grateful for the respite it gives our family.'

'The staff we have met are very friendly. Xxxx seems to enjoy their time there and the outings they take them on.'

'The Manager is easy to contact. I am provided with photos and a run-down of what xxxx has been up to while staying at Eden House. So far, we as a family are happy and have no concerns.'

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.

Care staff regularly administer medication to care receivers who access this service. All care staff undertake the Regulated Qualification Framework (RQF) award in the administration of medication, which involves observations and competency sign-off by a qualified professional. In addition, the Registered Manager undertakes competency reviews three times per year.

The Regulation Officer noted regular audit activity of Medication Administration Records and did not identify any medication or administration errors from the records sampled. The Regulation Officer was assured that medication was stored securely and the procedures in place were adequate. The front sheet on each care receiver's file had been improved since the last inspection, with clear guidance on how to reorder medication, what the medicine is, and what any side effects could be. This is an area of good practice.

The Regulation Officer audited the fire precautions and policy and was satisfied that this service undertakes maintenance and testing schedules in line with the Fire Precautions (Jersey) Law 1977. The Regulation Officer noted the following:

- An up-to-date fire certificate was in place.
- Firefighting equipment had been serviced within the last year.
- Care staff had completed fire safety training.
- Testing schedules and fire drills had been conducted at the recommended frequencies detailed in the States of Jersey Fire Precautions Logbook.
- A Personal Emergency Evacuation Plan (PEEP) was in place for each care receiver, and there was evidence of regular review at least every six months.
- Care staff undertake a fire questionnaire as part of their induction.

While the Commission has noted no safeguarding referrals or issues, the Regulation Officer was satisfied that this Service understands its responsibilities regarding safeguarding children and young people who access this service. The Registered Manager provided an example of a potential safeguarding matter and how this was resolved with parents.

This service has a comprehensive policy regarding the Control Of Substances Hazardous to Health (COSHH). As noted in this report, the COSHH policy and associated documentation were easily accessible alongside other policies and procedures in a labelled file.

The Regulation Officer was assured that safe recruitment practice was undertaken in this service. In addition, the Regulation officer was satisfied that all existing care staff have DBS (Disclosure and Barring Service) checks renewed every three years.

The short breaks support plan identifies the like, dislikes, and preferences of care receivers who access this service. This includes food, activities, clothing, and routines. Care receivers communication tools evidenced these preferences.

This service has an 'Eat Safe' five-star rating awarded by the Environmental Health Department of the Government of Jersey. This rating recognises this service as an *'Excellent performer, fully compliant with the law and adopts best practice. Overall, a very high standard of food safety management practices.'*

IMPROVEMENT PLAN

No areas for improvement were 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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