



Jersey Care
Commission

INSPECTION REPORT

01 Children's Home

Care Home Service

3 & 10 August 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 a children's home. It is one of seven Children's Homes operated by the Government of Jersey. The name and address of the home have not been included in this report; this is to preserve the privacy and confidentiality of the children and young people who live there.

The home is a four-bedroom detached bungalow registered to provide residential care for three children and young people. The home has a lounge, dining room, kitchen, conservatory that looks out onto an enclosed rear garden, and a garage. There is one house bathroom and a separate toilet.

The home is close to the beach, and shops and restaurants are only a short walk away. It is on a main bus route from the airport to St Helier. The home is not distinguishable as a residential children's home.

Regulated Activity	Care home
Conditions of Registration	<p><u>Mandatory</u></p> <p>Type of care: Personal care, personal support</p> <p>Category of care: Children and Young people (under 18)</p> <p>Maximum number of care receivers: 3</p> <p>Maximum number in receipt of personal care / support: 3</p> <p>Age range of care receivers: 7 to 18 years</p> <p>Maximum number of care receivers that can be accommodated in the following rooms: 1 to 3, one person per room</p>
Dates of Inspection	3 & 10 August 2023
Times of Inspection	09:00- 13:45 and 11:00-14:00
Type of Inspection	24 hours' notice was given of the inspection, the second day was also announced
Number of areas for improvement	Four
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 care home through the Children, Young People, Education and Skills (CYPES) department. There is a Registered Manager in place.

Since the last inspection, completed on 27 September and 14 October 2022, the Commission received an application on 7 March 2023 from the Registered Provider to vary the conditions of the services registration. This was to reduce the age range from seven to 18 years old. This was reviewed with the Statement of Purpose and approved by the Commission on 7 March 2023.

Since the last inspection, there has been a change of Registered Manager to the home. In March 2023, the service restructured the children's home service; this included staff teams, Registered Managers and children and young people transferring between the homes. This was to accommodate a new children's home and to match the skills and experience of the Registered Managers and staff with the individual needs of the children and young people in the homes.

An updated copy of the service's Statement of Purpose was provided; this reflected the changes to the Registered Manager and the variation in registration to change the age range.

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 findings of this inspection were mostly positive. The Registered Manager and staff members engaged fully in the inspection process. Any requests for information and records were met.

Care receivers and their family members provided positive feedback about the home.

Following the last inspection carried out in September and October 2022, three areas of improvement were identified. All three areas of improvement have been achieved. Four new areas of improvement have been identified from this inspection; these are detailed below:

There needed to be a clear management oversight of staff compliance with mandatory training. The Regulation Officer was not reassured that all staff members were up to date with mandatory and essential training as no training plan was available. The Registered Manager explained that they need administration access to the staff training matrix held centrally by the wider service; this was recognised to be a barrier to the Registered Manager being able to have oversight. This is an area of improvement.

The Standards recommend that staff members who administer medication to children and young people in the home should be trained and competent to do this safely. An accredited Level 3 medication administration training module is recommended. The Registered Manager was unable to evidence which staff members had completed the recommended training. This is an area of improvement.

When administering medication, the Standards recommend that medication administration records (MAR) are used to ensure the safe administration of medication. The prescriber or pharmacist should write the MAR sheets.

Transcribing by any other person should only be in exceptional circumstances, and transcribing guidelines should be followed. Staff members had transcribed the MAR sheets reviewed by the Regulation Officer during the inspection; the information available on the MAR did not follow the transcribing guidelines. This is an area of improvement.

Organisational policies and procedures were not easily accessible to staff members and care receivers. This is an area of improvement.

Recent changes to the staff team have coincided with changes to the care receivers being accommodated in the home. The team benefits from being small and consistent, supporting relationships with the care receivers.

The Registered Manager promotes a child-centred ethos with a focus on providing a family home that is warm, comfortable, and inviting for the care receivers.

The Registered Manager ensures that a supervision model for staff members is followed. Supervision documentation was reviewed, showing evidence that reflective supervision is in line with the Standards for Children Homes.

The supervision is planned, organised, and formally recorded.

The staff team encourages and supports community, social and sporting activities for the home care receivers. This is an area of good practice.

Safety plans and risk assessments were in place for the care receivers; these were found to be comprehensive and had been reviewed regularly.

INSPECTION PROCESS

This inspection was announced with a telephone call to the Registered Manager 24 hours before the first visit; this was to ensure that they would be available to facilitate the inspection. The inspection was completed on 3 and 10 August 2022.

The Children's Homes Care 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 the inspection visit, the information held by the Commission about this service was reviewed. This included any notifications, any changes to the service's Statement of Purpose or variations to the conditions of registration and the previous inspection report.

The Regulation Officer sought the views of the care receivers, staff, the Registered Manager and other professionals who work with the home to support the care receivers.

During the inspection, records, including policies, care records, medication records and risk assessments, were examined. This inspection included a tour of the premises.

At the conclusion of the inspection, the Regulation Officer provided feedback to the Registered Manager.

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

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.

INSPECTION FINDINGS

At the last inspection on 27 September and 14 October, three 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 all improvements had been made. This means there were improvements in the staffing structure, which has enabled the Registered Manager to have two staff members on duty at all times. There remains the need for bank staff to supplement the permanent staff team numbers to cover annual leave and sickness within the team. The home now has a dedicated Registered Manager, and the formal supervision of staff has been taking place regularly.

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.

This service is operated by the Government of Jersey through the Children, Young People, Education and Skills (CYPES) department. The Children's Social Care Service holds a service development plan, and this is available to staff and the general public.

At the time of the inspection, the team consisted of eleven permanent staff members and the Registered Manager. The service benefits from using bank staff that work in other parts of the service and therefore, need limited induction to the home. There have been changes in the staff team with transfers in and out; this coincided with the transfer of the previous care receivers in the home. There was consideration given to the skills and experience of the care staff to best match the admission of new care receivers to the home.

Safe recruitment checks are managed by the Government of Jersey (GoJ) Human Resource (HR) department. The Registered Manager works collectively with the other Managers within the wider service to coordinate recruitment for the Children's Homes collectively. The Registered Managers are included in the shortlisting and interview processes. Successful candidates are matched to one of the Children's Homes depending on their qualifications, experience and the skill mix within each home. The Registered Manager works closely with the HR department to keep updated throughout the recruitment and induction process. Disclosure and Barring Service (DBS) checks are completed, and the certificates are shared with the Registered Manager and held within the HR department. The Regulation Officer was satisfied that all staff had up-to-date DBS checks in place, evidenced in a checklist made available by the Registered Manager.

The Registered Manager explained that policies and procedures and procedures were available for the service and that these are held centrally within the CYPES service. The Registered Manager reported that relevant policies were difficult to find within the electronic system, making them difficult to access when needed. The Regulation Officer suggested that a small group of the most relevant policies be made available in a file within the home so that staff members had easy access. This is an area of improvement.

New staff members complete a scheduled induction programme with a competency checklist. During the induction, staff remain supernumerary and are supervised until competencies are complete. Mandatory training is completed during the induction period. If the staff members are new to working for the GoJ, they will have a six-month probationary period where review meetings keep progress on track.

Monthly quality assurance reports are completed by the independent visitor for this service. Reports are provided to the Commission; they are found to be comprehensive and useful feedback sources. Suggestions regarding good practice and improvements are provided to the Registered Manager and Provider, and the reports refer to the Children's Home Standards throughout.

An overview of staff training was requested as part of the inspection; the Registered Manager explained that they did not have a recorded training matrix as this was held centrally by the training and development team within CYPES. The Registered Manager reported that as they were recruited as an agency staff member, they did not have access and, therefore, no oversight of staff training. The Registered Manager was unable to ensure that the staff team complied with mandatory and recognised specialist training for the role. This is an area of improvement.

The formal supervision of staff has improved. The Registered Manager and staff confirmed that they receive a minimum of monthly supervision and that this is planned, organised, and formally recorded. The previous supervision discussion is reviewed, considering any actions or outcomes.

The home's Statement of Purpose was reviewed during the inspection process. It was comprehensive and captures the home's philosophy, aims and function.

Part of the home's ethos is to promote good communication with care receiver's family members. The Registered Manager spoke of having 'good relationships' with some of the care receiver's immediate family members. This perspective was supported by a testimony from a family member who confirmed that they received regular updates regarding the care receiver's day-to-day care, that they were able to co-ordinate contact directly with the staff team and that they felt they had a good working relationship with the home.

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 care records of each care receiver were reviewed as part of the inspection; they included a range of documentation that evidenced the care delivery. Contained within these records were risk assessments, personal plans, care plans, health appointments, records of meetings and daily logs. The care plans were comprehensive, highlighted likes and dislikes and care needs and were reflective of the personalities of the care receivers.

The home is comfortable and decorated to a high standard. During the inspection, the communal areas were being used by the care receivers and carers; the atmosphere felt homely and natural. Interactions between staff and the care receivers were warm and relaxed; it was clear that the care receivers were familiar and comfortable with their carers'.

The house bathroom continues to require refurbishment; this was highlighted in the last inspection. The bathroom has a problem with mould, and the bathroom suite, including fixtures and fittings, needs to be updated. The Registered Manager discussed the plans to refurbish the bathroom; this plan has been outstanding for over a year. Reassurance was given that a contractor had been identified to complete the work and would be completed by the end of the year.

The care receivers can choose how their rooms are decorated; each room was bespoke and demonstrated that the care receivers had personalised their own space.

The staff team spent time supporting the care receivers to explore and understand their identities by introducing them to creating a family tree. This has assisted some of the care receivers in thinking about their personal history and family dynamics which has helped grow their understanding of the importance of their self-identity.

The Registered Manager and staff team recognise the importance of maintaining positive family relationships for the care receivers. Family contact is promoted and facilitated by the team. Proactive communication with the multi-agency team and family members is evident to ensure that family time regularly occurs with the care receivers and some of their family members.

The care receivers appeared relaxed and content and gave positive feedback about living in the home and the care they receive. One care receiver reported that their carers let them know what their day looks like, which activities they will be attending after school and make sure they are on time for all planned activities.

Other feedback from the care receivers was that they felt safe and well cared for. One care receiver reported that the “*food was nice*”, and that the “*carers are nice*”.

The Registered Manager demonstrated that they advocate for the care receivers’ rights to have family time when the wider system cannot always support this (on a regular basis). This was evidenced through the home offering to enable family time for the care receivers and family members outside of the hours that Children’s Services was able to support. The Registered Manager ensures that family members essential to the care receivers are provided with weekly updates regarding their care, support, and well-being. They are made aware of appointments and invited to attend important reviews for the care receivers.

The staff members and Registered Manager promote advocacy for the care receivers from independent agencies such as Barnardo’s. This is an area of good practice.

The Regulation Officer observed child centred care through positive nurturing relationships with the carers and care receivers.

Family members were consulted as part of this inspection. Their feedback was consistently positive, with a few comments detailed below:

“xxx is excellent, and some of the carers are exceptional.”

“They are an amazing team; they always provide updates and support weekend contact.”

“The staff keep to timescales when supporting contact, and they are flexible if I need them to be.”

Other professionals working closely with the care receivers and the home provided the following comments:

“I was impressed by the knowledge that the staff had for the care receivers; they were able to share what was going well for them.”

“Staff were able to share the strengths and worries of the care receivers during a review meeting.”

“It is clear to see that the staff have a good relationship with the care receivers and know them well.”

Choice and safety

<p>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.</p>

The Registered Manager could not clearly determine which staff members were fully compliant with the safe medication practices recommended in the Children’s Home Standards. This includes completion of the level 3 medication training and competency framework. The Standards state that all staff administering medications in the home require training to ensure that medications are administered safely to the

care receivers. A training needs analysis is required for this area of practice. This is an area of improvement.

The Regulation Officer reviewed a medication administration record (MAR) for a care receiver that required daily medication administration. The Standards recommend that all medicines administered within the home must be written on a MAR and that the prescriber or pharmacist must write this. Transcribing by anyone should only be in exceptional circumstances, and transcribing guidelines should be followed. The MAR seen had been transcribed by care staff; there were several errors regarding the transcribing, which made it clear that the transcribing guidelines needed to be followed. This is an area of improvement.

Care receivers are included in menu planning and choice with snacks and drinks. Staff promote and encourage involvement in preparing and cooking meals with consideration given to the care receiver's age and expected abilities.

The care receivers have weekly pictorial planners which detail school schedules, planned activities, appointments, family contact time and downtime. This supports the care receivers to maintain their routines and pre-plan their day. This, in turn, promotes their well-being as the structure and routine provide stability.

There was evidence that fire safety procedures and standards were followed and adhered to within the home. The Regulation Officer reviewed fire procedures, an up-to-date fire certificate was in place, fire drills had been completed, and there was evidence of annual fire equipment servicing. This is an area of good practice.

Notifiable events since the last inspection had been made promptly, the home keeps a record of notifications sent to the Commission. There had been a significant reduction in notifications in the earlier part of the year; this had coincided with the change in care receivers admitted to the home and a transition of the previous care receivers to an alternative care provision. The Regulation Officer was satisfied that notifications provided clear actions and outcomes from the events described. This included multi-agency meetings and reviews of risk assessments.

Care receiver records were reviewed during the inspection. Individual safety plans and risk assessments were available; they were comprehensive and involved the multi-agency team around the care receivers.

IMPROVEMENT PLAN

There were four 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: Standard 3.10 & 3.12</p> <p>To be completed by: Three months from the inspection date 10 August 2023</p>	<p>Management oversight of staff training compliance:</p> <p>There was no clear management oversight of staff compliance with mandatory training, a training matrix was not available to review during the inspection.</p> <p>There needs to be a system in place that gives management oversight of training compliance within the team.</p>
	<p>Response of Registered Provider:</p> <p>Training Matrix is now set up and in the process of being populated with staff training records.</p>

<p>Area for Improvement 2</p> <p>Ref: Standard 11.7 & 11.8</p> <p>To be completed by: Three months from the inspection date 10 August 2023</p>	<p>Medication administration training:</p> <p>The Standards state that administration of medicines should be undertaken by trained and competent care/support staff who have completed an accredited level 3 medication administration training module.</p> <p>The Manager was unable to give clear understanding of which staff members had completed the training.</p> <p>Care receivers in the home require medication to be administered. All staff members who are involved in</p>
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	<p>the administration and management of medications within the home need to complete the accredited medication training and competencies.</p>
	<p>Response of Registered Provider:</p> <p>There are currently 3 members of staff qualified to level 3 standard to administer medication. The remainder of the staff team are either attending or are booked in to attend the training in December, this will then be followed by practical assessments to ensure that they meet the required level of training.</p>

<p>Area for Improvement 3</p> <p>Ref: Standard 11.7</p> <p>To be completed by: Three months from the inspection date 10 August 2023</p>	<p>Safe use of medication administration records (MAR):</p> <p>The Standards require that administration of any medication to the care receivers is recorded and signed on a medication administration record. The MAR must be written by the prescriber or pharmacist and transcribing should only be permitted in exceptional circumstances. The service should be requesting MAR sheets from the pharmacy that provides the medication and should only be transcribing when this is not available. If having to transcribe, the services guidance and policy for transcribing should be followed.</p>
	<p>Response of Registered Provider:</p> <p>A pharmacy has been identified that will provide MAR sheets to the home. This will be fully in place in January 2024. Transcribing will follow current policy and will only be used in exceptional circumstances once the MAR sheets are in place.</p>

<p>Area for Improvement 4</p> <p>Ref: Standard 1.3 & 1.5</p>	<p>Policies and Procedures:</p> <p>Organisational policies and procedures to be more accessible to staff, care receivers and their families.</p>
<p>To be completed by:</p> <p>Three months from the inspection date 10 August 2023</p>	<p>Response of Registered Provider:</p> <p>The relevant organisational policies are all available to staff on the Children’s Service Sharepoint and the Government website. The specific policies required by the JCC have been printed and are available to staff, care receivers and their families within the home. The Registered Managers Group is working on establishing a Residential Childcare Services Procedures Folder and Staff Handbook to support this recommendation.</p>

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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