



**Jersey Care  
Commission**

## **Summary Report**

**Autism Jersey Childrens Services**

**Home Care Service**

**Century Buildings  
Patriotic Place  
St Helier  
JE2 3AF**

**26 July and 1 August 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 Registered Manager and staff team demonstrated a positive approach to the support they provide. There is a clear focus on ensuring that care receivers' wishes and preferences are at the centre of all decisions.

Families were happy with the quality of the care and support provided, describing staff as knowledgeable and responsive to their relative's needs. It was also noted that there is a focus on promoting choice and independence.

The lack of staffing challenges the service and impacts service delivery. Relatives and professionals also noted this. While the service has implemented some initiatives to respond to current deficits, further work is required to ensure that the volume of packages offered is equivalent to the support hours available.

On-call arrangements are impacted by the staffing shortages, which has meant that on-call team members have to provide shift cover in addition to their regular working hours. This has been prolonged, and the negative impacts were raised with the Regulation Officer as a concern.

Training opportunities have greatly improved since the last inspection and staff reported this a real strength of the organisation. Training records are well maintained, with appropriate alerts when updates are required. Work is ongoing in sourcing specialist autism training for the service.

The service was found to have suitable governance arrangements in place, which are appropriate to the needs, size and complexity of the service. However, reviewing current structures might be required as the service evolves.

A project is underway to implement a new electronic care planning system. The service wants to take time to ensure that the system is tailored to meet the specific needs of Autism Jersey. In the meantime, existing care planning systems must be updated and reviewed regularly.

There are seven areas of improvement identified as a result of this inspection.

## 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 3.11, appendix 6</p> <p><b>To be completed by:</b> 6 months from the date of inspection (1 February 2024).</p>	<p>Additional specialist training is required for support workers who support people living with autism.</p> <hr/> <p><b>Response of Registered Provider:</b></p> <p>Autism specialist training has been delivered to all staff pre-2023. We currently have 7 new starters in 2023 who require the training and 5 sessions have been booked throughout 2024 to ensure the need of those staff members and any other new are met.</p> <p>We have and will continue to seek additional training in areas such as Pathological Demand Avoidance where staff are supporting an individual with more than one prevalent diagnosis.</p>
<p><b>Area for Improvement 2</b></p> <p><b>Ref:</b> Standard 1.2, 1.3</p> <p><b>To be completed by:</b> 5 months from the date of inspection (1 January 2024).</p>	<p>Welcome packs/agreements should be made available to care receivers and / or their families, setting out the parameters of the support being provided and detailing the responsibilities of Autism Jersey, as well as the responsibilities of care receivers / families.</p> <hr/> <p><b>Response of Registered Provider:</b></p> <p>Work has begun to ensure that these are available to supported individuals &amp; their families/ carers/ guardians where applicable.</p>
<p><b>Area for Improvement 3</b></p> <p><b>Ref:</b> Standard 3.9, 8.2</p> <p><b>To be completed by:</b> with immediate effect.</p>	<p>On-Call arrangements need to be urgently reviewed to ensure that staff do not undertake shift work while on-call.</p> <hr/> <p><b>Response of Registered Provider:</b></p> <p>On Call regular shift cover has been reviewed and a plan put in place to steadily decrease this in order to minimise the impact on supported individuals with this support ending on the 3<sup>rd</sup> December.</p>

<p><b>Area for Improvement 4</b></p> <p><b>Ref:</b> Standard 3.9, 9.3</p> <p><b>To be completed by:</b> 3 months from the date of inspection (1 November 2023).</p>	<p>Staffing levels are an area of concern as the service is unable to consistently meet the requirements of packages of support it has been commissioned to provide. The service needs to review the volume of packages provided to ensure that it is equivalent to the support hours available.</p> <p><b>Response of Registered Provider:</b></p> <p>A full operational review of support took place in August, with gaps in support significantly reduced as an outcome.</p> <p>This has been added to our Risk Register and the RAG status will continue to be monitored for individual support and service needs.</p>
<p><b>Area for Improvement 5</b></p> <p><b>Ref:</b> Standard 2.5, 2.6</p> <p><b>To be completed by:</b> with immediate effect.</p>	<p>Up to date care plans and risk assessments need to be available to staff at all times which have clear implementation and review dates. Any supporting documentation which staff need to be aware of should be referenced in care plans and risk assessments.</p> <p><b>Response of Registered Provider:</b></p> <p>Risk Assessments and Care plans reviewed and an index of these (with review date) will be added to individuals records to highlight, and action, any missing areas at this time.</p>
<p><b>Area for Improvement 6</b></p> <p><b>Ref:</b> Standard 7.2</p> <p><b>To be completed by:</b> 3 months from the date of inspection (1 November 2023).</p>	<p>Complaints policy and procedures must be easily accessible to care receivers and their families, with evidence that these are regularly updated.</p> <p><b>Response of Registered Provider:</b></p> <p>Complaints policy updated and added to AJ website together with complaints form. This will also be included in the welcome pack in each individual/ parent/ guardians preferred format.</p>
<p><b>Area for Improvement 7</b></p> <p><b>Ref:</b> Standard 2.4, 2.5, 2.6, 9.3</p>	<p>The service must have clear risk escalation processes in place which address difficulties with the operational delivery of care/support, to ensure that they are effectively communicated to senior managers and acted upon appropriately.</p>

**To be completed by:** with immediate effect

**Response of Registered Provider:**

This links into the response to area 3 above. A clear, and actionable, risk escalation process is being planned and produced by Senior Management at this time.

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