



**Jersey Care  
Commission**

## **Summary Report**

**04 Children's Home**

**Care Home Service**

**Liberté House**

**19 – 23 La Motte Street  
St. Helier JE2 4SY**

**22 March 2024**

## **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.

Interim management arrangements were in place; however, due to on-going management vacancies in the wider service, there had been limited management oversight and support to the staff team, who had been experiencing multiple challenges. This has been strengthened since the inspection; however, a more permanent solution is required.

Staff recruitment and retention remain consistent issues for this service. The Registered Provider must address this issue to provide consistency for care receivers and enable this service to have a stable staff team.

Formal reflective staff supervision has not been consistently completed since January 2024. In addition, individual staff debriefs, and group supervision have not occurred following significant events that would promote a continuous learning culture and staff wellbeing.

Training records indicate that not all staff have completed mandatory training per the Children's Homes Standards. In addition, staff need to undertake refresher training regarding the primary de-escalation and intervention model, which is critical in meeting current needs within the home. The staff team would also benefit from trauma-informed approach training.

Positively, the regulation officers noted that extensive work had been undertaken to develop a comprehensive suite of policies for Children's Homes that are directly linked to the Standards. However, these needed to be completed and were not formally ratified or operational. There were instances where best practice was not followed, for example, staffing ratios when supporting care receivers on holiday or inducting a care receiver to a new home.

Risk assessment procedures require strengthening, alongside the Registered Manager's capacity to refuse a prospective care receiver based on the compatibility with other care receivers in the home.

Listening to the 'voice of the child' is a crucial element of providing care to children and young people. This and advocacy should ensure that care receivers' voices are heard and acted upon. Where care receivers have refused advocacy, this should be revisited when major care planning decisions are being made concerning them.

In respect of the staff team, the regulation officers noted they carried out their role with dedication and compassion, where the safeguarding and the promotion of children and young people's rights was a priority and was clearly evident. In addition, their resilience and professionalism should be commended.

Children and young people have a right to live in accommodation that is safe, accessible, and meets their needs with a well-trained, motivated, stable staff team that is well-supported to deliver high-quality care. The regulation officers were not assured that care receivers and care staff were adequately safeguarded and supported by this service.

There are 12 areas for improvement as an outcome of this inspection.

## IMPROVEMENT PLAN

There were 12 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 10.7</p> <p><b>To be completed by:</b> Immediate.</p>	<p>The Registered Provider must ensure that the notifications made to the Commission include sufficient details when there is significant risk to care receivers and staff.</p>
<p><b>To be completed by:</b> Immediate.</p>	<p><b>Response of Registered Provider:</b></p> <p>The Registered Manager has since addressed this situation and will ensure that sufficient details (when there is significant risk to care receivers and staff) are documented in notifications.</p> <p>Service Managers comments: With the arrival of a second Service Lead management oversight capacity will be evidenced in the regular dip sampling around Notifications to ensure accuracy and quality.</p>
<p><b>Area for Improvement 2</b></p> <p><b>Ref:</b> Standard 3.7</p> <p><b>To be completed by</b> 22 September 2024, six months from the date of inspection.</p>	<p>The Registered Provider must ensure the development of a comprehensive recruitment and retention strategy for care staff, which should encompass a plan for the recruitment of Registered Managers.</p>
<p><b>To be completed by</b> 22 September 2024, six months from the date of inspection.</p>	<p><b>Response of Registered Provider:</b></p> <p>It is recognised and acknowledged that staffing resource constraints have impacted the wider service, including management capacity. Residential managers are working closely with the Senior Leadership Team to ensure that comprehensive recruitment is ongoing, to ensure that the current</p>

	<p>situation is improving. The Registered Manager will ensure that ongoing recruitment is in the process for full time and bank staff roles, and it is anticipated that this will enhance the quality of the service provided and permit a staffing structure consistent with the home's Statement of Purpose.</p> <p>Service Managers comments: Analysis of recruitment and retention within the service points towards pay and conditions being a barrier to enticing applicants.</p> <p>A workstream is underway looking at this issue looking to develop job descriptions and person specifications which recognise the specialism of residential childcare. This recognition will bring with it enhanced training in such areas as therapeutic intervention and subsequently improved salaries and career structures.</p>
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<p><b>Area for Improvement 3</b></p> <p><b>Ref:</b> Standard 3.7</p> <p><b>To be completed by:</b> Immediate.</p>	<p>The Registered Provider must ensure that e-rostering is completed monthly to enable oversight of the hours worked by care staff across the wider residential service.</p> <hr/> <p><b>Response of Registered Provider:</b> The Registered Manager will ensure that the e-rostering is reviewed and updated regularly, with specific consideration given to the expectations of the hours worked by staff across the wider service which will provide clarity and oversight.</p>
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	<p><b>Service Manager Response:</b></p> <p>Concerns about staff being overworked and being allowed to work excessive overtime have resulted in the necessity to monitor staff working across the sector more closely utilising the e-rostering system. This monitoring has resulted in Registered Managers and above being more confident that we are exercising our duty of care towards staff.</p>
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<p><b>Area for Improvement 4</b></p> <p><b>Ref:</b> Standard 10.10</p> <p><b>To be completed by</b> 22 June 2024, three months from the date of inspection.</p>	<p>The Registered Provider must ensure that a review of policy regarding supporting care receivers on holiday is undertaken to specify minimum staffing ratios to ensure care receiver and care staff safety and wellbeing.</p>
	<p><b>Response of Registered Provider:</b></p> <p>It is recognised and acknowledged that the Service require a broader review of policy, including supporting care receivers on holiday, which will be reviewed to ensure best practice is in place. Safety of the care receivers and staff is always the priority and reviewing this policy will be able implementing best practice.</p>

<p><b>Area for Improvement 5</b></p> <p>Ref: Standard 5.1</p> <p>To be completed by 22 May 2024, two months from the date of inspection.</p>	<p>The Registered Provider must ensure that impact risk assessments are completed before placing care receivers in a children's home. Where the decision of a Registered Manager is overridden, the decision maker must document the rationale for this decision and the steps taken to mitigate identified risks.</p>
	<p>Impact risk assessments are utilised as a tool to assess compatibility of young people within a home, among other things. Whilst endeavours are always made to work in collaboration with Registered Managers, inevitably there are occasions where decisions need to be made that deviate from recommendation and in these instances steps will always be taken by the provider to mitigate identified risk and documented as such.</p> <p>Service Manager's comments: (Also see below response to Area for Improvement 9)</p> <p>As part of the referral process and prior to any decision being made by the Registered Manager an Impact Risk Assessment (IMRA) is compiled and then shared by the Registered Manager with the Service Manager (Residential) and the Team Manager and Social Worker making the referral. The home manager has a 'can do' position to any referral so the IMRA will usually be used for the Registered Manager to indicate what extra resources the home will need, to care safely for the child, other children, and staff, if referral is accepted.</p> <p>This methodology means that the Registered Manager's thinking is evidenced and open to appropriate challenge. If there is a refusal to provide</p>

	<p>a placement, then the argument for doing so has been scrutinised and proved is sound. We have not had any overruling of a Registered Manager's judgement in the ensuing months.</p>
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<p><b>Area for Improvement 6</b></p> <p><b>Ref:</b> Standard 10.5</p> <p><b>To be completed by</b> 22 May 2024, two months from the date of inspection.</p>	<p>The Registered Provider must ensure that the internal escalation procedure for staff is reviewed, strengthened, and embedded where care staff wish to share concerns or elevated risks in the home.</p>
	<p><b>Response of Registered Provider:</b></p> <p>The escalation procedure will be strengthened and embedded. Regular supervision and team meetings are now in place where concerns can be raised and the escalation process embedded, alongside signposting to the complaints policy and whistleblowing policy that all staff have access to.</p> <p><b>Service Manager's comments:</b></p> <p>I understand why the staff at VDL might feel their voices have not been heard in decisions that affect their home. I think part of the gap in communication both up the line and back down has been the reduced management capacity at Registered Manager and Service Lead level. This capacity has now been strengthened and with communication systems referred to above being facilitated, feedback loops are more effective and efficient.</p>



<p><b>Area for Improvement 7</b></p> <p><b>Ref:</b> Standard 11.4</p> <p><b>To be completed by</b> 22 September 2024, six months from the date of inspection.</p>	<p>The Registered Provider must ensure that all care staff have completed mandatory training as per the Children's Home standards. In addition, care staff must have completed or refreshed MAYBO training and have access to trauma-informed approach training.</p>
	<p><b>Response of Registered Provider:</b></p> <p>A detailed training matrix is being compiled by the Registered Manager of the home and this will assist in identifying mandatory training requirements for the staff team. Time will be afforded to staff in order to attend and complete this training in line with the appropriate timeframes. The Registered Manager worked closely with a MAYBO trainer and a refresher in person was delivered in April to the team. Trauma informed approach training is being organised in conjunction with the training and development team for all staff.</p> <p><b>Service Manager's Comments:</b></p> <p>There is a workstream within the development programme which is aimed at strengthening the psychological offer to children and staff in residential. Part of that programme will be to introduce some specialist training to augment the training already being offered. Of course, we must first ensure all basic and mandatory training is completed by all staff.</p>

<p><b>Area for Improvement 8</b></p> <p><b>Ref:</b> Standard 11.6</p> <p><b>To be completed by 22</b> June 2024, three months from the date of inspection.</p>	<p>The Registered Provider must ensure that there is therapeutic oversight and input for children in residential care and that care plans reflect therapeutic trauma informed approaches.</p> <hr/> <p><b>Response of Registered Provider:</b></p> <p>The model of trauma informed care is being reviewed and will inform the young people’s care plans and trauma informed approach. The links with CAMHS and Children’s Social Care Service psychologist will be strengthened.</p> <p>Service Manager’s comments: (see comments relating to Area for improvement 7).</p>
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<p><b>Area for Improvement 9</b></p> <p><b>Ref:</b> Standard 5.3</p> <p><b>To be completed by 22</b> May 2024, two months from the date of inspection.</p>	<p>The Registered Provider must ensure that the transition planning procedure is reviewed and strengthened when care receivers are introduced to a children's residential home. This procedure should prioritise promoting listening to care receivers' views, wishes, and preferences.</p> <hr/> <p><b>Response of Registered Provider:</b></p> <p>It is recognised and acknowledged importance of reviewing transition and planning procedure to ensure that care receivers wishes, views and preferences are respected to able promote improve quality of the service.</p> <p>Service Managers comments: The transition planning procedure has already been strengthened in the short term by Senior Managers reiterating their commitment to Best Practice when introducing a young person into a home.</p>
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This commitment has been communicated out from the Senior Management Team via service managers and service leads and to social work team managers, social workers, registered managers, and residential childcare officers.

There is acceptance that any referral from the social work team must go via the Service Manager of the residential service usually via the Placement and Resource Panel. All referrals will go to the assigned Registered Manager who will engage with the referring social worker to assure themselves that the needs of the child referred are a match to the Statement of Purpose of the home.

It is accepted that the Registered Manager must be the person who exercises judgement on whether a place can be offered or not. Fundamental to that judgement is that the offer is informed by the views of young people residing in the home, the child referred, the families and professionals, social workers and IROs and any other professional who might have a view. Other information will be gleaned from risk assessments etc.

Since February no child has been placed without going through this process. Further strengthening of the process will be provided when the new policy and procedure provided by the Tri-x suite comes into force in July.

<p><b>Area for Improvement 10</b></p> <p><b>Ref:</b> Standard 6.4</p> <p><b>To be completed by:</b> Immediate.</p>	<p>The Registered Provider must ensure that the offer of advocacy services to care receivers is revisited (if they have previously refused this support) when major care planning decisions are being made concerning them.</p>
	<p><b>Response of Registered Provider:</b></p> <p>The Registered Manager will ensure that the offer of advocacy services is given specific consideration to be able improve outcomes for care receivers.</p> <p>Service Manager's comments:</p> <p>I will ask service lead for this home to engage our advocacy service to discover what the barriers are to utilising this service and action a plan following that analysis.</p>

<p><b>Area for Improvement 11</b></p> <p><b>Ref:</b> Standard 2.7</p> <p><b>To be completed by:</b> Immediate.</p>	<p>The Registered Provider must ensure that care staff are provided with opportunities for debriefs and group supervision led by a manager following significant events that may impact staff welfare and promote a continuous learning culture.</p>
	<p><b>Response of Registered Provider:</b></p> <p>Debriefs and group supervisions has been prioritised and are to be implemented immediately.</p> <p>Service Manager's comments:</p> <p>With the 2<sup>nd</sup> service lead now in post the 10 Homes can be equally divided between the two post holders. This increase capacity will increase support to Registered Managers, facilitating time and energy for debriefs etc.</p>

<p><b>Area for Improvement 12</b></p> <p><b>Ref:</b> Standard 3.11</p> <p><b>To be completed by:</b> Immediate.</p>	<p>The Registered Provider must ensure that formal reflective supervision is provided to care staff every four weeks as per the Children’s Homes Standards.</p> <p><b>Response of Registered Provider:</b></p> <p>It is recognised and acknowledged that staffing resource constraints have impacted opportunities to complete monthly supervisions in the normal format.</p> <p>The Registered Manager has since addressed this situation and will ensure that all members of the staff team have regular supervision moving forward.</p> <p>Service Manager’s comments: With the 2<sup>nd</sup> Service Lead now in post the 10 Homes can be equally divided between the two post holders. This increase capacity will increase support to Registered Managers facilitating time and energy for debriefs etc.</p>
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The full report can be accessed from [here](#).