



Jersey Care
Commission

INSPECTION REPORT

03 Children's Home

Care Home Service

6 and 13 June 2024

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 service. The name and address of the home has not been included in this report to preserve the privacy and confidentiality of the children and young people who live there.

The service is operated in a two-storey building with four bedrooms, a large kitchen/diner and two lounge areas. The service is registered to provide residential care for two children and young people. The service is well located with access to shops, cafes, and good transport links.

Regulated Activity	Care Home Service
Mandatory Conditions of Registration	Type of care: Personal care and personal support Category of care: Children and Young People (0-18) Maximum number of care receivers in receipt of personal care, personal support: two

	Age range of care receivers:10-18 years
Discretionary Condition of Registration	The Registered Manager must obtain a Level 5 Diploma in Leadership in Health and Social Care by 24 October 2026
Dates of Inspection	6 and 13 June 2024
Times of Inspection	10:10-15:20 and 09:30-11:35
Type of Inspection	Announced
Number of areas for improvement	One
Number of care receivers using the service on the day of the inspection	Two

The Care Home service is operated by the Government of Jersey through the Children, Young People, Education and Skills (CYPES) department, and there is a Registered Manager in place.

The discretionary condition on the service's registration was discussed, and the Registered Manager confirmed that they had commenced their Level 5 and expected to complete within the given timeframe.

Since the last inspection on 2 August 2023, the Commission received an application in July 2023 from the Registered Provider to vary a condition on the service's registration. The variation request was to increase the provision of care from two to three care receivers and decrease the age range of care receivers to 10-18 years. This proposal was approved by the Commission on 13 July 2023 and the register updated.

This variation was discussed at inspection and the increase from two to three care receivers was no longer required. Therefore, the Registered Manager formally notified the Commission that this variation was no longer in place and the register was updated.

The Commission received an updated copy of the service's Statement of Purpose prior to the inspection, this reflected the current bed state.

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.

Overall, the findings from this inspection were positive. The Registered Manager and staff actively engaged with the inspection process and reacted quickly to requests for information or recommendations made by the regulation officers.

A real strength of this home is the child-centred care provided by the Registered Manager and a staff team that is supportive, respectful, and calm in their care and support delivery. The regulation officers were able to observe the excellent relationships that the staff team had with the children. Good working partnerships were also identified with the children's parents and other agencies. The children had access to activities which reflected their interests and were age-appropriate.

There was evidence of safety plans and risk assessments to ensure the safety of the children and staff within the home. There was also evidence of appropriate health and safety checks and quality governance being in place. Policies were found to be non-service-specific and in need of review; this is an area for improvement.

The Registered Manager had achieved stability with a core staff team aided by bank staff and had recognised staff training and development as a priority in 2024. The staff described a good team and being well supported by the Registered Manager.

There was good evidence of collaboration with other agencies, such as education, to ensure the best outcomes for the children.

Children are provided with opportunities to access advocacy, and there are examples of the child's voice within the home and care plans. Children were observed chatting easily with staff and with good humour during both inspection visits.

INSPECTION PROCESS

This inspection was announced and was completed on 6 and 13 June 2024. Notice of the inspection visit was given to the Registered Manager two days before the visit. This was to ensure that the Registered Manager would be available during the visit. Two regulation officers attended the first inspection visit and on the 13 June 2024 one Regulation Officer returned to speak with the children and staff on duty.

The Children's Home Care Standards were referenced throughout the inspection.¹

This inspection focussed on the following lines of enquiry:

- **Is the service safe**
- **Is the service effective and responsive**
- **Is the service caring**
- **Is the service well-led**

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

The Regulation Officer gathered feedback from two care receivers and this contact was face-to-face. They also had discussions with the service's management and two staff members. Additionally, feedback was provided by one professional external to the service.

As part of the inspection process, records including policies, care records, incidents and maintenance logs were examined.

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

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

INSPECTION FINDINGS

The last focused inspection on 2 August 2023 was to review the five areas for improvement identified from the inspection in April 2023. At the focused inspection, no areas for improvement were identified.

Is the Service Safe?

Emphasising the importance of creating a safe environment so care receivers are protected from avoidable harm, with a focus on policies and procedures.

There was evidence of risk assessments and procedures to maintain the safety of care receivers and staff within the home. For example, an incident logbook documented regular and appropriate entries (such as safeguarding).

In addition, all missing episodes and resulting actions are recorded. The regulation officers were assured of appropriate and timely missing notifications to the Commission as these were checked with the incident log. There is a proactive response when children go missing or are absent from the home. Direct work is completed with children after these episodes, respecting the right time to do this and a 'no blame' culture. The home had an up-to-date missing policy that could be referenced quickly. The staff also attend multi-agency missing meetings every Tuesday.

Staff complete daily checklists (morning and afternoon) to ensure the safe running of the home, including infection control and health and safety checks. For example, fridge and freezer temperatures are checked twice a day. The maintenance log was also reviewed and found to be up to date with appropriate entries.

There was a folder containing policies and procedures that the Registered Manager had collated. However, it was clear that most of these were not fit for purpose and not entirely relevant to a children's residential home.

This does not reflect on the Registered Manager and staff, as they are expected to work with the policies which are made available to them. However, the Provider needs to ensure that bespoke, service-specific policies are available, and this will be an area for improvement.

The regulation officers completed a medication review as part of the inspection process. Medications were stored in line with the Standards, and there were appropriate signatures and running totals on the medication administration charts (MAR). Staff have been transcribing the MAR charts without the appropriate guidance; this was done electronically but without the required two signatures and the accompanying copy of the most up-to-date prescription. After the first visit, the Regulation Officer sent the community transcribing guidance to the Registered Manager. It was positive to note that by the second visit, the Registered Manager had arranged for a local chemist to supply the MAR charts so that no transcribing was required, the records had been appropriately signed, and copies of the prescriptions had been obtained and filed.

Two staff members have the required Level 3 medication management training, with the remaining staff booked for the course in September 2024. All staff have completed the 'Medication Awareness' online training course. Staff carry out medication counts twice a day. Due to the number of staff awaiting training, the Registered Manager was asked what other measures are in place to ensure safety and competency. Any medication given is always administered and signed for by two staff. Competency assessments occur during staff induction and annually, and reassessment is performed following medication errors. The regulation officers were satisfied that adequate measures were in place until the remainder of the staff completed their training.

The fire safety checks and procedures were also in order. All testing (alarms, emergency lighting, and self-closing doors) was completed within the recommended timescales. Fire drills have taken place regularly (three since April 2024). The fire service's annual inspection was recently completed (31 May 2024), and equipment servicing occurred on 17 May 2024. The notice board in the office noted fire safety guidance and evacuation procedures.

A children's guide is in place and is appropriate to the needs of the children in this home.

Is the Service Effective and Responsive?

Assessing the organisation of the service so that care receiver's needs are respected and met.
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There was evidence that the staff team and Registered Manager knew the children extremely well. The Registered Manager described a good partnership working with the children's parents, education, and other health professionals, such as the educational psychologist.

The regulation officers observed staff interacting with the children in a warm, calm, and respectful manner. The needs of the children were prioritised over the regulation officers' visit. The children chatted easily with staff and displayed good humour in their interactions, but there was also clear evidence of boundaries.

Parents are included in decision-making regarding their children and are regularly updated regarding their children's achievements and challenges.

The home works closely with education to enhance outcomes for children and increase attendance. On both visits to the home, the Registered Manager demonstrated good communication with the schools. Transitions are managed well, such as transitioning from primary to secondary school. Regular meetings are held to ensure transitions are successful, and the Registered Manager gave some examples of the creative work that was being done to enhance positive relationships with the child's peers prior to the transition. This is an example of good practice.

There was also evidence of access to advocacy and the voice of the child being listened to within the home. An example of the children's voice is that they expressed a wish not to have waking-night staff in the home. The staff team and Registered Manager are currently respecting this. In addition, the feedback from the Registered Manager regarding the peer mentoring service was positive and provided good outcomes for children.

There is currently an all-female staff team; however, active thought has been given to introducing positive male role models within the home.

The Registered Manager explained that the children have an incentive chart where, for example, settling at night can earn extra incentives in addition to their weekly pocket money. The incentive program promotes positive behaviour, routine, and structure, and the charts are completed with the children. The staff team also use natural consequences for unwise behaviour; for example, unsafe behaviour in the car would result in walking or taking the bus instead.

Is the Service Caring?

Evidencing fundamental aspects of care and support are provided to care receivers by appropriately trained and competent staff.

There was evidence of the children being involved in their care and having choice in respect of activities, meals, holidays, and clothing. One staff member confirmed to the Regulation Officer that the care and support provided to the children is individual and child-centred. The children undertake a wide range of activities and both children confirmed to the Regulation Officer their enjoyment of these. There is a box in the living room for the children to provide feedback at any time.

Relationships with parents, friends and those important to the children in this home are actively promoted, several examples were provided (sleep overs, activities with friends, attending events with parents and promoting important family time, for example Christmas Day and Mother's Day). Children are involved in meal planning and encouraged to help prepare and cook nutritious meals. The Registered Manager confirmed that staff and children eat together as a family. One external professional stated that they had, on occasion, visited the home at meal times and commented on the relaxed, happy atmosphere.

The children's care plans are stored in hard copy format. These contained comprehensive behaviour support/safety plans and risk assessments, for example, for missing episodes.

The safety plan was formatted as a 'mind map' and completed with the child. The safety plan is reviewed by staff each month. There was a consideration in the care plans of significant events that could impact the children's stability; this demonstrated both a child-centred and a holistic approach.

Residential Personal Plans were detailed and brought together extensive information in one place. There was evidence of these plans being regularly reviewed.

There were records on the children's files of professionals' visits (including those of their social worker) and visits to the optician, dentist, and GP. There was evidence of Personal Education Plans (PEP) and health assessments. Still, there was some delay in these being uploaded to the electronic system, and the Registered Manager was going to follow up one PEP and health assessment following inspection. Regular child-in-care meetings were recorded. The regulation officers discussed with the Registered Manager that printing off the PEP and health assessment for each child would be helpful and keeping them in hard copy for ease of access.

The Registered Manager described a new piece of work, an 'About me' document, that is being completed with the children and of which the children were proud to be a part. This document contains details of personal wishes and likes, also where the child might need support and what they were good at as well. This is an area of good practice.

The staff team recognises the importance of life story work, and work with this is due to start soon for children.

The staff and Registered Manager promote relationships with key people, such as the Independent Reviewing Officer (IRO), the Children's Commissioner, and Regulation 31 independent visitors.

Feedback from one professional external to the service included;

“The staff have formed excellent relationships with the child, they are child-focused and go over and above what is required.” “They work closely with myself and other agencies involved in the child’s care and will question other agencies if it is in the best interest of the child.”

Feedback from staff was also positive concerning the staff team and the supportive Registered Manager. Staff members expressed that they were able to discuss any concerns freely. There was feedback that consistency is the only difficulty at times, but that team meetings helped review and aid discussion about this.

The regulation officers undertook a brief tour of the home. It was found to be clean and homely, with evidence of pictures completed by the children and their photographs present. They also met the home’s cat, who is cared for predominantly by the children. The children’s rooms showed personalisation, which reflected their wishes and interests. The outside area had been improved since the last inspection visit, and there were plans to utilise this space for summer BBQs.

Is the Service Well-Led?

Evaluating the effectiveness of the service leadership and management.
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The permanent staff team has only come together since last September, with several staff members joining this year. The team consists of the Registered Manager, two shift leaders, and seven Residential Child Care Officers (RCCOs). Three bank staff members ably support the staff team. The Registered Manager spoke of mentoring the staff team to ensure consistency of the care provided so that staff feel supported.

The Registered Manager also expressed that they felt well supported by their line manager. When they need to escalate issues, they are responded to, and there is always a named manager with oversight of the home in the Registered Manager's absence. The staff team meetings are weekly. All of the children’s home registered managers meet every Wednesday and also have check-ins on Monday and Friday.

New staff are provided with a 'buddy' to mentor them who has more experience. One staff member spoke positively of their induction into the home. They commented on the buddy/mentor system and the induction package they had been given to work through. The Registered Manager also showed the Regulation Officer a staff file containing an induction and probation log; there was evidence of two, four and six-month discussions being completed and an induction checklist. All staff receive both a generic and bespoke induction.

In addition to personal supervision, this home promotes group supervision, where the team can discuss what is going well and what is not and consider a way forward. Communication with staff is of a high quality in this home, with a strong use of a restorative approach. The Registered Manager provided the regulation officers with the supervision matrix for staff, which evidenced that individual supervision would occur regularly every month now that the staff team is almost fully established. The regulation officers recognised the difficulties in achieving this consistently whilst the staff team was being established, and staff feedback concerning support was positive. The Registered Manager also spoke of her 'door always being open'.

The staff training matrix was also reviewed by the regulation officers and was found to be satisfactory. Two staff members have the Level 3 residential childcare training, with the remaining staff starting the training in September 2024. One shift leader has started their Level 5, and one is to start soon.

The Registered Manager wants all staff to have a MAYBO (physical intervention) refresher training; however, all have completed the online modules (in de-escalation). At the second visit, the Registered Manager confirmed that bespoke MAYBO refresher training had been arranged for the following week.

All staff members, with the exception of one new staff member, have also completed paediatric first aid training.

It was clear to the regulation officers that the Registered Manager had prioritised staff training needs within the home, recognising the importance of the staff's training needs in relation to the care provided.

In addition to the daily and weekly checks carried out by the staff team highlighted previously under the heading of 'safety,' the Registered Manager carries out their own monthly checks to oversee this. However, these monthly checks are not currently being recorded by the Registered Manager, and the regulation officers suggested that this would be good practice. The Registered Manager confirmed that they would make the change in the future to ensure quality assurance activity is recorded.

In addition to the internal checks, an independent visitor provides monthly reports. The regulation officers consider these reports comprehensive and remain integral in identifying deficits or good areas of practice.

IMPROVEMENT PLAN

There was one area 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 1.5, Appendix 2.</p> <p>To be completed by: within six months of the date of the inspection (13 December 2024)</p>	<p>The Registered Provider must ensure that the home's policies are service specific and are regularly reviewed and updated.</p>
	<p>Response of Registered Provider:</p> <p>The policies are in the infancy stages of being developed, once ratified they will be available online and will be shared with our regulatory officer.</p> <p>17.07.24</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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