



**Jersey Care
Commission**

INSPECTION REPORT

**06 Children's Home
Care Home Service**

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

1 July 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 a Children's Care Home service inspection. The home's name and address have not been included to preserve the privacy and confidentiality of the children and young people who live there.

The home is a domestic property within a residential area. Each young person has a bedroom and en suite bathroom. There is a communal lounge, a kitchen diner, and an enclosed private garden. Separate bedroom accommodation is provided for staff, some of whom sleep in the home overnight as part of their shift schedule, which helps maintain privacy for staff and young people.

The ethos of the service is to provide a safe and stable environment to young people through a therapeutic trauma informed parenting approach.

Regulated Activity	Children's Home Service
Mandatory Conditions of Registration	Type of care: Personal support Category of care: Children and Young People Maximum number of care receivers: This information has been omitted from the inspection report to protect the confidentiality of the care receivers in this service Age range of care receivers: 12 -18 years
Date of Inspection	1 July 2024
Time of Inspection	9.30am – 1.15pm
Type of Inspection	Announced
Number of areas for improvement	Two
Number of care receivers using the service on the day of the inspection	This information has been omitted from the inspection report to protect the confidentiality of the care receivers in this service

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 home became registered with the Commission on 27 June 2023, and this is the first inspection since its registration.

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 evidence gathered during this inspection found that the young people living in the home have a consistent and stable staff team, who are safely recruited and adequately inducted into their roles. The Registered Manager has developed the staff team through recruitment, training and ongoing development, which has resulted in a skilled group of support staff.

The staff team demonstrates a thorough understanding of young people's experiences, plans, and goals for their future and actively works to help them make good decisions and aspire to achieve their goals. Health and social care professionals who have regular contact with the home spoke favourably of the staff team, particularly their efforts and commitment to supporting the young people. They described the positive relationships in the home, through which the staff encourage and assist young people in making healthy choices and developing skills for greater independence. Young people are supported in exercising their rights and making informed decisions about managing their care.

The environment was homely and domestic, decorated in an appropriate style to meet the needs of the young people. Clearly, the staff team took pride in creating a homely and nurturing environment, and young people's personal space and right to privacy were respected and promoted.

The management and governance arrangements are adequate, and the whole team strives to continually improve the safety and quality of support provided to achieve better outcomes for young people.

This inspection visit highlighted two areas that require improvement: the need for the home to develop policies tailored specifically to the service and for staff to complete medication training determined by the Standards.

INSPECTION PROCESS

Two regulation officers carried out this announced inspection visit, which was completed on July 1, 2024. The Registered Manager was notified a few days before the visit. This was to inform and prepare the young people for the inspection and to enable the regulation officers to engage with them and seek their feedback.

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**

Before the inspection, the regulation officers reviewed all the information held by the Commission about the home. This included the information submitted as part of the registration process, the Statement of Purpose, the Children's and Young Person's Guide, and notifications submitted. The Regulation Officer assigned to this service visited the home to meet with the Registered Manager and staff team on February 19, 2024.

During the inspection, the regulation officers met with the Registered Manager and three staff members and requested feedback from two external health and social care professionals. The young people were informed about the inspection, and the staff reminded them of their opportunity to provide their views about the home. However, no feedback from the young people was provided.

Policies, care records, medication records, health assessment records, risk assessments, training records, and staff rosters were examined as part of the inspection process.

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

After 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. Areas for improvement have been identified and described in the report. An improvement plan is attached at the end of the report.

INSPECTION FINDINGS

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.

The home's Statement of Purpose (SoP) was submitted as part of the registration process and has since been revised and resubmitted to the Commission. It accurately describes the service provided, including the home's purpose, practice and model of care that informs the support for young people. The findings from this inspection confirm that the home is operating in accordance with its SoP.

The children's guide to the home, which is provided to young people on their admission to the home, was reviewed. It explains the home's purpose and aims and includes a range of information, including pocket money, food, staying out overnight, the staff team, responsibilities, and house expectations. The guide is precise, written in simple language, and includes details on their rights, contact details for relevant agencies, and how to file a complaint.

The home is staffed with at least two support staff at all times and the Registered Manager is also present during office hours. On-call managerial arrangements are in place, and staff can access the out of hours duty social worker. The home has maintained a consistent staff team made up of both permanent and experienced agency workers.

The Registered Manager oversees the staffing roster, ensures there is always a mix of permanent and agency staff, and considers their skills and experiences. Two staff have been promoted within the team to assume more responsibilities and are now considered senior residential childcare officers (SRCCO).

The regulation officers spoke with both permanent and agency staff during the inspection, and they demonstrated a clear understanding of their roles and responsibilities in ensuring the safety of young people and providing support in accordance with support plans. Staff described their approach as being tailored and specific to each young person's abilities and needs, with a focus on their strengths, and they spoke of encouraging them to participate in decision-making about their lives.

Restrictions within the environment have been adjusted since the service was registered based on the requests of the young people. These were carried out in full consultation with the broader service and legal authorities. The décor and furnishings within the home reflect a respectful and nurturing place to live. The privacy of the young people in their bedrooms is respected, and sufficient space in the communal areas, such as the dining area and lounge, provides them with opportunities to relax. As part of a programme aimed at encouraging responsibility, young people are encouraged and supported to take responsibility for household chores and tidy their bedrooms.

The young people are provided with the home's contact details, and staff demonstrated that they work within the confines of the safety plans in place for instances when the young people do not return home at the expected time. The home submits notifications to the Commission on these occasions, outlining the actions taken by the staff team. Social workers are also notified of these occurrences, which have recently decreased frequency. The staff team informed the regulation officers that the young people are communicating more effectively with staff whilst out of the home.

There was evidence that young people were supported in going on an off-island holiday, with an adequate ratio of staff provided. The young people had reportedly enjoyed this, which has led to other aspirations to travel further afield. The young people were fully involved and engaged in planning their holidays, ensuring their wishes and aspirations were heard. One staff member who accompanied one young person on their trip said that they had been fully involved in developing and contributing to the risk management plan.

The Registered Manager advised that detailed discussions and planning were carried out before the trip, with risk assessments and contingency plans in place. The risk assessment covered all daily care needs and included a contingency plan for emergencies. While the home evidenced this safe, considerate approach, CYPES does not have a ratified policy for off-island holidays and trips off-island relating to children and young people in care.

The home's policies are not specific to the service or its SoP. Many of the policies that staff must rely on are irrelevant to children and young people in care. Examples of policies that are lacking for children and young people in care include medication management, dress code, and off-island holidays. The Registered Manager advised that there is an intention to develop service-specific policies; this will be an area for improvement.

All fire safety checks are routinely carried out as required by the Fire and Rescue service, there was evidence that the staff had completed regular fire safety drills that involved the young people.

The storage of medication was found to be safe. A review of medication administration records showed one example of transcribing where the required standard of practice was not met. Additionally, not all staff had not received training in medication management as required by the Standards. This is an area for improvement.

Samples of staff personnel files were reviewed, demonstrating that the Standards for safe recruitment practices have been met. The Registered Manager confirmed that when agency staff are employed in the home, they are fully involved in their appointment, ensuring that all staff are suitable and compatible to support the young people.

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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Discussion with the staff team confirmed to the regulation officers that they understood their professional responsibilities, particularly in ensuring the effectiveness of the arrangements for maintaining the safety of the young people. Their discussions led the regulation officers to believe that the staff team is committed to encouraging young people to make healthy life decisions. It was evident that the young people's dignity and privacy were respected, with the staff maintaining a balance between exercising their rights and providing the right information to make sensible decisions.

The Registered Manager and staff team have developed strong, professional relationships with the young people and other external agencies. Two key workers supported one young person, and they were involved in choosing the staff they felt most comfortable with.

The staff team spoke of the importance of consistency in their approach and following young people's support planning arrangements to encourage and stabilise their behaviour, which has been effective according to both the Registered Manager and external health professionals.

Two health and social care professionals in regular contact with the young people provided positive feedback about the home. They expressed trust and confidence in the staff team, commenting that their efforts positively impact the young people. They said that staff provided regular updates on the young people, mainly when concerns arose that required their involvement. One health professional described a situation whereby a health concern had been identified, and the staff team had immediately communicated this concern.

Their views of the staff team supporting the young people included comments such as, "*The staff team are young, nurturing, and care about the young people, and would go the extra mile to help out*", "*Staff give lots of encouragement and praise*", and "*the consistency of the staff team allows the young people to respond really well*". Another health professional commented, "*The staff are very caring and compassionate, and the staff have the young people's interests at heart.*"

The young people were given several opportunities to speak with the regulation officers, both during and after the inspection, however, the offer was declined.

There was evidence that young people were supported in developing skills for independent living in their transition to adulthood. The staff team described their roles in daily life at home as working with young people to support them in developing skills, including meal preparation, budgeting, laundry, and shopping. One example provided showed that meal preparation also involved awareness of healthy food choices and planning a meal using three fresh ingredients.

The staff team described that incentive rewards are also offered to encourage and recognise positive choices made by young people in addition to providing pocket money. One young person has expressed a desire to have a specific item, and a clear incentive plan is in place to help them achieve this goal.

In accordance with the Regulations, an independent person visits the home monthly, and copies of their reports are shared with the Commission. The general findings from the most recent report showed that the team are focused on delivering the right type of care and support, positive choices are being encouraged, and care planning arrangements have been developed in full partnership with the young people.

Is the Service Caring?

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

Samples of support plans were reviewed, they are stored electronically and accessed by a range of staff involved in the young people's care. Paper copies are provided to young people if they wish. Evidently, the plans were detailed to guide staff with their development and support needs, and the young people had been involved in decisions regarding their care. The outcome of the monthly visitor report highlighted that care plans had been developed in full partnership with the young people. Discussions with staff highlighted they were knowledgeable about the young people's health needs and family relationships, and they frequently remind the young people about available education and training opportunities.

Young people's health needs are identified and assessed promptly. Examples provided included access to GP, dentist, school nurse, and other health services. Staff described the actions they took when one young person reported having been in an incident outside of the home, which demonstrated that staff advocated on behalf of the young people and involved relevant health professionals as necessary. Annual health assessments were completed as required. While the most recent copy of the annual health assessment had been completed, it had not been shared with the staff team, nor was it available on the inspection day. However, the social worker promptly rectified this oversight soon after the inspection.

Weekly menu plans were displayed in the kitchen, and the young people were involved in menu planning. The records showed that a range of healthy foods are provided, along with a weekly takeaway option. Fridges stocked with healthy snacks, fruit, and drinks are provided in the young people's bedrooms for easy access between meals.

Is the Service Well-Led?

Evaluating the effectiveness of the service leadership and management.
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The inspection identified a committed management team and a stable and consistent staff team in the home, which has undoubtedly positively impacted the young people's development and progress. The aim of the home, as outlined in the SoP, is to provide a safe, caring environment with a focus on building confidence and enabling independence, which has been noted from this inspection.

Through discussions with the staff team, it is evident that they understood the complex needs of the young people and strived to be consistent in their approach. The home was adequately staffed at all times, including when young people went off the island on holiday. Samples of staff rosters confirmed consistent and regular staffing in the home. A key strength is the management oversight of the care and support provided, with the Registered Manager consistently present in the home to ensure the support provided is safe and in line with care planning arrangements.

Staff reported that morale across the team was good, and they described good working relationships in the home. Weekly team meetings and daily shift handovers communicate relevant issues relating to the young people. Records of handover discussions and daily tasks necessary for the effective running of the home are maintained.

Staff felt supported by the Registered Manager and said they were always accessible. Supervision is carried out and completed in line with the Standards, as confirmed by staff who described the process used for supervision.

Training opportunities are provided for staff, and five staff members have completed a Level 3 qualification in children's residential care, with three more enrolled to start the next available course. The Registered Manager oversees the training and development needs of the staff team and ensures that mandatory training is completed. Some staff have also completed appropriate adult training and trauma-informed practice awareness. One staff member commented that the volume of online training is excessive and that they preferred face-to-face training.

The Commission is notified of all notifiable events, and the Registered Manager has provided updated information on the progress and outcomes of planning decisions.

IMPROVEMENT PLAN

There were two 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 11.7 Appendix 6.</p> <p>To be completed by: within three months of the date of the inspection (1 October 2024)</p>	<p>The Registered Provider must ensure that staff are provided with medication training as required by the Standards.</p>
	<p>Response of Registered Provider:</p> <p>The Administration of Medication training was discussed with the inspector at the time of the visit. The administration of medication training only permits persons to attend and complete the course who are working with young people who are taking prescribed medication. It is not possible for staff to complete this course without such a requirement in the home. All staff had completed the medication awareness training and two staff members had completed the level 3 training allowing competencies to be completed and safe management of medication for homely remedies. The young person was also above the age of 16 and where appropriate risk management would be in place for self administration.</p>

<p>Area for Improvement 2</p> <p>Ref: Standard 1.5 Appendix 2.</p> <p>To be completed by: within six months of the date of the inspection (1 January 2025)</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>It is recognised that the Policies and Procedures within this Home and others in the sector requires work to bring them up to a higher standard. For that reason we will be introducing a full refreshed suite of Policies and Procedures which are Residential Child Care specific using tri-X, a company recognised as the leader in the field.</p> <p>Tri.x has been producing web-enabled information, procedures and guidance across the social care sector for over 18 years. We are working tri-x to produce online procedures which are in harmony with the newly introduced Children and Young People (Jersey) Law 2022, statutory requirements and reflect best practice in social care and safeguarding, This web based resource is expected to go live in October this year and will further support our delivery of the best possible outcomes for children.</p> <p>At present the residential homes adhere to current policies within the GOJ. These are accessible on line. Each home has a bespoke Drive allocated for Home team and policies are stored there in each home.</p> <p>We have ensured that all linked policies are printed off and held on hard copy file in each home.</p>
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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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