



**Jersey Care
Commission**

Summary Report

Young Adults Service 01

Date of Inspection:

27 June 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.

The regulation officers examined the Government of Jersey's policies on managing violence, aggression, and incident reporting. These policies detail incident reporting, investigation procedures, and the 'minimum standard' response from the employer where risks have been identified to employee safety and well-being. These policies were not consistently followed by this service, leading to a lack of a coordinated response and appropriate risk management. There has been learning from this situation. New processes and procedures have since been implemented to provide a greater 'line of sight' for senior leaders of the Children's Social Care Service.

The ability to appropriately manage this service alongside staffing pressures and the management of risks has compromised some management functions, such as staff induction and the formal supervision of care staff.

Fire safety management has been appropriate and in line with best practice recommended by the States of Jersey Fire Service.

Collaborative working, with the consent of care receivers, is a strength of this service. It promotes better outcomes in terms of working with and alongside care receivers to increase their independence skills.

The support delivered in this service is person-centred and relationship-based, and it respects the rights of care receivers as young adults.

The referral process, assessment, and induction of new care receivers are strengths of this service. For example, initial assessments include a matching process with the needs of existing care receivers in this service being considered. However, historical matching of care receivers and decision-making have not been sufficient.

Care staff training complies with the requirements set out in the Children's Home Standards and also evidenced supplementary training essential to delivering care in this service.

Feedback from care staff has been mainly positive. While confirming historic staffing pressures experienced in this service, they expressed that the current interim management arrangements and staff changes have improved access to management support and stabilised the staffing numbers.

Feedback from a professional who has regular contact with this service reported that inconsistent support was provided to care receivers and while complaints from care receivers were handled within policy and procedure, they often did not result with the desired outcome being met.

While regulation officers could not ascertain feedback from care receivers on the day of the inspection, written feedback from a previous care receiver who had transitioned to independent living was positive about their experience of this service. This is a credit to the staff team.

This inspection resulted in four areas for improvement being identified. These are detailed in the improvement plan at the end of this report.

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 10.1 and 10.7</p> <p>To be completed by: Immediate</p>	<p>The Registered Provider must ensure that the Government of Jersey's Prevention and Management of Violence and Aggression and Incident Reporting and Investigation policies are adequately followed in this service when it is identified that risks are posed to care receivers and care staff to ensure that robust arrangements are in place to manage and mitigate risk.</p> <p>Response of Registered Provider:</p> <p>The Government of Jersey's Prevention and Management of Violence and Aggression and Incident Reporting and Investigation policies are followed in the management and mitigation of risks. As referenced within this report, risk assessments are in place that are subject to ongoing review and are up to date.</p>
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<p>Area for Improvement 2</p> <p>Ref: Standard 2</p> <p>To be completed by: 27 September 2024, three months from the date of inspection.</p>	<p>The Registered Provider must ensure that this service has a dedicated Registered Manager who can oversee care delivery, ensure the safe running of this service, and provide good outcomes for care receivers.</p> <hr/> <p>Response of Registered Provider:</p> <p>The Interim Manager that was appointed in February 2024 has previously consistently covered management responsibilities for the home when the previous manager of the home was on leave. The Interim Manager was appointed to allow for standardisation of good practice across both supported accommodation homes whilst the Registered Manager for this service was required to manage another home.</p> <p>There have been significant positive outcomes during this period as reflected within the report, for the young people and staff. This has included the introduction and matching of new staff to residents, modelling of approach with improved positive engagement and inclusion, opening up of the environment and positive transitions out of the home to independent living. The staff have welcomed the support of the Interim Manager as reflected within the report.</p> <p>The Home is currently closed for refurbishment, a dedicated Registered Manager will be identified by the end of the year to be in post when the Home reopens in January 2025.</p>
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<p>Area for Improvement 3</p> <p>Ref: Standard 2.10</p> <p>To be completed by: 27 September 2024, three months from the date of inspection.</p>	<p>The Registered Provider must ensure that all care staff receive reflective supervision per the Standards.</p>
	<p>Response of Registered Provider:</p> <p>It is accepted that reflective supervision did not happen consistently in May 2024 due to unforeseen sickness. Reflective supervision has been delivered consistently since the new Manager has been in post since February 2024. The previous Manager holds the records predating this which were not reviewed as part of the inspection.</p>

<p>Area for Improvement 4</p> <p>Ref: Standard 1.5 and Appendix 2</p> <p>To be completed by: 27 December 2024, six months from the date of inspection.</p>	<p>The Registered Provider must ensure that this service's policies are service-specific and are regularly reviewed and updated.</p>
	<p>Response of Registered Provider:</p> <p>The Home adheres to all available policies within Government of Jersey. These policies are accessible online, and a hard copy of essential policies is available within the Home. The GOJ have purchased TRI-X Residential Policies for the Children's Residential service, these are in the process of being amended to reflect local legislation and meet the Commission's Regulations and Standards.</p>

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