



**Jersey Care
Commission**

INSPECTION REPORT

01 Children's Home

Children's Care Home Service

**Liberte House
19-23 La Motte Street
St Helier
JE2 4SY**

12 and 14 August 2024

**Published:
19 November 2024**

1. 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 to monitor compliance with the Law and Regulations, to review and evaluate the effectiveness of the regulated activity and to encourage improvement.

2. ABOUT THE SERVICE

This is a report of the inspection of a Children's Home. It is one of nine Children's homes operated by the Children, Young People, Education, and Skills Department on behalf of the Government of Jersey. The name, address of the home and details of those living there have not been included in this report. This is to preserve the privacy and confidentiality of the children and young people who live there. There is a registered manager in place.

Registration Details	Detail
Regulated Activity	Children's Care Home Service
Mandatory Conditions of Registration	
Type of care	Personal care, personal support
Category of care	Children and Young People (0-18)
Maximum number of care receivers	Three
Maximum number in receipt of personal care and personal support	Withheld

Age range of care receivers	12-18 years
Maximum number of care receivers that can be accommodated in each room	One
Discretionary Conditions of Registration	
None	
Additional information:	
<p>Since the last inspection on 3 and 10 August 2023, there have been changes in the management arrangements within the home. The agency Registered Manager left the service in November 2023. Since then, two interim managers have been in place. The most recent Registered Manager was transferred from another Government of Jersey Children's Home three weeks prior to the inspection. Additionally, the original staff team within the home has been disbanded and replaced with a new team of agency residential child care officers (RCCO's) and long-term residential staff from other areas of the service.</p> <p>During the pre-inspection of the service in August 2024, it was noted that the age range of care receivers had been modified in response to a request in March 2023 to reduce the age range to 7-18 years. As the variation is no longer required, the age range will revert to the original registration of 12-18 years.</p>	

3. ABOUT THE INSPECTION

3.1 Inspection Details

This inspection was announced and notice of the inspection visit was given to the Registered Manager four days before the visit. This was to ensure that they would be available to facilitate the inspection.

Inspection information	Detail
Dates and times of this inspection	12 August 2024- 9.15am to 2.15pm 14 August 2024- 9am to 12.30pm
Number of areas for development from this inspection	Three
Number of care receivers accommodated on day of the inspection	Withheld
Date of previous inspection:	3 and 10 August 2023
Areas for development noted in 2023	Four
Link to previous inspection report	IR01ChildrensHome20230810Final.pdf

3.2 Focus for this inspection

This inspection included a focus on the areas for development identified at the previous inspection on 3 and 10 August 2023, as well as these specific new lines of enquiry:

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

4. SUMMARY OF INSPECTION FINDINGS

4.1 Progress against areas for development identified at the last inspection

At the last inspection, four areas of improvement were identified. The improvement plan was reviewed during this inspection. Areas of improvement will now be identified as areas for development.

It was encouraging to note that progress had been made in areas identified for development. Management oversight of staff training compliance has notably improved with the implementation of a training matrix, which now includes up-to-date training records. However, while the matrix has provided greater transparency, it has also highlighted inconsistent compliance with mandatory and essential training requirements. Consequently, training compliance has been identified as an area for development.

Practice has been strengthened in the safe use of Medication Administration Records (MAR). MAR sheets were available for review, and prescribed medications were documented. The organisation has now established an agreement with a local pharmacy to provide MAR sheets to the children's homes. This will help ensure safer medication administration for care receivers.

During the previous inspection, it was noted that policies and procedures were not easily accessible to staff, care receivers, or their families. However, the service reported that a selection of relevant policies is available on the Government website and the internal Children's Service SharePoint platform, but only a limited number have been printed and made available in hard copy within the home for children and young people. A review of selected policies during the inspection revealed that they were not specific to the Children's Home setting, and some had not undergone a formal review or ratification process. Policies remain an area for development.

Medication administration training was identified as an area for development during the previous inspection. The Registered Manager provided information on the new staff team's compliance with this mandatory training. Some team members had completed medication administration training as part of their Level 3 Qualifications and Credit Framework (QCF) training. It was noted that staff who had not yet undertaken the training were scheduled to attend the next available local course. This is no longer an area for development.

4.2 Observations and overall findings from this inspection

A new staff team has been brought together to provide care in the home in response to changes in care receivers and their specific needs. The team includes permanent staff who have previously worked in other children's homes within the Government of Jersey, along with experienced agency RCCO's recruited from the United Kingdom (UK).

Staff members reported not receiving sufficient notice regarding their relocation to the home. Some staff indicated they were given only two to three days to meet their new team members and prepare the house for the young people's arrival. Additionally, most team members had not worked previously with the Registered Manager. As a result, they felt there was insufficient time for team planning before the young people were moved into the home.

During the inspection it was found that the home has undergone a programme of renovation and redecoration, with some areas now significantly improved and in good condition. However, certain parts of the home, such as the hallway and ensuite bedroom, remain outdated.

The Registered Manager has plans to enhance and develop ways of working as a team within the home. This includes strengthening oversight of staff training and development needs. They will collaborate with the wider organisation's training and development team to ensure that standards are consistently met.

Care is delivered by a small staff team; it is person-centred, culturally sensitive and focuses on building positive relationships with the young people. The staff support the young people in pursuing their individual activity preferences and making choices about how they spend their leisure time, whether that involves going to the gym, enjoying family time, or engaging in other personal interests.

The staff team actively supports and encourages young people to attend their work or educational commitments, promoting their development and enhancing their prospects.

Young people are supported to attend essential health appointments, such as visits to the dentist and optician. However, health assessments and healthcare plans completed by external health professionals were not made available to the staff team. It is crucial that the team has access to these healthcare plans to understand and address the young people's health needs fully, ensuring appropriate support is provided to meet their individual health requirements.

5. INSPECTION PROCESS

5.1 How the inspection was undertaken

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

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection report from 3 and 10 August 2023, reviews of the Statement of Purpose, variation requests and notification of incidents.

The Regulation Officer was unable to gather feedback from care receivers, as attempts were unsuccessful due to their availability. Additionally, it was deemed inappropriate to seek feedback from one care receiver who was in the process of moving into the home. Discussions were held with the Registered Manager, and staff team members gave feedback. Feedback was also provided by three professionals external to the service.

As part of the inspection process, records including policies, care records, risk assessments, and other operational documentation were examined.

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

This report sets out our findings and includes areas of good practice identified during the inspection. Where areas for development have been identified, these are described in the report, and a development plan is attached at the end of the report.

5.2 Sources of evidence

The sources of evidence reviewed as part of this inspection are listed in Appendix 1.

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

6. 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.

Risk assessments were documented in the young people's records, which were comprehensive and detailed. The Registered Manager reported that the risk assessments remain dynamic and will be reviewed regularly due to the team getting to know the young people, their lifestyles, and behaviours in line with their new environment. The home follows the organisation's missing-from-home policy, which has recently been revised; this indicates a commitment to safeguarding the young people.

Staffing levels are currently sufficient, with an appropriate staff to care receiver ratio maintained. However, this is achieved through the use of agency and bank staff. Additionally, staff from other children's homes support the team, which helps ensure continuity of relationships for some care receivers.

As a result of the planned reallocation of bedrooms within the home, the staff team will need to share the house bathroom with some of the young people. This arrangement may present challenges. It is essential therefore, to ensure that safety and appropriateness of this shared space is managed effectively.

The Registered Manager has thoughtfully reviewed the staff team's working patterns to ensure the service is adequately covered in line with the existing risk assessments. As a result, a 12-hour shift pattern has been introduced, providing greater consistency for the young people and the staff team. Two staff members are allocated to sleep-in shifts during the night, contributing to a more regular and homely environment. On weekends, an additional staff member is scheduled to work a waking night shift in accordance with risk assessments identifying an increased risk of potential missing episodes for some young people.

Staff are required to complete medication administration training along with an annual competency assessment. However, team members who have completed the medication administration training have not completed the annual competency assessments, making this an area of development.

Safe recruitment practices are in place, with the Registered Manager having access to recruitment files for both permanent and agency staff. Documentation such as Disclosure and Barring Service (DBS) checks, references, and curriculum vitae (CVs) are reviewed by the Registered Manager in collaboration with the Human Resources (HR) department. Additionally, agency staff are only recruited if they hold a level 3 QCF or equivalent qualification in working with children and young people and have had previous experience working as RCCO's.

There was clear evidence that fire safety procedures were consistently followed and adhered to within the home. During the inspection, fire procedures were reviewed, and it was confirmed that a valid fire certificate was in place. Fire drills and fire alarm testing were carried out in accordance with the required standards, ensuring the home's full compliance with fire safety regulations.

Some of the feedback gathered from staff members and professionals who work with the service included:

Staff members reported during feedback that they had received only a *"few days' notice"* of their relocation to the home, which had given them *"little time to prepare as a team"*, and *"to prepare the environment for the young people"*.

Feedback from a professional working with the service:

"The staff team is working hard at building a relationship with the young person. They have made them feel at home. Robust risk assessments are in place if we have concerns if the young person does not return 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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Despite being a newly formed team, the Registered Manager promotes a culture of shared thinking and collaboration among staff members. This was reflected in feedback from several team members, with comments such as “*the team feels strong*”, “*everyone is keen to be as supportive as possible*”, and “*the Registered Manager is very supportive*”. The Regulation Officer observed the staff's enthusiasm and proactive attitude, reinforcing the positive dynamics. This collaborative atmosphere strengthens the team but promotes a sense of community and belonging for the young people living in the home.

The Registered Manager has considered the wishes and needs of the care receivers regarding their bedrooms. Consequently, they identified that the room currently used by staff as a sleep-in room and office would be more suitable for one of the young people. This larger room features an ensuite bathroom, providing improved privacy for the young person.

Safety plans for the young people are tailored to their age and individual circumstances. Curfew times are mutually agreed upon with the young people, and specific communication arrangements are made if they are out past their curfew. These agreements are being closely monitored, and it is hoped they will help to reduce the number of missing people reports for some young people who appreciate the respect given to their needs. While the staff team finds this approach reassuring, they remain committed to prioritising the safety of the young people living in the home. Should the agreed communication arrangements fail, the staff will continue to follow the safety plan and the home's missing person policy.

The staff team collaborates effectively with the multi-agency team involved with the young people, including health professionals and social workers. One professional noted that communication with the staff team and the Registered Manager had been excellent, particularly during the crucial period of introducing a young person to the home. Another professional highlighted that they receive regular updates from the staff team regarding a young person they support, ensuring that everyone involved remains informed and aligned in their support of a young person. This effective communication helps to promote a consistent approach to care and enhances the overall well-being of the young people.

Care is delivered by a small staff team; it is person-centred and culturally sensitive and focuses on building positive relationships. The staff support the young people in pursuing their individual activity preferences and making choices about how they spend their leisure time, whether that involves going to the gym, enjoying family time, or engaging in other personal interests.

The Registered Manager has made effective use of impact risk assessments, which have been particularly relevant during the inspection due to the recent arrival of a new young person. These assessments are crucial in ensuring that the needs and compatibility of all young people in the home are carefully considered when matching placements. However, the organisation continues to face challenges with the sufficiency of available placements for children and young people. As a result, there are occasions when the care plans for young people already living in the home are compromised by the demand to accommodate another young person in the home.

The Regulation Officer reviewed the notifications of significant events submitted to the Commission. These were found to be appropriate in accordance with the Children's Home Standards. Additionally, they provided details of the services response. An electronic record of the submitted notifications is maintained, and upon review, it was found to align with the notifications reported to the Commission.

The Registered Manager plans to update the staff training package and will collaborate with the newly appointed residential training and development role. The Regulation Officer recognised the lack of opportunity that the staff had been offered to complete essential trauma training during staff feedback, and the Registered Manager reported that this would be considered when reviewing the training offer.

During staff feedback, it was confirmed that staff members received an induction for their roles and the service when they were initially recruited to work in other homes. However, some staff expressed that they would have appreciated more time to have been inducted specifically into this home, noting that each home operates differently and that a tailored induction could have better supported their transition.

During the inspection, the team was managing a transition for a young person into the home. The Regulation Officer observed that the staff were making exceptional efforts to encourage the young person to feel welcome and comfortable. The Registered Manager identified that matching specific staff members with the young person would enhance the chances of successfully settling them into the home.

Feedback from a professional who works directly with the home:

“The staff have been fantastic at claiming the young person, making them feel welcome and encouraging their transition into the home.”

One professional reported that the Registered Manager communicated consistently with them throughout the brief planning period and the introduction of the young person to the home. Additionally, they noted that the Registered Manager had taken a “*considered approach*”, utilising an impact risk assessment prior to agreeing to the placement of one young person.

During feedback, one staff member indicated that there had been no team planning regarding the safety plan for one of the young people. Consequently, there was a lack of consideration for the potential impact on both the young person and the staff team.

Is the service caring?

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

The health assessment of one young person was not initially available to the staff; however, it was sourced from the health professional and provided during the inspection process. The assessment must be accessible to the staff team so they can effectively support the young people with their identified health needs. The Registered Manager has recognised that improved communication with health professionals will ensure that both the health assessment and the healthcare plan are readily available in the home to the young person and the staff team.

Monthly supervision of staff is a requirement under the Children's Home Standards. However, since the staff had only recently begun working together, the Registered Manager had not yet arranged formal supervision for any staff members. The Registered Manager acknowledged that supervision is vital for supporting individual staff members and the team as a whole and plans to organise one-to-one supervision sessions for each team member imminently. As a result, supervision will not be identified as an area for development.

Feedback from a professional who works alongside the home:

“Staff have worked really hard to engage with the young person in introducing them to the home and making them feel welcome.”

The young people are actively encouraged to contribute to meal planning, food choices, and cooking. Meal plans are prepared with careful consideration of nutrition, the young people's favourite foods, and variety. Additionally, any allergies, cultural food requirements, or dislikes are incorporated into the meal plans. For those young people who prefer not to participate in the meal planning, the menus are provided for their review and approval.

Care delivery is centred around the individual. The team is building relationships with the young people and supporting them in engaging with their daily commitments. Keyworkers are assigned to each young person, focusing on development and growth identified in collaboration with them, while emphasising their strengths. The staff provided examples of how they honour the cultural needs of the care receivers, including dietary needs and support for religious requirements.

Staff go above and beyond to ensure the young people feel welcome and comfortable in the home. The Regulation Officer observed that, when introducing a young person to the home, consideration was given to preparing their bedroom with soft furnishings and small, thoughtful details such as toiletries and treats available, creating a cosy, relaxing, and inviting environment.

One professional stated, *“I have nothing but positive things to say about how the staff team have supported the young person so far”*. *“They have supported the young person to settle in”*, and as a result *“they have spent more time in the home than was anticipated.”*

Is the service well led?

Evaluating the effectiveness of the service leadership and management.
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Since the departure of the Registered Manager in November 2023, the home has experienced a period of instability in management oversight. Two interim managers have overseen the home while also serving as registered managers for other homes within the estate. As the new Registered Manager and staff team were recently appointed to the home, the Regulation Officer was unable to determine whether this instability had directly impacted care delivery. However, Independent Visitor reports from earlier in the year indicated that a senior team member was able to provide stability and positive leadership during this time.

The introduction of an experienced Registered Manager has coincided with the arrival of an entirely new staff team and a new group of young people in the home. This development appears to have brought a fresh perspective and renewed energy to the direction of the home, which will hopefully positively impact care delivery moving forward.

The home has undergone a programme of renovation and redecoration, with some areas now significantly improved and in good condition. However, certain areas of the home, including the hallway and ensuite bedroom, may benefit from modernisation. While the upgrade of the house bathroom was a significant part of the renovation, there are opportunities for further enhancement, as some elements could be improved in terms of attention to detail and choice of materials. The Registered Manager has indicated that discussions are ongoing with the contractors to address these matters.

A handover document is utilised to ensure that staff are informed of any updates and outstanding actions during each shift change. This document includes details on which staff members are working, the out-of-hours process and contact information, any appointments that require facilitation, and mandatory daily health and safety checks. By providing this information, the handover document facilitates the home's daily operations, ensuring compliance with necessary checks that help keep the young people and staff members safe.

A review of selected policies during the inspection revealed that they were not specific to the Children's Home setting, and some had not undergone a formal review or ratification process. The Commission has been informed that the service is developing a comprehensive 'Residential Childcare Services Procedures Folder and Staff Handbook', which will contain policies specifically tailored to Children's Homes. However, as this has been an ongoing initiative without a defined completion timeline, policies remain an area for development.

The Registered Manager has developed a plan to hold regular team meetings to share information about the wider organisation. These meetings will provide a platform to discuss initiatives and updates related to the home, as well as address any other important communications regarding the day-to-day operations and care of the young people

Feedback from a professional who visits the home routinely:

“Communication from the Registered Manager is excellent. It is easy to get hold of them when needed.”

DEVELOPMENT PLAN

There were three areas for development identified during this inspection. The table below is the Registered Provider's response to the inspection findings.

<p>Area for Development 1</p> <p>Ref: Standard 1.5 and Appendix 2</p> <p>To be completed: 14 February 2025, six months from the date of inspection.</p>	<p>The Registered Provider is responsible for ensuring that the policies for this service are tailored specifically to its needs and are regularly reviewed, updated and available to staff.</p>
	<p>Response by 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 with tri-x to produce online procedures which are in harmony with the newly introduced Children and Young People (Jersey) Law 2022, statutory requirements, are specific to the SOP of each Home and reflect best practice in social care and safeguarding, this web-based resource is expected to go live shortly and will further</p>

	<p>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 online. Each home has a bespoke Drive allocated for home team and policies are stored there in each home.</p>
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<p>Area for Development 2</p> <p>Ref: Standard 11.8 and Appendix 6</p> <p>To be completed: 14 February 2025, six months from the date of inspection.</p>	<p>The Registered Provider must ensure that all care staff undergo an annual medication competency assessment after completing Level 3 training in medication administration.</p>
	<p>Response by registered provider:</p> <p>Team members that were allocated to attend medication training at the time of the inspection have now completed. A further cohort of team members in the home have been allocated to the next planned medication training. Annual refreshers will be planned as part of the ongoing medication training compliance requirements.</p>

<p>Area for Development 3</p> <p>Ref: Standard 3.10</p>	<p>The Registered Provider must ensure that all care staff fulfil mandatory and essential training requirements in accordance with the Children's Home Care Standards.</p>
<p>To be completed: 14 February 2025, six months from the date of inspection.</p>	<p>Response by registered provider:</p> <p>It is recognised that mandatory training for the previous team as recorded as part the last inspection was unable to evidence the completion of Mandatory training. The report has referenced how a complete new team are now working in the home. The team currently in place have up to date training and completed the required mandatory training. The homes training matrix will only be impacted by new starters joining the home. However, a programme of training will be provided and clear guidance regarding required completion time frames.</p>

Appendix 1 – Sources of Evidence

Follow up on previous areas for development	
Focus	Evidence Reviewed
Management oversight of staff training compliance	<ul style="list-style-type: none"> • Training Matrix
Medication administration training	<ul style="list-style-type: none"> • Discussion with Registered Manager • Training matrix
Safe use of medication administration records (MAR)	<ul style="list-style-type: none"> • MAR sheets • Medication records
Organisational policies and procedures to be more accessible to staff, care receivers and their families	<ul style="list-style-type: none"> • Policies
New key lines of enquiry	
Focus	Evidence Reviewed
Is the service safe	<ul style="list-style-type: none"> • Fire safety procedures, documented evidence • Risk Assessments/Safety Plans • Medicines Management • Staff Rotas • Conversations with the Registered Manager, Staff team, and outside professionals • Training matrix • Recruitment files

	<ul style="list-style-type: none"> • Monthly reports
Is the service effective and responsive	<ul style="list-style-type: none"> • Risk Assessments/Safety Plans • Conversations with the Registered Manager, Staff team, and outside professionals • Policies • Notifications • Monthly reports •
Is the service caring	<ul style="list-style-type: none"> • Health care plans • Observations of care delivery • Feedback from staff team and professionals
Is the service well-led	<ul style="list-style-type: none"> • Policies and procedures • Feedback from staff team and professionals • Handover documentation • Monthly reports • Discussion with Registered Manager • Environmental Checks

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for development 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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