

# **INSPECTION REPORT**

# Secure Children's Home Service

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

**Dates of inspection:** 

10, 18 and 31 July 2024

Published: 05 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 secure children's home. The service is provided by Government of Jersey Children, Young People, Education and Skills Department and an Interim Manager is in place.

Registration Details	Detail
Regulated Activity	Children's Home Service
Mandatory Conditions of Registration	
Type of care	Personal Care and Personal Support
Category of care	Children and Young People
Maximum number of care receivers	Three
Maximum number in receipt of nursing	Three
care/personal care/personal support	
Age range of care receivers	10-18 years
Maximum number of care receivers that	Rooms 1, 3, 4 and 5 = one person
can be accommodated in each room	
Discretionary Conditions of Registration	
None	

#### Additional information:

The Commission received an application for a Registered Manager on 11 September 2023. This was approved on 25 September 2023; however, this manager has since left this service.

The Commission was notified on four occasions of the absence of the Registered Manager since the last inspection in January 2023. These were on 17 July and 2 November 2023 and 16 February and 8 July 2024 and included notification of the interim management arrangements that were in place.

On 21 June 2024, the Commission received an application to vary the conditions of registration to increase room capacity from three to four. This application was approved on the same day.

## 3. ABOUT THE INSPECTION

### 3.1 Inspection Details

This inspection was announced and notice of the inspection visit was given to the Interim Manager eleven days before. This was to ensure that the interim Manager would be available during the visit.

Inspection information	Detail
Dates and times of this inspection	10 July 2024 – 10.15am to 3.50pm
	18 July 2024 – 11.35am to 2.55pm
	31 July 2024 – 3.15pm to 3.40pm
Number of areas for development from	Three
this inspection	
Number of care receivers	Withheld to protect the identity of the
accommodated on the day of the	care receivers
inspection	
Date of previous inspection:	12 and 19 January 2023
Areas for development noted in 2023	None
Link to the previous inspection report	20230207-IR-Secure-Childrens-Home-
	Final-For-website.pdf
	(carecommission.je)

## 3.2 Focus for this inspection

This inspection included a focus on 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, no areas for development were identified.

### 4.2 Observations and overall findings from this inspection

Staffing levels in this service are sufficient, but agency and bank staff are relied on to supplement the full-time team. Attempts to recruit a permanent Registered Manager have been unsuccessful, leading to some instability. Despite this, care staff reported that service quality has not been impacted, and care receivers remain safeguarded through thorough risk assessments and proper handling of significant events.

Health and safety protocols, infection control, and medication administration practices are robust, with notable progress in updating the environment.

Improvements like the staff radio communication deck remain outstanding.

Care receivers receive a comprehensive induction that includes key information to support their transition into the service. Care plans are person-centred, culturally respectful, and regularly reviewed. Collaborative working has improved, with multiagency partners providing health screenings, educational support, and various interventions.

The health and wellbeing of care receivers are prioritised through access to healthcare, exercise, and dietary options. While transitions out of the service are generally well managed, care receivers would benefit from knowing where they are transitioning to sooner. Additionally, healthcare staff need better access to the historical health records of care receivers.

Care delivery is person-centred, respectful of cultural needs, and supported by a structured environment, positive relationships, and activities tailored to individual preferences, such as guitar lessons, gym, and cooking. Although care staff show compassion and psychological support is available to care receivers, improvements in staff supervision are needed to ensure safe and consistent care.

A comprehensive review of Children's Residential Services is underway, focusing on enhancing staff conditions, training, and the quality of care delivery. This inspection highlighted a positive and embedded workplace culture, with staff reporting a supportive environment and shared goals under visible leadership. However, improvements are necessary, particularly in updating policies and procedures and addressing gaps in mandatory training. Some service-specific procedures have been developed since the last inspection, which is a positive development.

#### 5. INSPECTION PROCESS

#### 5.1 How the inspection was undertaken

The Children's Care Home Standards were referenced throughout the inspection.<sup>1</sup>

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection report from 12 and 19 January 2023, reviews of the Statement of Purpose, variation requests, and notification of incidents.

Two regulation officers conducted the initial inspection visit on 10 July 2024, and a single Regulation Officer conducted the remaining two visits. This report may refer to the Regulation Officer or regulation officers differently, due to who gathered the evidence and information during the inspection.

The Regulation Officer gathered feedback from one care receiver. They also had discussions with the service's management and other staff. Additionally, feedback was provided by three professionals external to the service.

Records, including policies, care records, incidents, and complaints, were examined as part of the inspection process.

At the conclusion of the inspection, the Regulation Officer provided feedback to the Interim Manager and a senior manager of the organisation.

This report outlines 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.

<sup>&</sup>lt;sup>1</sup> The Children's Care Home Standards can be accessed on the Commission's website at <a href="CHILDRENS-HOMES-Final-Publication-update-April-2024.pdf">CHILDRENS-HOMES-Final-Publication-update-April-2024.pdf</a> (carecommission.je)

## 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.

Staffing is currently adequate, and the ratio of staff to care receivers is sufficient; however, it relies on agency and bank staff to achieve this. In addition, the staff team was being supported by staff from other children's homes, providing continuity of relationships for some care receivers.

The regulation officers were satisfied that safer recruitment practices meet appropriate standards in this service. The Interim Manager has access to recruitment documentation, such as criminal record checks and references, for both permanent and agency care staff. One criminal record check was out of date; however, this was rectified during the inspection period.

The service has been unable to recruit to the position of Registered Manager, which has resulted several changes of interim arrangements. This had the potential to destabilise the service and delivery of safe care. There is some evidence in terms of inconsistency in the supervision of staff and mandatory staff training falling below Standards. However, the care staff consulted reported these changes did not impact operationally or the quality of care provided.

The regulation officers reviewed notification of significant events to the Commission. These were found to be appropriate per the Children's Home Standards, and the service response was detailed, including any resulting actions. These notifications also demonstrated that policy and procedures were utilised appropriately where allegations were made against care staff.

This review of notifications, alongside discussions with care staff, the Interim Manager, other professionals, and care receivers, provided the regulation officers with the knowledge that care receivers are appropriately safeguarded in this service.

In addition, risk assessments noted on care receiver records were detailed, recognised risk, and had appropriate action plans to mitigate, reduce, or eliminate risk.

No formal complaints have been made to this service by care receivers, their families, or professionals in contact with it. The Interim Manager provided context for this by stating that they are proactive in resolving issues and providing feedback at an early stage, so situations do not develop into formal complaints.

Health and safety matters are handled well in this service, for example, maintenance of the building/environment, Portable Appliance Testing (PAT), testing for waterborne diseases, and fire safety management. As a result of water testing earlier in 2024, a flushing procedure is now in place to ensure legionella risks are managed.

The regulation officers examined fire safety in this service. This was comprehensive, including regular testing, servicing of firefighting equipment, and an annual fire inspection by the States of Jersey Fire Service.

Regarding fire drills, the building has been designed with fire safety in mind and is separated into individual zones that care receivers and staff can move to if a fire alarm is triggered. Care staff consulted with could explain the procedure in the event of a fire, and clear guidance was available throughout the building.

Infection control measures are comprehensive in this service, with care staff working alongside a domestic staff member who works three days a week. Care staff have specific tasks that must be performed daily across three shifts: morning, afternoon, and night.

There continue to be efforts to make the environment more homely, with care staff commenting that care receivers appear to value the changes made over recent years. More generally, the building has required some updating, for example, the CCTV system, call bells, and staff radio communication deck.

There has been significant progress in most of these areas; however, the communication deck still has to be commissioned and there are some issues with individual login for care staff on the CCTV system.

The medication administration procedure for this service was revised in June 2024. This procedure is comprehensive and reflects best practice. Transcribing prescribed medication to a Medication Administration Record (MAR) required some minimal changes to ensure best practice was followed, which the service has adopted.

Medicines were stored appropriately in a dedicated room, where medication can be administered to care receivers in private. There was evidence of an audit of medicines management twice per week by senior carers, which assured the regulation officers of adequate oversight.

## Is the service effective and responsive?

Assessing the organisation of the service so that the care receiver's needs are respected and met.

Care receivers are provided with a comprehensive induction to this service in a dedicated area of the home. Care staff complete a checklist to ensure care receivers are supplied with the relevant information to ease their initial transition into this service, which is often at a time of considerable stress for them.

The children and young people's guide and Statement of Purpose (including child-friendly versions) remain fit for purpose, are informative and involved young people in their design.

Care receivers are often received into this service at short notice, or they are known to the wider organisation. Information gathering regarding the needs of care receivers is collated quickly and results in initial care and risk management planning. These plans are person-centred, evidence-based, and respect cultural needs. There was evidence of regular review and dynamic changes to plans due to an individual's or other care receivers' changing needs. There was evidence of specialist assessments to help inform care planning and manage risks.

Collaborative working has improved since the last inspection in January 2023. Relationships with multi-agency partners have strengthened; for example, all care receivers routinely have a physical and mental health screening within 72 working hours of entering this service. In addition, other services, such as the Alcohol and Drug Service and Skills Jersey, provide interventions and support.

The education of care receivers is prioritised, with the regulation officers noting some good engagement and outcomes for the care receivers. Care receivers outside the statutory age for secondary education are encouraged to engage in additional learning, and again, there was evidence of some good outcomes. Care receivers have often disengaged from their education before entering this service, so this demonstrates positive change.

The health and wellbeing of care receivers are encouraged and promoted. Gym equipment has been installed since the last inspection in January 2023, and specialist flooring for Yoga has been sourced. Care receivers' also have input into their diet if they want healthier meals. Care staff promote care receivers' access to general health needs, such as a GP, dentist, or optician.

Records of health assessment and treatment during a care receiver's stay in this service were comprehensive and easily accessible. However, one area that does require rectifying is healthcare staff's access to the historical healthcare records of care receivers on-site. The Registered Provider must work with the appropriate service to remedy this, so that important health information is not missed.

As part of care planning and risk assessment, care receivers accessing this service on a welfare basis have the opportunity to leave the home for periods. This is carefully assessed, and management plans are in place to ensure the safety of the care receiver and care staff.

The independent visitors to the service produce monthly reports regarding its safe running, identifying good practices as well as service deficits. These reports are made available to the Commission, the Registered Provider, the Manager, the wider senior leadership in the organisation, and the Minister for Children and Education.

The Regulation Officer reviewed the latest report (June 2024) and concluded that their findings matched those of the independent visitor.

The regulation officers consulted with one care receiver, who confirmed that they felt listened to and knew how to make their voice heard or make a complaint. In addition, all care receivers have access to advocacy, and a representative from the Office of the Children's Commissioner visits the home regularly.

Transitions out of this service are mostly adequate and person-centred, although planning in this respect is outside the Registered Manager's gift, as a social worker from the wider organisation completes this. In most cases, care receivers are well prepared to return to the community through direct work with care staff and multi-agency partners undertaking risk and harm reduction work with care receivers to support positive change in the community. The Commission accepts decision-making regarding transitions can be complex. However, it would be advantageous for care receivers to know where they will reside at the earliest opportunity when moving on from this service.

Feedback from a staff member regarding working in this service was:

"It is night and day from where the service was a few years ago, and I feel safe and supported."

#### Is the service caring?

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

The care receivers who access this service come via two different routes. These are on a welfare basis ordered by the Royal Court to keep a young person safe or through the criminal justice system. This does provide a challenge for the service with the mix of care receivers' individual needs. However, central to the care and support delivered are the aims and objectives of this service, which are to stabilise potentially harmful behaviours, examine and explore the associated reasons and support the care receiver to transition back to the community safely.

The regulation officers examined care receiver records and found them to be comprehensive and contained essential documents, such as:

- An admission checklist to ensure this process is thorough and consistent
- Comprehensive and regularly reviewed risk assessments and care plans
- Health documentation and notes detailing the care receiver's needs
- Copies of court orders
- School reports

The regulation officers evidenced that routine and structure are provided to care receivers' on a daily basis, alongside building trusting and respectful relationships with their carers who actively take an interest in their welfare. Care staff expressed compassion and empathy for the care receivers they support. Additionally, the regulation officers noted a calm and safe environment where positive behaviour is consistently promoted.

Care delivery is person-centred, built on the care receivers' strengths, identifies areas for development, and is aligned with their aspirations. The Interim Manager and staff consulted provided examples of respecting the cultural needs of care receivers, such as promoting their religious and dietary needs.

Feedback from a care receiver regarding their experience of this service was:

"It's not so bad here; I feel supported and have been able to get fitter and try other activities."

Care receivers have access to a clinical psychologist for one hour every week. They can explore issues important to them and discuss their lived experiences. This can help them make sense of their life journey and the decisions that led them to arrive in this care setting.

Care receivers are given choice and control over how care and support are delivered to them. However, this is reflected by the care setting and the need to keep them safe. Care staff shared examples of utilising the whole building to ensure that various activities are provided to meet individual tastes and needs. Care receivers have input to weekly menu planning and jointly choose a takeaway once a month. Where risk assessment allows care receivers eat together, and positive relationships are promoted.

Care receivers are encouraged to get involved in cooking meals and baking. This is risk assessed and personalised to the individual care receiver's tastes as much as possible.

'Pocket money' is provided to care receivers, and incentive schemes, which have been successful, provide additional rewards for positive behaviour. Care receivers are given a choice on how they spend their pocket money.

Feedback from a staff member regarding the delivery of care and support commented:

"We rely on each other as a staff team. I have learned a lot and will challenge poor practice and escalate this if necessary."

Visits from family and friends are actively promoted and risk assessed. The environment where visits are facilitated is homely and appropriate, with visitors entering the building via a separate entrance. The regulation officers noted that care receivers have also exercised their rights to refuse visits from family and friends. In addition, contact with family and friends is also promoted through regular phone calls.

The supervision of care staff is not consistently carried out per the Children's Care Home Standards. The supervision of care staff is essential to ensure the safety and wellbeing of children, young people, and the care staff where care is delivered consistently and within appropriate boundaries. It also aids the professional development of staff through reflective practice. This is an area for development.

All care staff undertake an annual appraisal which incorporates individual objectives and development linked to service needs and outcomes for care receivers. This is reviewed twice annually to ensure that these objectives and areas for development remain on track.

The wellbeing of staff is prioritised in this service. Incidents where staff have experienced stress or trauma result in a debrief from senior care staff. There was a culture of mutual support, shared principles, and a vision of how they wanted to provide care and support amongst the staff team.

Care staff also have access to the wider wellbeing offer from the Government of Jersey. The regulation officers evidenced a reflective approach with care staff, where they expressed learning and how they might healthily challenge poor practice or a lack of support from senior care staff or the wider organisation.

Three professionals provided feedback about this service as part of this inspection.

A sample of the comments made were as follows:

"The staff have always been appropriate and managed good communication, and my young people have never raised any issues to do with Greenfields directly."

"The care staff really care and have helped Xxx on their journey. It has been a positive experience for Xxx. I have had good communication with the service."

"I have not witnessed anything of concern, and I have found staff to be respectful and helpful."

#### Is the service well led?

Evaluating the effectiveness of the service leadership and management.

A senior leader from Children's Residential Services shared that a full review of residential provision is currently taking place to improve the experiences and outcomes for children and young people. This includes a review of staffing, their terms and conditions, an improved training offer, and providing more value to the role. The Commission welcomes this review as it may provide increased staffing stability and better quality homes across the larger service.

This service has experienced significant changes in recent years; for example, a largely new and inexperienced staff team was brought together as part of an improvement journey in early 2022. The regulation officers explored with care staff and management how positive changes had been embedded and how workplace culture had improved.

The following principles were shared by staff during these discussions:

- The Interim Manager and senior carer staff were visible, actively engaged with care staff, and encouraged good practice
- There are shared aims and goals of the staff team
- Care staff feel safe to speak up, innovate, and challenge poor practice
- Care staff are supportive and kind to each other
- Care staff feel listened to.

The Interim Manager commented, "Operationally, with the four shift leads, the service operates safely with a mature group of care staff understanding their roles and responsibilities.".

Feedback from a staff member regarding the management of this service commented:

"The manager is consistent in their approach, even with the recent change. I am appreciated and the manager understands our journey."

The regulation officers were assured that this service had a positive workplace culture, where continuous learning was commonplace, and care staff were proud of the care and support they provided.

Senior leadership in the wider organisation and the Interim Manager recognise that the current policies and procedures for this service are not fit for purpose. The Interim Manager shared that this is being rectified, and a suite of policies and procedures will be in place later this year. In addition, there are plans to deliver training where necessary, and these policies will be accessible electronically. This is an area for development until these policies are in place.

There has been some positive development regarding service-specific procedures, such as arrival and admission, medical emergencies, accessing education, and escorting in the community. The regulation officers welcomed this development as these procedures are essential guides to new staff during induction and ensure consistency of care delivery.

The central training matrix for all care staff was examined as part of this inspection. It demonstrated that the service was not complying with the mandatory training requirements per the Children's Home Standards, which is an area for development. The Regulation Officer was assured that all care staff have recently refreshed essential supplementary MAYBO training, which is this service's Prevention and Management of Violence and Aggression model (PMVA).

Feedback from a staff member regarding incidents where the PMVA model has been used was:

"We intervened earlier with de-escalation techniques, and where physical intervention is used as a last resort, we and the care receiver are supported after the incident with a debrief process."

## **DEVELOPMENT PLAN**

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

#### Area for Development 1

**Ref:** Standard 1.5 and Appendix 2

To be completed by: 10 January 2025, six months from the date of inspection.

The Registered Provider must ensure that this service's policies are service-specific and are regularly reviewed and updated.

#### **Response of Registered Provider:**

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 childcare specific using Tri-X, a company recognised as the leader in the field. 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 shortly and will further support our delivery of the best possible outcomes for children.

At present the residential homes adhere to current policies within the Government of Jersey. These are accessible online. Each home has a bespoke network drive allocated for home team and policies are stored there in each home.

#### **Area for Development 2**

Ref: Standard 3.11

To be completed by: This must be rectified immediately

The Registered Provider must ensure that all care staff are provided with reflective supervision per the Children's Home Standards, i.e., 12 times per year.

### **Response of Registered Provider:**

Post the inspection, reflective/supportive supervision is taking place monthly and in line with standard 3.11. There is now a monthly supervision planner/calendar in place. Staff are aware who the identified supervisors are and advised in advance on when supervision will take place.

All supervisions are recorded, and the supervisor and supervisee sign the planner and recorded notes to evidence that it has taken place.

#### **Area for Development 3**

Ref: Standard 3.10

To be completed by: 10 January 2025, six months from the date of inspection.

The Registered Provider must ensure that all care staff complete mandatory training per the Children's Home Care Standards.

#### **Response of Registered Provider:**

The training matrix reflects mandatory and refresher training that has been completed for core staff who work at the home, this is in line with standard 3.10.

Staff will receive adequate support within 1:1 supervision and through goals set within their appraisal to ensure, that all refresher training has been completed within timescale. The organisation has also employed a learning and development officer for the children's residential service, to strengthen training needs and ensure compliance is met going forward.

# Appendix 1 - Sources of Evidence

New key lines of enquiry		
Focus	Evidence Reviewed	
Is the service safe	Notifications to the Commission	
	<ul> <li>Complaints</li> </ul>	
	<ul> <li>Fire safety, drill, and PEEPs</li> </ul>	
	Risk assessment	
	Medicines management	
	Infection control measures	
	Staff rotas	
Is the service effective	Admission and initial assessment process	
and responsive	Care plans	
	Evidence of collaborative working	
	Health promotion activities	
	Monthly reports	
	The voice of the child	
	Transition planning	
Is the service caring	Observations of care delivery	
	Care planning	
	<ul> <li>Supervision and wellbeing of care staff</li> </ul>	
	<ul> <li>Feedback from care staff, care receivers, family</li> </ul>	
	members, and professionals	
Is the service well-led	Service development plans	
	<ul> <li>Assessment of the service's culture</li> </ul>	
	Policies and procedures	
	Staff training matrix	
	<ul> <li>Feedback from care staff and professionals</li> </ul>	
	Training records of care staff	

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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