



**Jersey Care
Commission**

INSPECTION REPORT

04 Children's Home Care Service

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

7 October 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

The Government of Jersey operates this Children's Care Home service through the Children, Young People, Education and Skills (CYPES) department, and a registered manager is in place. The name and address of the home have not been included in this report to preserve the privacy and confidentiality of the children and young people who live there.

Regulated Activity	Children's Care Home
Mandatory Conditions of Registration	<u>Mandatory</u> Type of care: Personal care, personal support Category of care: Children Maximum number of care receivers: 2 Age range of care receivers: 10 to 18 years
Discretionary Condition of Registration	None
Date of Inspection	7 October 2024
Time of Inspection	10am to 1pm
Type of Inspection	Announced
Number of areas for improvement	Three
Number of care receivers using the service on the day of the inspection	Withheld

On 15 April 2024, the Commission received an updated copy of the service's Statement of Purpose, which was submitted to reflect the absence of a registered manager and what interim manager arrangements were in place.

Since the last inspection on 22 March 2024, the Commission received an application on 12 June 2024 to propose a new registered manager. The Commission approved this on 18 June 2024.

INSPECTION PROCESS

This focused inspection was completed on 7 October 2024. It was announced and notice of the inspection visit was given to the Registered Manager ten days before the visit to ensure that the Registered Manager would be available.

The inspection was undertaken to review compliance with the areas for improvement identified at the last inspection, which was completed on 22 March 2024; these were as follows:

- Notifiable events made to the Commission needed to contain sufficient detail to inform risk to care receivers and care staff
- The development of a comprehensive recruitment and retention strategy to include registered managers
- E-rostering is in place to monitor the hours worked by care staff in this and the wider service
- The policy for taking care receivers on holiday is reviewed and must specify minimum staffing ratios
- Impact assessments are completed as part of risk assessing the compatibility of care receivers
- Internal escalation procedures are strengthened and embedded
- All care staff must complete mandatory and MAYBO refresher training
- Therapeutic oversight and input for children and trauma-informed approaches must be strengthened

- The transition planning procedure required review to prioritise and promote listening to care receivers views, wishes and preferences
- Advocacy services for care receivers must be revisited when major care planning decisions are being made concerning them
- Care staff are provided with opportunities for debriefs and group supervision led by a manager
- Staff receive formal reflective supervision every four weeks as per the Children's Care Home Standards.

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

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

The Regulation Officer did not gather feedback from care receivers during this focused inspection; however, they did have discussions with the service's management and other staff. Additionally, feedback was provided by one professional external to the service.

Documentation, records, and policies were examined as part of the inspection process.

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

This report outlines our findings during this inspection. Where areas for improvement have been identified, these are described in the report, and an improvement plan is attached at the end of the report.

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

INSPECTION FINDINGS

At the last inspection, 12 areas for improvement were identified, and the Registered Provider submitted an improvement plan to the Commission setting out how these areas would be addressed.

The improvement plan was discussed during this inspection, and it was noted that insufficient progress had been made to address three of the areas for improvement. This means that the registered provider has not met the Standards relating to the following:

- Having a comprehensive retention and recruitment strategy
- Having a policy when taking care receivers on holiday and staffing arrangements in respect of this that protect the care receiver and care staff
- The completion of mandatory training.

This report provides further details on the progress that has been made and highlights the actions which are still required.

Area for improvement 1:

The Registered Provider must ensure that notifications made to the Commission include sufficient details when there is a significant risk to care receivers and staff.

The Regulation Officer reviewed the notifications made to the Commission since the last inspection on 22 March 2024. This provided assurance that these notifications detailed sufficient information for the Commission to consider risk in this service and that appropriate responses and controls were in place to manage significant incidents and events. This is no longer an area for improvement.

Area for improvement 2:

The Registered Provider must ensure the development of a comprehensive recruitment and retention strategy for care staff, which should encompass a plan for recruiting registered managers.

The Regulation Officer was provided with a sample of staff rotas for this service and was satisfied that staffing arrangements were satisfactory to meet the care needs of care receivers. This has been achieved through a mix of permanent, bank and agency staff, with the addition of some overtime. This service now has a registered manager in place.

A recruitment and retention strategy is still being developed, with a senior leader representing the wider organisation stating that “*workstreams have not yet reached a point where proposals can be put forward as to the necessary changes and improvements that need to be made*”. While it is encouraging that steps are being taken to address the matter, this strategy is vital in securing a well-led and stable workforce, so it will remain an area of improvement.

Area for improvement 3:

The Registered Provider must ensure that e-rostering is completed monthly to enable oversight of the hours worked by care staff across the wider residential service.

An e-rostering platform is now in place, and there is evidence that this is being used to track the hours care staff work in this service and the wider organisation. Where care staff had exceeded the specified 48 hours per week (or were close to), according to the Commission's Standards, the system now alerts managers and senior care staff. The Registered Manager and senior care staff reported that this new platform provided good oversight of staff working hours. They could now ensure that working hours could be monitored, and the wellbeing of care staff is promoted. This is no longer an area for improvement.

Area for improvement 4:

The Registered Provider must ensure that a review of policy regarding supporting care receivers on holiday is undertaken to specify minimum staffing ratios to ensure care receiver and care staff safety and wellbeing.

The wider organisation is preparing to launch a comprehensive suite of policies and procedures in December 2024. This will include the policy for staffing arrangements and lone working when supporting care receivers whilst on holiday. This will therefore remain an area for improvement until there is evidence that the policy has been implemented.

Area for improvement 5:

The Registered Provider must ensure that impact risk assessments are completed before placing care receivers in a children's home. Where the decision of a registered manager is overridden, the decision maker must document the rationale for this decision and the steps taken to mitigate identified risks.

The Registered Manager reported that no additional children or young people have been placed in this home since the last inspection on 22 March 2024. However, the Registered Manager commented that several approaches have been made for prospective placements.

The Regulation Officer reviewed the impact risk assessments completed in this respect and was satisfied that they had been completed to an adequate standard. They considered the individual needs of those concerned and identified what mitigation and controls could be implemented to make the placement successful. This is no longer an area for improvement.

Area for improvement 6:

The Registered Provider must ensure that the internal escalation procedure for staff is reviewed, strengthened, and embedded where care staff wish to share concerns or elevated risks in the home.

Escalation procedures have been strengthened and embedded in this service since the last inspection on 22 March 2024. Care staff now understand their responsibilities to report elevated risks and how to do this. In addition, the Registered Manager and senior care staff know how to escalate concerns or increased risks to senior management and how to report health and safety incidents where staff may have been placed at risk or where there was a near miss. This is no longer an area for improvement.

Area for improvement 7:

The Registered Provider must ensure that all care staff have completed mandatory training as per the Children's Home standards. In addition, care staff must have completed or refreshed MAYBO training and have access to trauma-informed approach training.

Compliance with the mandatory training offer in this service has improved since the last inspection on 22 March 2024; however, some gaps remain. Most care staff have refreshed their MAYBO training, with other staff due to complete this by the end of October 2024.

The home now benefits from a trained first aider, and all staff are undertaking Basic Life Support training in November 2024. Care staff have had some access to trauma-informed approaches; however, they have yet to have formal training in this critical area. A review of the therapeutic model is under review by the wider service, with a decision to be made by the end of 2024 alongside a staff training plan. Adherence to mandatory staff training remains an area for improvement.

Area for improvement 8:

The Registered Provider must ensure that there is therapeutic oversight and input for children in residential care and that care plans reflect therapeutic trauma-informed approaches.

There has been significant improvement in this area. Therapeutic oversight has been provided regularly, which has equipped staff with additional skills and strategies in trauma-informed approaches, such as Theraplay (dyadic child and family therapy), PACE (Playfulness, Acceptance, Curiosity and Empathy) and adopting a Compassionate Mind. This has been facilitated during weekly staff meetings and as part of care planning for care receivers. This translates into staff helping care receivers to improve their emotional regulation and open up about their feelings.

Senior staff have developed targeted key work sessions for care receivers with a range of needs and associated risks. These sessions draw upon trauma-informed approaches, are strength-based, and seek to build on what is working well to address concerns and risks with small but measurable steps.

A professional who has regular contact with this service confirmed that they continue to provide therapeutic input at weekly team meetings and also made the following comments:

"The team at Xxxx have been a joy to work with; they bring lots of their own ideas to the table, are open to new ideas, and always carry through on suggestions and plans. I have found them very warm and positive as a team. They communicate well with each other to ensure consistency and are patient, persistent and nurturing with Xxxx. They have been interested in training offered by Xxxx drawing on compassionate mind therapy and theraplay and have a good formulation of Xxxx presenting concerns."

One senior staff member commented, *"The staff team are now proactive in the care they provide, rather than being reactive to situations."* This is no longer an area for improvement.

Area for improvement 9:

The Registered Provider must ensure that the transition planning procedure is reviewed and strengthened when care receivers are introduced to a children's residential home. This procedure should prioritise promoting listening to care receivers' views, wishes, and preferences.

Evidencing sustained change in the transition planning procedure in this service is not fully possible in the timeframe since the last inspection in March 2024. However, transitions that have occurred have been thorough in their planning and involved multi-disciplinary teams, including clinical psychology. Importantly, care staff maintained contact during transitions to build purposeful and trusting relationships.

There was also evidence of pathway planning for young people towards independence and leaving care, including listening to their views, wishes, and feelings and involving their family where possible. The Regulation Officer was satisfied that this no longer needs to be an area for improvement.

Area for improvement 10:

The Registered Provider must ensure that the offer of advocacy services to care receivers is revisited (if they have previously refused this support) when major care planning decisions are being made concerning them.

Care receivers in this service are actively engaged with advocacy services and benefit from having their voices amplified and heard. In addition, there is evidence of other stakeholders and agencies advocating for care receivers to ensure that their wishes and views are considered and respected. This is no longer an area for improvement.

Area for improvement 11:

The Registered Provider must ensure that care staff are provided with opportunities for debriefs and group supervision led by a manager following significant events that may impact staff welfare and promote a continuous learning culture.

The Registered Manager provided examples of debriefs being provided to care staff, where continuous learning is a key feature. These were appropriate and reflected the management of risk and significant decision-making that could impact staff wellbeing. The Registered Manager has also ensured that care staff are aware of the wellbeing offer from the wider organisation, such as an online wellbeing library and fast-tracked access to talking therapies.

Since the last inspection in March 2024, the group supervision offered for care staff has improved. This has included members of the staff team accessing a clinical psychologist who has provided advice and support regarding therapeutic approaches, which can now be evidenced in the care being delivered in this service.

Area for improvement 12:

The Registered Provider must ensure that formal reflective supervision is provided to care staff every four weeks as per the Children's Homes Standards.

The team structure in this service has been strengthened since the last inspection in March 2024. There are now two senior staff delivering reflective supervision to the staff team. The Registered Manager has completed reflective supervision training, and the two senior care staff are due to attend this training in the near future. The Regulation Officer examined the central supervision matrix and was satisfied that supervision was being carried out per the Standards. This is no longer an area for improvement.

IMPROVEMENT PLAN

There were three 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 3.7</p> <p>To be completed by: 7 April 2025 (6 months from the date of inspection)</p>	<p>The Registered Provider must ensure the development of a comprehensive recruitment and retention strategy for care staff, which should encompass a plan for the recruitment of registered managers.</p> <hr/> <p>Response of Registered Provider:</p> <p>There is at present a freeze on recruitment due to the formal procedure around the service development programme. This programme will result in some home closures and new homes opening within the first quarter of 2025. In consultation with the Trade Unions and within appropriate HR processes we have a commitment to ensure there are no redundancies whilst we relocate managers and staff across the new configuration of homes.</p> <p>We have also embarked on a piece of work to look at job descriptions/person specifications and we are undertaking a review of terms and conditions of managers and staff. A third workstream is looking at staffing establishments and rotas. We also expect those three pieces of work to conclude in first quarter 2025. At that stage we will be looking to recruit to the vacancies that our planning has indicated will be required to bring staffing levels etc. up to appropriate levels.</p>
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	<p>The recruitment of RMs will be covered in the workstreams outlined above and will be prioritised for recruitment once work is completed.</p> <p>The Registered Provider will ensure that ongoing recruitment is in the process for registered managers and full time staff roles, and it is anticipated that this will enhance the quality of the service provided and permit a staffing structure consistent with the home's Statement of Purpose.</p>
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<p>Area for Improvement 2</p> <p>Ref: Standard 10.10</p> <p>To be completed by: 7 January 2025 (3 months from the date of inspection)</p>	<p>The Registered Provider must ensure that there is a policy regarding supporting care receivers on holiday and this must specify minimum staffing ratios to ensure care receiver and care staff safety and wellbeing.</p> <hr/> <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 fully refreshed suite of policies and procedures.</p> <p>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 and that reflect best practice in social care and safeguarding, including holidays and staffing ratio to ensure best practice, and safeguarding is in place for care receivers.</p>
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<p>Area for Improvement 3</p> <p>Ref: Standard 11.4</p> <p>To be completed by: 7 April 2025 (6 months from the date of inspection)</p>	<p>The Registered Provider must ensure that all care staff have completed mandatory training as per the Children's Home standards. In addition, care staff must have completed or refreshed MAYBO training and have access to trauma-informed approach training.</p>
	<p>Response of Registered Provider:</p> <p>The Registered Manager will ensure that all care staff comply with Children's Home Standards regarding the completion of mandatory training in a timely manner. The Registered Manager is working closely with a learning and development officer for children's residential services to strengthen identification of training needs and to ensure compliance is met going forward.</p> <p>The training matrix reflects mandatory and refresher training that has been completed for most of the core staff who work at the home, and other staff have planned session(s) to refresh MAYBO before the end of this year.</p> <p>Shift Leaders for this home continue to support care staff within monthly supervisions to prioritise mandatory training, and refresher training within timescale. Also, care staffs' appraisals will reflect this area as a main goal.</p>

	<p>The Registered Manager continues to be working closely with a learning and development officer for children's residential services and a package of training is under development by both Head of Services and CAMHS colleagues in order to provide staff with a 'tool kit' which better matches the demands of the work.</p> <p>We are looking towards Quarter 1 of next year to roll out relevant training.</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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