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# STATES OF JERSEY



## **CARE INSPECTORATE REPORT OF A FOLLOW-UP INSPECTION OF SERVICES FOR LOOKED-AFTER CHILDREN IN THE STATES OF JERSEY: SEPTEMBER 2013**

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**Presented to the States on 13th November 2013  
by the Minister for Health and Social Services**

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**STATES GREFFE**





**Report of a follow-up inspection of services for looked after children in the States of Jersey by the Care Inspectorate**

**September 2013**

## 1. Introduction

The Care Inspectorate is the independent scrutiny and improvement body for care, social work and child protection services in Scotland. It is accountable to Scottish Ministers and its governing board. The States of Jersey asked the Care Inspectorate to carry out an inspection of services for looked after children to fulfil one of the recommendations of the Williamson Report<sup>1</sup>.

Scottish Ministers agreed for this to take place and the Care Inspectorate carried out an independent inspection of services for looked after children in 2011. A report of the findings of this inspection was provided to the States of Jersey in January 2012 and subsequently reported on its government website<sup>2</sup>. Following the inspection, States of Jersey identified the actions they needed to take in response to all of the fourteen recommendations set out in this report. They prepared and published an action plan to guide these improvements. Inspectors revisited Jersey in July 2013 to assess the extent to which the quality of services for looked after children had improved and to report on the progress made in response to the recommendations in the report published in January 2012.

This follow-up report sets out our findings and the contents are solely the independent and professional view of the Care Inspectorate.

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<sup>1</sup> An inquiry into child protection in Jersey Andrew Williamson assisted by Peter Smallridge, June 2008

<sup>2</sup> [http://www.gov.je/SiteCollectionDocuments/Caring%20and%20support/R\\_StatesofJerseyInspectionofServicesforLookedAfterChildren\\_CS\\_230112.pdf](http://www.gov.je/SiteCollectionDocuments/Caring%20and%20support/R_StatesofJerseyInspectionofServicesforLookedAfterChildren_CS_230112.pdf)

## **2. The context for providing services for children and young people who are looked after in the States of Jersey**

There has been significant strategic and organisational change in services covering health and social care in the States of Jersey over the last few years. The white paper *Caring for each other, caring for ourselves* (September 2012) sets out proposed changes and planned improvements across health and social care services. Key aims for children and young people include improving their health, social wellbeing and educational attainment. There is also an aim to improve the experiences of children, young people and families through an integrated approach to providing the services they need and to do this at an earlier stage. There is a clear commitment to increasing the proportion of children who are looked after in foster care and to reducing the numbers who need to live in residential care. Plans for the continuing development of health and social services for children, young people and families is the responsibility of the Children's Policy Group<sup>3</sup>. The Ministers for Health and Social Services, Home Affairs and Education, Sport and Culture, along with senior officers form the Children's Policy Group. This group provides political leadership across all issues affecting children and young people.

Social Services in Jersey sit within a Health and Social Services Department<sup>4</sup> which includes the island's general hospital. Within this wider department community services for vulnerable children and adults, their families and carers are delivered through Community and Social Services. This service has been restructured and there are now three directors responsible for adult services, older adult services and children's services. In the last year, a Planning, Performance Management and Support Team has been established and leads on governance and quality assurance across these services. Children's Services now include social work, residential child care and specialist and allied health professional support services such as speech and language therapy, services for children and young people with complex needs and child and adolescent mental health services.

## **3. Progress towards meeting the recommendations of the Care Inspectorate**

The report published in January 2012 made 14 recommendations for improvement. For the purposes of reporting on the level of progress made, the recommendations have been grouped together around 7 themes. The 14 recommendations and how these have been grouped around the themes are set out in an Appendix 1 at the end of this report. The 7 themes are:-

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<sup>3</sup> <http://www.gov.je/pages/contacts.aspx?contactId=541>

<sup>4</sup> <http://www.gov.je/Government/Departments/HealthSocialServices/Pages/WhoWhatHealthSocialServices.aspx>

- Planning and improving services for children
- Raising awareness about corporate responsibilities
- Measuring performance and outcomes
- Listening and responding to the views of children and young people
- Improving the quality of residential care for children and young people
- Improving social services out of office hours
- Introducing comprehensive operational procedures

### **3.1 Planning and improving services for children**

Five recommendations were made in relation to planning and improving children's services.

**3.1.1** *A statement of purpose and rationale for the new structure, with clearly articulated roles and responsibilities, should be urgently produced. Realistic timescales should be set with clearly stated accountability.*

The new structure in Children's Services is a very positive step in taking forward the vision for looked after children and young people in Jersey. *Children's Services – a vision for Jersey* usefully sets out how the functions carried out by children's services meet with the States of Jersey corporate objectives and strategic direction. Staff were fully involved in an event to consider their role in supporting and enhancing the lives of the most vulnerable children and young people. They worked together to develop and agree a shared vision for Children's Services which fits well with *Children and Young People – A strategic framework for Jersey*.

Clearer lines of responsibility and accountability have been created within the new structure and this has helped to improve working relationships, both within Children's Services and with partners. Staff are much clearer about the strategic direction of Children's Services, and express greater confidence in their leaders. In the Care Inspectorate's staff survey 50% of respondents agreed there was a clear vision for looked after children and young people in 2013 compared to 23% in 2011. Additionally, 56% of respondents agreed there was effective leadership of change across Community and Social Services in 2013 compared to 12% in 2011.

Some staff teams have found it useful to create statements of purpose and this is helping them to have a clear understanding of where they fit in the structure and their role in delivering quality services for looked after children and young people. Other teams are less clear and more needs to be done to improve their understanding about their particular role in delivering positive outcomes. Managers should continue to engage in communication and dialogue with staff helping them to understand what it is they need to do to realise the vision for children and young people.

**3.1.2** *Children's Services should develop a systematic and comprehensive approach to service planning. Building on the proposed Children and Young People's Plan, service and operational (team/unit) plans must both reflect and take forward agreed strategic objectives.*

A multi-agency working group has produced a strategic plan for all children and young people. *Children and Young People – a strategic framework for Jersey* is a comprehensive plan published in November 2011 following extensive consultation with children, young people, parents and professionals. The framework sets out an ambitious shared vision: *We want all children and young people to grow up in a safe, supportive island community in which they achieve their full potential and lead happy, healthy lives.*

There is a strong and clear commitment to realise this vision through six outcomes for children and young people. These are set out to ensure that all children and young people can be healthy, safe, achieve and do, grow confidently, be responsible and respected, have a voice and be heard. Six working groups organised around these six outcomes have been established to determine what needs to be done to improve the way services are provided and to improve outcomes for children and young people. The working groups are still at an early stage in taking forward this work.

Currently, plans to improve and enhance services for children and young people, including those who are looked after, is driven by the Children's Services Improvement Plan. This contains a set of actions for improving the way in which services are provided. The linkages between the strategic framework and the service improvement plan are not sufficiently clear. There is scope to align the improvement plan with the six outcomes set out in the strategic framework. This will enable a stronger focus to be given to improving outcomes and the life chances of vulnerable children and young people.

**3.1.3** *Community and social services should review all the outstanding recommendations from previous reports, and, together with our recommendations, draw up one action plan which includes them all. This should involve rationalising some, grouping others, deleting those which no longer apply, and deciding on priorities. This action plan should include clear and realistic timescales and lead responsibilities.*

The Children's Services Improvement Plan has been successful in bringing together a large number of recommendations from previous reviews and external reports alongside the 14 recommendations from the Care Inspectorate's independent inspection of services for looked after children. A thorough review of the large number of actions contained within a series of actions plans carefully identified those areas for improvement which still needed to be made and those which had been achieved or were no longer appropriate. These were collated into a single Children's Services Improvement Plan which provides a more streamlined and manageable plan which can be monitored more effectively by the Children's Policy Group.

Teams of staff across children's services have action plans which are firmly based around the service improvement plan. Notable progress has been made in giving clear direction to staff in their work. Seventy-four per cent of staff who responded to a survey carried out by the Care Inspectorate in 2013 agreed their team had a plan which gave clear direction to their work compared to 49% in 2011.

The Children's Policy Group has focused closely on each of the recommendations and improved quality and detail in management information has assisted the group to monitor progress. The group is now confident in overseeing progress against the actions set out in the improvement plan and a substantial number of recommendations have been met satisfactorily within the last year.

The Children's Policy Group and senior managers in Children's Services should now ensure that the strategic framework and outcomes are used to drive service planning and identify priorities for improvement. Senior managers are committed to introducing a systematic approach to self-evaluation and to building capacity for improvement. In doing so, they should ensure a strong focus on measuring impact and gathering evidence about how well services are meeting the outcomes set out in the strategic framework.

**3.1.4** *Community and Social Services should develop a comprehensive commissioning strategy for children's services.*

Progress towards this recommendation is still at a very early stage. There is a clear commitment to developing a commissioning strategy and some positive ground work has taken place. The recently appointed deputy director for commissioning is concentrating appropriately on setting firm foundations for the future through a strategy across health and social services. This includes developing close partnership working with other key services, in particular with education services. Voluntary sector organisations are beginning to express how their work complements existing services and demonstrate the benefits and outcomes of their work for children, young people and families. Performance information about both individual outcomes and population needs is required in order to provide a sound base for a robust commissioning strategy.

**3.1.5** *As part of the overall change programme underway within Community and Social Services, senior managers should develop and implement a staff communications and engagement strategy.*

A comprehensive communications strategy is now in place across children's services. This has been welcomed by staff and has been successful in keeping them informed about key changes and providing opportunities for them to contribute ideas. In the Care Inspectorate's staff survey carried out in 2013, 46% of respondents agreed that senior managers communicated well with them. This is a significant improvement from 15% in 2011. Senior managers are committed to achieving open communication and are



committed to continuing to improve their engagement with staff. However, there is still some work to be done to help staff feel more secure and confident about future plans. There were a few examples where the need to communicate key messages about planned changes and the consequences of these had not been fully considered such as the sudden closure of a children's house and changes to office accommodation.

### **3.2 Raising awareness about corporate responsibilities**

One recommendation was made in relation to raising awareness about corporate responsibilities for children and young people.

**3.2.1** *Community and Social Services should plan a range of induction activities for States members in key areas of their functions, especially in corporate parenting and child protection, to be implemented following the next election. It would be helpful if this was given a high priority in any planned induction at corporate level within the States.*

A very positive start has been made to raising the awareness of corporate parenting and safeguarding children and young people. A helpful induction on corporate parenting and safeguarding was provided for newly elected States Members in May 2012. This included visits to children's houses. This promoted very positive engagement from members increasing their knowledge and understanding of their responsibilities for looked after children. Staff perceptions of elected members have shown a positive improvement with 49% agreeing that services for looked after children were highly valued by elected members in 2013 compared to 21% in 2011. Plans to keep members informed and on board throughout their tenure should now be developed and implemented. Feedback from those who took part could be better used to shape future plans and services should continue to involve children and young people in future events.

### **3.3 Measuring performance and outcomes**

Two recommendations were made in relation to measuring performance and outcomes.

**3.3.1** *Community and Social Services should develop and implement a comprehensive means to define and measure the outcomes for looked after children and young people.*

A range of information is gathered about looked after children and, although this is helpfully being expanded, it is not yet brought together to enable effective performance management. Data about some outcomes for looked after children and young people shows positive results in some important areas. Data in relation to school attendance, educational attainment and exclusions of looked after children have been gathered for some time. Educational attainment of looked after children is reviewed closely and there is an increasing level of detail in the information gathered. Schools are now reporting on how each looked after child is performing, whether they are

performing above expectations, in line with expectations or below expectations. This is proving very helpful in supporting children and young people to do as well as possible at school. There is, as yet, no specific data available about the post-school educational and employment destinations of children who have been looked after.

A positive start has been made to gathering general information about the health of looked after children and in time this should provide useful trend data. A looked after children nurse has been in post for just under two years to improve the health and well-being of looked after children. Early health assessments can ensure that health or medical needs are identified and met. Regular health check-ups are designed to pick up on emerging physical or mental health problems at an early stage. There is scope to improve the information from this work to help measure health outcomes for looked after children and young people.

Independent Safeguarding and Standards (ISS) is now beginning to gather important information assisted by the recent addition of administrative support. Over time, this could provide very valuable qualitative information to help shape service improvement. The Jersey Child Protection Committee has agreed a multi-agency data set based on information services were already collecting however, not all services are contributing data yet. A new multi-agency safeguarding hub (MASH) will gather performance data routinely once it is established.

**3.3.2.** *Community and Social Services must improve their collection of accurate performance information. A performance management system should be set up and used to develop and improve services.*

A comprehensive approach to gather evidence of impact and outcomes has yet to be agreed and implemented. A small number of social services measures are already gathered in line with procedures in England, for example, the balance between looked after children in residential care and those in foster care. Some very useful exploratory work has been carried out to identify a Jersey data set in line with information gathered in England. An effective performance management system is not yet in place to help services to assure themselves that they are achieving continuous improvement. There is an anticipated time lag between agreeing what data is to be gathered, setting up systems to gather the information and being able to draw conclusions on trends. The strategic framework for children and young people in Jersey identifies six key outcomes and the information already gathered could be usefully linked to this. Timely decisions are now needed to ensure that services can measure progress in improving outcomes for children and young people.

### **3.4 Listening and responding to the views of children and young people**

Two recommendations were made in relation to listening to the views of children and young people and responding to their complaints.

**3.4.1** *The views of young people who are looked after should be systematically and meaningfully gathered, and acted upon where appropriate. Processes should be put in place to develop ways of allowing them more say regarding their care.*

There has been very positive progress in listening to the views of individual children and young people and they now have more say in relation to their care. A systematic approach to gathering the views of children and young people to inform service improvements has been delayed, until very recently, by a lack of administrative capacity.

Independent Safeguarding and Standards (ISS) is involving children and young people effectively in decisions about their care. Children and young people were involved very effectively in developing new paperwork for review meetings and the result of this work is valued by children, young people and staff. ISS has worked hard to successfully establish the expectation that all children and young people will participate in looked after children meetings. Overall, participation by children and young people in meetings is working well and they now have some choice about where meetings are held and who attends. Greater consistency is now needed to ensure that all children and young people are able to participate fully in decisions about their lives and the care they receive.

Involvement of children and young people in their care proceedings is improving as courts become increasingly responsive to requests for children and young people to attend. Where children and young people are subject to proceedings in respect of secure accommodation there is a presumption that the young person will be present in court, or will be legally represented.

A successful recruitment campaign, involving young people, has strengthened the pool of volunteers on the Board of Visitors for children's houses. As a result, the regularity of visits to children's houses has increased and visitors are available to young people at other times by telephone. The links between the Board of Visitors and the Children's Policy Group, to whom they are accountable, have improved and provide a more effective route to raising concerns about looked after children and young people. The Board of Visitors are supported well by the Children's Policy Group and they are able to raise concerns expressed by children and young people and to come to satisfactory resolutions. There are plans to extend the remit of the Board of Visitors to children and young people receiving regular residential respite care. The imminent introduction of an independent advocacy service provided by NSPCC will provide another route for children and young people to be heard and receive independent advice and support.

There is a plan to have a participation worker, independent of children's services, to work with children and young people in care or leaving care but this has yet to be implemented.

**3.4.2** *All looked after children and young people must be provided with information about how to make a formal complaint. The independent reviewing officer should establish formal links with the Health and Social Services complaints officer.*

Complaints and dissatisfaction from children and young people are dealt with through a number of different routes; however, more could be done to make it easier for children and young people to use formal processes. Not all looked after children and young people know how to make a formal complaint and formal procedures are used very rarely by looked after children and young people. The form for recording comments, compliments and complaints in Health and Social Services is not available to children and young people in a format which is easily accessible to them. Looked after children and young people can and do make suggestions and complaints to staff in children's houses, social workers, ISS and to the Board of Visitors. ISS deals with many issues raised by children and young people at an early stage and has positive working relationships with the Health and Social Services complaints officer. A system of 'practice alerts' provides a helpful way to raise matters about individual children or where patterns of concerns are emerging. This is having a positive impact on improving work practices. Better use of information about the concerns and complaints raised by individual children and people could usefully identify any themes or patterns to inform service improvement.

### **3.5 Improving the quality of residential care**

Two recommendations were made in relation to improving the quality of residential care for children and young people.

**3.5.1** *Community and Social Services should conduct an urgent review of residential child care, looking at the number of people acting up or in temporary posts, and the wider impact of the campus model on the quality of care.*

Progress in relation to a review of the effectiveness of the campus model for residential care in providing high quality care has been slow. Services are urged to carry this out with some urgency.

A number of children's houses have closed and new ones have opened over the last two years. This has achieved the aim of having smaller, more 'homely' units. Almost all management posts are filled and the reliance on bank staff has reduced. It is likely that children and young people living in the children's houses are experiencing the benefits of these improvements in the quality of care as a result of the changes and improvements which have been made. The numbers of residential care staff and young people living in children's houses responding to a request to meet with inspectors was too low to draw firm conclusions about the impact of these changes.

Residential care staff are not always designated to specific units and can be moved from one unit to another frequently to provide adequate cover. An evaluation of the impact of frequent staff changes on the quality of relationships and quality of care should now be carried out.

There is an absence of a vision for residential child care in Jersey. It is therefore difficult to see how the way in which this type of care is provided resonates with the wider vision for all children, young people and families. Decisions which affect the staff and children and young people working and living in residential services are made without reference to a clear strategic direction. For example, there are plans to introduce an intensive support team to work with young people to prevent them becoming looked after. Some residential care staff are already providing intensive support to young people in the community without being part of an identified team. An adolescent hostel, where significant improvements had been made following our inspection, is now to close. The current residents will move to a voluntary sector hostel which includes young people in their twenties. Little consideration has been given to the potential risks this may hold for vulnerable 16 year olds living with 25 year olds. Senior managers should with increased urgency review the way in which residential care services are provided and assess the quality of care for individual children and young people. They should also consider the introduction of quality assurance systems and external validation of the quality of care and the impact and outcomes achieved for children and young people.

**3.5.2** *Community and Social Services should urgently review the training and support of residential staff to remove any barriers to providing bank staff with basic training, particularly, in therapeutic crisis intervention (TCI), child protection and first aid.*

Notable progress has been made in relation to this recommendation. The Planning, Performance Management and Support team has carried out a comprehensive training needs analysis across Community and Social Services. As a result training priorities have been identified to ensure statutory and corporate requirements are covered. Budgetary constraints have meant that training and development opportunities are limited to those which are considered essential. Managers have taken a strategic approach to releasing and enabling staff, including bank staff, to complete training. Helpful training plans, including team training plans and a workforce development action plan have been introduced. Child protection and therapeutic crisis intervention training is now provided to all residential child care staff when they are appointed and they are required to qualify in emergency first aid after a period of probation.

The Planning, Performance Management and Support team is starting to raise awareness about the importance of reflecting upon the difference training has on the experiences and outcomes for people who use services. Measuring the impact of training on working practices and on the quality of the experiences of children and young people would be a helpful development.

### **3.6 Improving social services out of office hours**

One recommendation was made about improving the out of hours service.

#### **3.6.1** *The senior management team should conclude the work on the out of hours service and establish the new system as a matter of priority.*

A new system of providing social services out of office hours has been implemented. This addresses successfully the challenges associated with providing this type of service out of office hours in a small island community. The new system provides a level of cover which addresses the need to be able to respond immediately to emergency and crisis situations in circumstances where the overall demand for social services out of hours is low. Partners were generally more positive about the effectiveness of the out of hours service following the introduction of the new arrangements.

Comprehensive and helpful processes and procedures have been introduced. Practical support and IT equipment including laptops, mobile phones and pagers are available out of hours. A rota of managers provides an appropriate arrangement for decision-making and managing risks. Staff working out of office hours are now able to access relevant information held by social services. This has improved their ability to carry out sound assessments of risks based on up-to-date information and to respond more appropriately to requests for assistance. The new arrangements were reviewed after six months and senior managers have made further improvements as a result. For example, they have improved staff safety when they attend particular buildings at night. A very recent agreement to inform the police about who is on the rota should minimise response times.

### **3.7 Introducing comprehensive operational procedures**

One recommendation was made about introducing comprehensive operational procedures.

#### **3.7.1** *Community and Social Services should produce comprehensive operational procedures for children and families staff.*

There has been limited progress in developing and implementing a manual of procedures for staff working in the care and protection of children and young people. Community and Social Services have commissioned Tri-X to publish web-based manual of procedures in quarterly batches. The Policy Development, Governance and Quality Assurance Manager, a senior legal advisor and the three heads of service are overseeing this and staff have been involved in prioritising what is needed. The operational procedures are being developed at a time of significant change in children's services. As a result progress on some procedures has been delayed and the pace of progress in relation to this recommendation is slow. For example, work on initial child protection referrals has been delayed until the multi-agency safeguarding hub is in place. Procedures are thoroughly quality assured and

tested for consistency to ensure they fit with those already in place and support a corporate approach. The risks associated with the lack of procedures, or interim guidance, to guide staff in their work remains. Services are urged to ensure that the timescales for completion places a high priority on those procedures necessary to protect children and young people from harm and abuse. There is scope to increase and improve communication and understanding about the procedures manual as this is developed in order to embed changes to working practices.

#### **4. Conclusion**

The Children's Policy Group has set a clear direction for children's services in Jersey. A new structure for children's services has been designed and implemented to help take forward the vision for children and young people. The Children's Services Improvement Plan has been successful in bringing about a number of important improvements in the way services are provided. There is increased confidence in strategic leadership and a greater understanding of the strategic direction for children's services and corporate responsibilities for looked after children and young people. Overall, services for looked after children and young people in Jersey are improving. Encouraging improvements have been made in the physical environment for children's houses and in the training provided to residential care staff. Individual children and young people have a greater say regarding their care. They feel involved and enthusiastic about this and could now be involved in more meaningful participation in policy and service development. More could be done to make it easier for children and young people to use the formal complaints system.

Services are asked to give priority to some recommendations where progress has been slower and address these with urgency. Some outcomes for some looked after children and young people are improving but services do not yet have an effective system to gather information about the difference they are making to the lives of children and young people. A review of the effectiveness of the campus model for residential care in providing high quality care has still to be carried out. An essential manual of procedures for staff working in the care and protection of children and young people is incomplete.

Senior managers now need to focus more on getting to know how well they are doing and identifying the best way to improve their services. Timely decisions are now needed to ensure that services can measure progress in improving outcomes for children and young people. Introducing systematic self-evaluation which focuses on outcomes will assist services to become forward looking and lead the necessary changes to make the biggest difference to the lives of children, young people and families. The children and young people's strategic framework provides an ideal structure to begin this.

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## Appendix 1

<b>Table of recommendations and themes</b>	
<b>Theme</b>	<b>Recommendations numbered against each theme</b>
Planning and improving services for children	14, 8, 1, 12, 4
Raising awareness about corporate responsibilities	13
Measuring performance and outcomes	2, 11
Listening and responding to the views of children and young people	3, 6
Improving the quality of residential care	9, 10
Improving social services out of office hours	5
Introducing comprehensive operational procedures	7

### **Recommendations as they appear in the Care Inspectorate report published in January 2012**

1. Community and social services should review all the outstanding recommendations from previous reports, and, together with our recommendations, draw up one action plan which includes them all. This should involve rationalising some, grouping others, deleting those which no longer apply, and deciding on priorities. This action plan should include clear and realistic timescales and lead responsibilities.
2. Community and Social Services should develop and implement a comprehensive means to define and measure the outcomes for looked after children and young people.
3. The views of young people who are looked after should be systematically and meaningfully gathered, and acted upon where appropriate. Processes should be put in place to develop ways of allowing them more say regarding their care.
4. As part of the overall change programme underway within Community and Social Services, senior managers should develop and implement a staff communications and engagement strategy.
5. The senior management team should conclude the work on the out of hours service and establish the new system as a matter of priority.



- 6.** All looked after children and young people must be provided with information about how to make a formal complaint. The independent reviewing officer should establish formal links with the Health and Social Services complaints officer.
- 7.** Community and Social Services should produce comprehensive operational procedures for children and families staff.
- 8.** Children's Services should develop a systematic and comprehensive approach to service planning. Building on the proposed Children and Young People's Plan, service and operational (team/unit) plans must both reflect and take forward agreed strategic objectives.
- 9.** Community and Social Services should conduct an urgent review of residential child care, looking at the number of people acting up or in temporary posts, and the wider impact of the campus model on the quality of care.
- 10.** Community and Social Services should urgently review the training and support of residential staff to remove any barriers to providing bank staff with basic training, particularly, in therapeutic crisis intervention (TCI), child protection and first aid.
- 11.** Community and Social Services must improve their collection of accurate performance information. A performance management system should be set up and used to develop and improve services.
- 12.** Community and Social Services should develop a comprehensive commissioning strategy for children's services.
- 13.** Community and Social Services should plan a range of induction activities for States members in key areas of their functions, especially in corporate parenting and child protection, to be implemented following the next election. It would be helpful if this was given a high priority in any planned induction at corporate level within the States.
- 14.** A statement of purpose and rationale for the new structure, with clearly articulated roles and responsibilities, should be urgently produced. Realistic timescales should be set with clearly stated accountability.