



**Jersey Care
Commission**

INSPECTION REPORT

Care Home 03

Care Home Service

**Les Amis
La Grande Route de St Martin
St Saviour
JE2 7JA**

25 November 2020

THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014, all providers of care homes, home care and adult day care services must be registered with the Jersey Care Commission ('the Commission').

This inspection was carried out in accordance with Regulation 32 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.

ABOUT THE SERVICE

This is a report of the inspection of a care home which is provided by Les Amis. At the request of the registered provider, the name and address of the care home has not been identified in this report in order to preserve the confidentiality of the care receiver who lives in the care home. This is one of 18 care home services operated by Les Amis. The service became registered with the Jersey Care Commission ('the Commission') on 5 July 2019.

The home has been operating as a care home for many years and was registered and regulated prior to the current legislation coming into force.

Registered Provider	Les Amis Limited
Registered Manager	Annette Burnouf
Regulated Activity	Care home for adults
Conditions of Registration	Personal care or personal support can be provided to two care receivers Category of Care is learning disability and autism Age range of care receivers is 18 years and over
Date of Inspection	25 November 2020
Time of Inspection	1.30pm – 4.15pm
Type of Inspection	Announced
Number of areas for improvement	Three

The Care Home is operated by Les Amis Limited and the registered manager is Annette Burnouf, who became registered with the Commission on 26 June 2020.

At the time of this inspection, there was one person accommodated in the home.

SUMMARY OF INSPECTION FINDINGS

This inspection was announced and was completed on 25 November 2020. The Standards for care homes were referenced throughout the inspection¹.

The Regulation Officer focussed on the following areas during the inspection:

- the service's Statement of Purpose and Conditions on registration
- safeguarding (adults)
- complaints
- safe recruitment and staffing arrangements (including induction, training, supervision, staffing levels)
- care planning
- monthly quality reports.

Overall, the findings from this inspection demonstrate that there is a strong focus on promoting skills and developing independence both within the home and the community. The manager and staff team are striving to ensure that the individual leads a fulfilling life and is enabled to meet their own personal care needs in order to promote and maintain their independent living skills. However, where the individual requires direct care and support this is provided.

Staff described the progress made in the care receiver's life which has been attributed to a motivated staff team who have empowered the individual to become less dependent upon care staff.

Care staff are deployed to the home at specific times which have been planned and discussed with the individual, based upon their recognition and awareness of the need for support with certain daily activities. Overall, it is very clear from discussion with staff and the registered manager and through an examination of care records, that the home is actively promoting the care receiver's wellbeing and independence.

The provider has arrangements in place to provide staff with access to regular training opportunities. New members of care staff follow a comprehensive induction programme which provides them with essential knowledge to provide support to care receivers. Formal supervision is provided to all staff by the registered manager.

There are three areas for improvement identified in this inspection report, one of which relates to the registered manager having adequate oversight of the recruitment process for all newly-employed staff. The other area for improvement is in relation to improving upon the governance structures in place to report monthly on the quality of care provided and compliance with registration requirements, Standards and Regulations. Information on the complaints procedure should also be available and explained to care receivers in an accessible and appropriate format.

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

INSPECTION PROCESS

Commission staff met with Les Amis senior management on 2 and 4 September to discuss a range of matters that each of the Les Amis registered services have in common. This was also an opportunity for Commission staff to meet with the registered managers as a group, away from the regulated activity. The organisation's response to the Covid-19 situation was discussed in detail alongside developments in care planning, staff training and quality assurance. This was a useful engagement and enabled the Commission to prepare for the inspection of each regulated activity.

Prior to the inspection visit, information submitted by the service to the Commission since the service became registered, was reviewed. This included any notifications and any changes to the service's Statement of Purpose. The findings from the most recent inspection, carried out on 12 November 2019, were also reviewed in advance of the visit.

The Regulation Officer spoke with the care receiver and with managerial and other staff. This inspection was undertaken in accordance with the home's infection prevention and control protocols.

During the inspection, records including the home's welcome pack, food records, staffing rosters and care records were examined. The Regulation Officer viewed the kitchen, lounge and staff office.

At the conclusion of the inspection, the Regulation Officer provided feedback to the registered manager.

This report sets out the findings of the inspection and includes areas of good practice which were identified. Where areas for improvement have been identified, these are described in the report and an action plan is attached at the end of the report.

INSPECTION FINDINGS

The service's Statement of Purpose and Conditions on registration

The care home service's Statement of Purpose was reviewed prior to the inspection visit. The Standards outline the provider's responsibility to ensure that the Statement of Purpose is kept under regular review and submitted to the Commission when any changes are made.

The Statement of Purpose was provided upon initial registration. Prior to the inspection visit, the registered manager had revised the Statement of Purpose and submitted it to the Commission. The findings from this inspection confirm that the home is operating in accordance with its Statement of Purpose and is able to demonstrate that it is continuing to meet its objectives as set out by the organisation.

The care receiver has access to the home using their own key and can leave the home at their own discretion, which was directly observed during the visit. There is currently one vacancy in the home and there are plans in place for another care receiver to move into the home. The registered manager described the consideration given to the compatibility of both care receivers and the impact upon both individuals were they to share a household. Both care receivers have been involved in consultations about the potential move with trial visits to be arranged before the final decision is made.

The Regulation Officer held a brief conversation with the care receiver, who was at home during part of the inspection visit. They were observed speaking with staff in a comfortable and relaxed manner. Staff described an understanding of interpreting the care receiver’s body language as part of their communication style.

The care home service is, as part of the registration process, subject to the following conditions:

Conditions of Registration	<p><u>Mandatory</u></p> <p>Maximum number of care receivers: 2 Number in receipt of personal care or personal support: 2 Age range of care receivers: 18 years and above Category of care provided: Learning disability and autism</p> <p><u>Discretionary</u></p> <p>The registered manager must obtain a Level 5 Diploma in Leadership in Health and Social Care by 26th June 2023.</p>
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A discussion with the manager and an examination of records provided confirmation that these conditions on registration were being fully complied with and are intended to remain unchanged. The manager advised that they had enrolled on a relevant diploma course earlier in the year and were progressing through it.

The Regulation Officer was satisfied that all conditions were currently being met.

Safeguarding (adults)

<p>The Standards for care homes set out the provider’s responsibility to ensure that care receivers feel safe and are protected against harm. This means that service providers should have robust safeguarding policies and procedures in place which are kept under review. Staff working in the service should be familiar with the safeguarding arrangements and should make referrals to other agencies when appropriate.</p>
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During the meetings with Les Amis senior management and the registered managers on 2 and 4 September 2020, it was confirmed that there are two in-house trainers

who conduct Level 1 (foundation level) safeguarding training for all new staff. Registered Managers were confident that staff can recognise a concern and can raise an alert in this regard. This forms part of the monthly supervision discussions. Registered managers reported that safeguarding is a theme which runs throughout all training programmes. There is a whistleblowing policy in place.

During the inspection, the Regulation Officer spoke with one newly-recruited member of staff who had recently completed their induction programme. They spoke of having been provided with safeguarding training and of the ways in which to report any concerns both within and outside of the organisation.

The registered manager and a staff member described some interventions that have been put in place to help keep the care receiver safe in both the home and the community. These interventions not only act as a means of assisting the care receiver to remain safe but also provide opportunities to maintain and develop their independence. The registered manager provided an example whereby the effectiveness of such interventions was of benefit when the care receiver was out in the community and had to respond to a situation that they had not encountered before. Staff also explained the ways in which the care receiver's welfare is promoted when there are no staff in the home.

The registered manager is responsible for managing two Les Amis homes. The Commission was advised during the meetings on 2 and 4 September of senior management's decision that registered managers would work remotely to reduce the amount of footfall into each home during the initial stages of the pandemic.

A discussion with the registered manager during the inspection confirmed that they had to rely on telephone and video call discussions with the staff team to enable them to remain updated about the welfare and wellbeing of care receivers whilst they were absent from the home. The manager described that once they returned to the home, she discovered unopened stationery materials that support staff had been instructed to use to support one care receiver's activity in the home

Should the registered manager be absent from the home at any stage in the future for a period exceeding 28 days, the Commission must be notified of the alternative management arrangements which are in place.

Complaints

<p>The Standards for care homes set out the provider's responsibility to ensure that there are arrangements in place for the management of complaints. This means that care receivers should know how to make a complaint and what to expect if they need to make a complaint. The service's staff should be familiar with the complaints management procedures and service providers should closely monitor their implementation.</p>
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The home's welcome pack includes details of the complaints process. Although an easy-read version of the welcome pack is available, this is only available in a written format. Other means of providing and communicating this information to care receivers should be considered. Care receivers and their representatives should be

made aware of how to make a complaint or of how to provide feedback about the service when any problems arise. The organisation's website did not provide any information about the ways in which to raise concerns or to make complaints. This is an area for improvement.

The registered manager advised that in the event of the care receivers moving into the home, they will be provided with information pertaining to complaints in a way that is reflective of their level of understanding.

Safe recruitment and staffing arrangements (including induction, training, supervision, staffing levels)

<p>The safe recruitment of staff is an important element of contributing to the overall safety and quality of service provision. The Standards and Regulations set out the provider's responsibility to ensure that there are at all times suitably recruited, trained and experienced staff available to meet the needs of care receivers.</p>

There has been a change of manager since the last inspection which was carried out on 12 November 2019. The registered manager took up their position in the home in early 2020, prior to the Covid-19 pandemic.

The registered manager was not provided with a formal induction programme. They confirmed that they had worked as a support worker elsewhere in the Les Amis service before taking up a managerial position to manage two homes. Shortly after they were appointed, the manager was required to both work remotely due to the Covid-19 pandemic and to keep in touch with staff in the home using technology. The failure to provide an appropriate induction to a new manager has the potential to reduce their effectiveness in this important role. This, in combination with a period of absence from the home, further weakens the provider and the manager's ability to assure themselves the home is being carried on in accordance with the Regulations and Standards. The registered manager confirmed that they receive support and supervision from their line manager.

Samples of the staff rotas were examined which indicated that the home was staffed appropriately in relation to the needs of the individual. There is a core staff team and the manager explained that consistency in staffing is important to keep a focus upon enhancing the care receiver's independent abilities. The manager advised the deployment of staff in the home has been based upon the care receiver's assessed needs and through consultation with outside health professionals.

Two staff members were recruited within the last six months and the registered manager was involved with the interviewing process. However, the manager advised that they did not have sight of the two references that were obtained and relied upon other staff within the organisation to confirm that these were satisfactory. The registered manager has a key responsibility in ensuring that all staff who are supplied to work with care receivers have gone through a safe recruitment process. Similarly, the manager must ensure all relevant information is obtained in order to decide about potential staff working with care receivers. This area requires improvement.

An examination of the care receiver's care records detailed some quality interactions and conversations with the staff team, which would support the manager's view that there are positive professional relationships formed and maintained in the home. The manager described the qualities of the staff team in terms of their enthusiasm and values and that these are positive in inspiring the care receiver in reaching their personal goals.

Some care staff had either already completed a Level 2 vocational award in health and social care, were in the process of undertaking this qualification or were registered to commence the training at the next available opportunity.

Care planning

The people to receive this service should have a clear plan of the care to be provided to them. This should be based on an assessment of their needs, wishes and preferences. The Standards and Regulations set out the provider's responsibility to ensure that care plans are person centred and kept under review. The staff delivering care should be familiar with the care plans and ensure that any changes in needs are communicated appropriately.

During the meeting with Commission staff on 2 September, the senior management team described a planned widespread overhaul to the ways in which care receivers' personal plans and care records are recorded. It was explained that the new system is to be more relevant to the communication needs of individual care receivers and more user-friendly. The manager advised that they had not been involved in either the discussion or planning relating to the intended revision of the computerised system.

At the time of this inspection, this change in the recording methodology had not commenced, and therefore samples of the care receiver's plans in the existing format were examined. These evidenced that the care receiver's autonomy, dignity and rights were promoted and there was evidence of them exercising personal choice in their life. Entries in the daily records showed that staff have encouraged the care receiver to attend community support services and were offered opportunities to be involved in new activities.

There were some high-quality entries made in the daily records which reflected the quality of care and support which was provided. The entries were reflective of stimulating and age appropriate discussions being had with the care receiver and implied that staff were enabling, motivating and supportive in their approach. The details recorded in the care records reflected the account provided by the registered manager and the staff member on duty during the visit regarding the level and type of support which was provided to meet the care receiver's needs. However, the records could be strengthened in that the care receiver's progress in meeting their specific goals could be more clearly expressed and measured.

Monthly quality reports

The quality of services provided by this service should be kept under regular review. The Standards and Regulations set out the provider's responsibility to appoint a representative to report monthly on the quality of care provided and compliance with registration requirements, Standards and Regulations. The manager should be familiar with the findings of quality monitoring activity and any actions required to improve the quality of service provision.

The systems in place for monitoring compliance with the Regulations and Standards require further development. Monthly quality reports were not being produced at the time of the inspection and the manager advised that there have been no quality-monitoring visits undertaken this year. The combination of the prolonged period of the lack of managerial presence in the home and insufficient quality assurance reviews is a concern. This is an identified area for improvement and was discussed with senior management staff on 2 September 2020.

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 3.6</p> <p>To be completed by: with immediate effect</p>	<p>The registered provider must ensure that the registered manager has appropriate oversight of the recruitment process.</p> <hr/> <p>Response by registered provider: The registered manager explained that due to the increasing numbers of COVID and the requirement to work from home during lockdown that a formal induction programme was not available although a support system was put in place linking the manager with a member of the SMT to support processes during this time. The team of registered managers at Les Amis also provided support and advice during this time.</p> <p>During the recruitment process of two new members it was acknowledge that the registered manager relied on the current system of HR overseeing references of candidates. Moving forward the reviewing of candidate's references will take place</p>
<p>Area for Improvement 2</p> <p>Ref: Standard 12</p> <p>To be completed by: with immediate effect</p>	<p>The provider must put suitable arrangements in place to report monthly on the quality of care provided and compliance with registration requirements, Standards and Regulations.</p> <hr/> <p>Response by registered provider: In the first part on 2020 the planned visits by the Head of Governance did not take place due to the first wave of Covid-19. We would like to note that managers were not left unsupervised or unsupported however operational norms did change to reduce the risk of spreading the virus. This has now been rectified and regular visits have been booked in (now that it is safe to do so) and are taking place with the Head of Governance, Registered Managers, Staff and Residents in each location.</p>
<p>Area for Improvement 3</p> <p>Ref: Standard 10.2</p> <p>To be completed by: within 2 months from the date of this inspection (25 January 2021)</p>	<p>The provider must ensure that people who receive care are provided with the service's complaints policy and procedures in a format which meets their individual communication needs.</p> <hr/> <p>Response by registered provider: The welcome pack and complaints policy should be provided to all service users and representatives when moving into Les Amis as part of the referral process. The welcome pack and complaints policy are available in written and easy read format.</p>

	<p><i>A written complaints policy was in situ in the lounge at K1 and staff had sat with the resident to read through and answer any questions that arose. The registered manager explained that an easy read format was not required at this time but could easily be put in place should a new resident move into the property and who may require a different learning format to meet their needs.</i></p> <p>This should not have been an issue as the most up to date complaints procedure welcome packs and easy read formats of all relevant documents for residents was circulated for use by all Registered Managers shortly after our meeting on the 2nd of September.</p> <p>The opportunity to ensure staff and managers are fully aware of the relevant procedures noted in this report will be taken immediately and followed up during the next Governance visit booked in with residents and their families.</p> <p>Les Amis website has an option to make a complaint in the contact us section a copy of the complaints procedures will be attached for reference.</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



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