



**Jersey Care
Commission**

INSPECTION REPORT

Maison La Corderie

Care Home Service

**Green Street
St Helier
JE2 4UG**

27 January 2021

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 Maison La Corderie Care Home. The service is situated in a residential area of St Helier within close proximity to the town centre and close to a bus stop and public car park. The home offers the provision of personal care or personal support to people over the age of 60 years, and long term or respite care can be accommodated.

The building was constructed in the 1970's, and bedroom accommodation is provided over three floors with communal areas provided on both the ground and first floor. The communal facilities include a lounge, dining room, activities room and a hairdressing salon. There are paved outdoor areas which care receivers can freely access from the exit points on the ground floor.

The home became registered with the Commission on 5 June 2019, although it has been operating as a care home for many years and was regulated under previous legislation.

The aim of the home, as described in the Statement of Purpose, is to '*provide excellent residential care for the older person aged 60 plus, inspired by our Christian concern, while at the same time continuing to support and promote their independence. To assist residents to live in a home from home environment, whilst empowering them to make their own choices*'.

The manager is a registered nurse and became registered with the Commission on 3 October 2019. This was the first inspection carried out since the manager took up their post.

Registered Provider	Methodist Homes for the Aged (Jersey) Limited
Registered Manager	Tania Heaven
Regulated Activity	Care home for adults
Conditions of Registration	Maximum number of care receivers is 33 Maximum number in receipt of personal care/ personal support is 33

	Category of Care is Old Age Age range of care receivers is 60 years and over
Date of Inspection	27 January 2021
Time of Inspection	9.45am – 3.00pm
Type of Inspection	Announced
Number of areas for improvement	None

At the time of this inspection, there were 28 people accommodated in the home.

SUMMARY OF INSPECTION FINDINGS

This inspection was announced and was completed on 27 January 2021 with consideration given to the home's infection control measures necessary due to Covid-19.

The Standards for care homes were referenced throughout the inspection¹ and 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 care receivers' health and welfare needs are met to a good standard. Information provided by care receivers, their representatives and one health professional were overwhelmingly positive regarding their experiences and their level of satisfaction with the care and support provided. Care staff have a detailed understanding and knowledge of care receivers' personal preferences and choices and their approach during the inspection was observed to be person-centred. Staff were seen to be spending time with care receivers engaging in various ways during the visit and there was evidence of good routine and respectful interactions between them.

The home environment was visibly clean, well-presented and odour free. The arrangements in place for prevention of infection were in line with appropriate infection prevention guidance in relation to the Covid-19 pandemic. Visiting restrictions were in place at the time of the inspection in line with Government advice, and staff were empathetic to the situation that this had created for care receivers and their families. Staff spoke of the ways that care receivers' social and

¹ The care home standards can be accessed on the Commission's website at <https://carecommission.ie/standards/>

emotional wellbeing was supported, and this was observed during the visit by staff enquiring of their comfort or if they wished to discuss any concerns.

Despite the pandemic, the provider, has made some significant improvements to the environment over the last year. This has included the installation of double-glazed windows, refurbishment of the activities room, upgrade in the kitchen and new furnishings in the dining room. In addition, an ongoing programme of redecoration is planned.

The staffing levels reflected the Statement of Purpose and meet the Standards. The registered manager maintains a regular presence in the home and the staffing skill mix is appropriate to meet care receivers' needs. Staff are recruited safely with recruitment checks obtained before staff start work, and they have access to ongoing training. Arrangements are in place for staff supervision which helps to underpin the safe delivery of care and support.

Care records contain sufficient information relating to the type and level of support care receivers require to direct staff when providing care and support. Care receivers confirmed the standard of food provided was of a good quality, appetising and nutritious.

There are no areas for improvement as a result of the inspection.

INSPECTION PROCESS

Prior to the inspection visit, information submitted to the Commission by the service since it became registered, was reviewed. This included any notifications and changes to the service's Statement of Purpose. A review of the findings from the previous inspection, which was completed on 5 August 2019 also formed part of the pre-inspection preparation and planning.

The Regulation Officer spoke with four care receivers regarding their experiences of living in the home. The registered manager, deputy manager, and four care assistants were also spoken with and the Regulation Officer observed some social activities that were taking place during the visit. The discussions with staff related to the provision of care and how care receivers are kept safe during the pandemic. A limited tour of the premises was undertaken where the communal areas were reviewed and a sample of two bedrooms.

During the inspection, records including, policies; staffing rosters; training records; quality assurance reports; pre-admission assessment records; care records and staff files were examined. Subsequent to the visit, contact was made with four family members who provided feedback of their experiences. Contact was made with two health professionals who were known to have visited the home and one person provided a response.

At the conclusion of the inspection, the Regulation Officer provided feedback to the manager. This report sets out the findings of the inspection and includes areas of good practice which were identified.

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 inspection found full compliance with the mandatory conditions on registration. This was evidenced through discussions with the manager and other staff about the range of care needs provided for. The registered manager described a situation whereby one care receiver's health needs had increased to the extent that it was recognised the home could no longer meet their needs and an alternative placement was found. This was arranged in conjunction with relevant health professionals. The fact that the home cannot support care receivers who are assessed as in need of nursing care is made clear in the Statement of Purpose.

Discussions with staff indicated that they had a good understanding of care receivers' needs. They described common interventions to include support with personal care, mobility, nutrition, maintaining safety and socialisation for example. Staff spoke of the ways in which the restrictions imposed by the pandemic had affected care receivers and described how they helped to maintain contact with family members through video and phone calls. Staff described how the restrictions in place at the outset of the pandemic were at odds with the home's usual values and practices which confirmed their understanding of respect to care receiver's liberty and freedom of choice.

Care receivers' representatives confirmed that the staff team were good at communicating with them and remain confident that their relatives are being appropriately cared for when they were not allowed to visit. They made the following comments regarding the level of communication in place:

"When I call the phone is answered and queries dealt with quickly, we are encouraged to keep communication with our family member there".

"I am called if there are any issues and the situation discussed and explained and views are sought, and actions agreed".

"The team also let me know when there is additional medical care that my relative needs or when there have been other issues concerning his wellbeing".

“The staff at the home are all very welcoming especially in these unusual times, they ring me with any information that I need to know and my relative looks so happy since she moved in”.

The manager has applied for an authorisation of a Significant Restriction on Liberty (SRoL), for one care receiver who due to their health condition is unable to leave the home unaccompanied. After the inspection, the manager notified the Commission that the application had been authorised from the relevant Government of Jersey department.

The manager described the process of assessment that was undertaken for one care receiver who had been admitted for respite care. The process matched the description as set out in the Statement of Purpose and evidenced that the care receiver’s family member was included and involved in helping them to decide to move into the home.

Provision is made for care receivers’ access to health professionals in a timely manner. Feedback from one health professional described the home contacting them instantly when one care receiver’s condition had changed. They commented that, “the staff were very pleasant and interactive; they gave clear and accurate information in order for us to adequately assess the individual. They completed the information in which we requested in order to aid our assessment and they took our advice on board, in order to best support the client.”

The manager provided evidence that they had a good understanding of priorities for improvement and was, along with the staff team working extremely hard to keep care receivers safe.

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

<p>Conditions of Registration</p>	<p><u>Mandatory</u></p> <p>Maximum number of care receivers: 33 Number in receipt of personal care/ personal support: 33 Age range of care receivers: 60 years and above Category of care provided: Old Age Maximum numbers of care receivers that can be accommodated in the following rooms: Bedrooms 1 – 30 one person Short stay ground floor – one person Short stay first floor – one person</p> <p><u>Discretionary</u></p> <p>1. The two bedrooms referred to as short stay ground floor and short stay first floor (which do not meet the minimum 12m² space standard are to be used to provide respite care only).</p>
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	<p>2. The newly registered manager must either provide formal confirmation from an appropriate educational source that their academic qualifications have equivalence to QCF Level 5 Diploma in Leadership in Health and Social Care Module or obtain this specific qualification by 2nd October 2022.</p>
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Following the inspection visit and review of information held by the Commission, the registered manager has provided confirmation that she has completed the qualification as set out above. As such, the Commission is satisfied that the discretionary condition applied at the time of registration has been met and has since been removed from the registration.

Safeguarding (adults)

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.

At the time of inspection, the home was closed to visitors in line with Government of Jersey advice. The Regulation Officer underwent a screening process upon arrival at the home which included temperature recording and being requested to practice hand hygiene.

The layout of furnishings in the communal areas was appropriate to meet care receivers’ needs and furniture had been arranged to facilitate physical distancing. Overall, the home was found to be in a state of good repair and improvements have been made to the environment to include refurbishment of the activities room with a wall-mounted TV, double glazed windows and new dining chairs. A programme of redecoration is underway, and some corridors have been redecorated also.

The security report which was completed by the manager last year was examined. This report was completed which provided an overview of the internal and external environment to identify where improvements to the security of the building can be made, and recommendations are to be acted upon.

The home appeared visibly clean and hygienic and there were a range of measures in place to mitigate the risk of infection. All staff were noted to be wearing protective equipment and described their responsibilities in adhering to infection prevention procedures, both on an ongoing basis and in relation to Covid-19. The manager explained that they had maintained contact with the community infection control team to seek ongoing guidance in relation to infection prevention.

The registered manager described having made changes to the staffing roster at the outset of the pandemic which was part of the contingency plans to provide consistency of care and to plan for staff absences due to Covid-19. The changes to the staffing arrangements took account of skill mix and qualifications also.

Arrangements are in place to ensure that care receivers are kept safe, and that all staff receive training in adult safeguarding. The safeguarding policy was examined and is available to staff to guide practice. Staff described they knew how to recognise signs of abuse and were aware of the ways in which to escalate concerns. Staff who were spoken with also described the ways in which they would make referrals to the district nursing service when care receivers require nursing oversight with aspects of their care such as wound and diabetes management. The home is compliant in submitting notification of incident records and death notifications when they occur.

A sample of medication administration records were examined during the inspection which evidenced that care receivers had received their medication consistently in accordance with the directions to administer. Medication which required refrigeration was found to be stored in line with the manufacturer's directions. A discussion with two staff members evidenced their understanding of the procedures for administering controlled drugs and the ways in which to minimise the risk of administration errors.

Care receivers who met with the Regulation Officer stated that they felt protected from Covid-19 and one person described the efforts staff had gone to in keeping them well and safe during the pandemic and commented "the girls all kept us safe and got us through last year, we should all be appreciative of the great job they do in caring for us".

The representatives of care receivers who were consulted, each described confidence in the home's ability to keep their relatives safe and well cared for. They described their experiences and observations:

"during lockdown it has been understandably difficult for both the residents and staff for many reasons. In my experience, the staff went (and still go) to great lengths to ensure the safety and wellbeing of all the residents. Wonderful".

"Hygiene and all other housekeeping aspects are very good and never had an issue"

[Name] "is very happy there, far better than we ever envisaged. We did worry about that particularly during lockdown, but [name] is still very happy"

[Name] "has never had any complaints on food and looks very well and cared for"

"Prior to Covid-19 and lockdown, I have always called in a few times a week, normally unannounced and I have never witnessed anything to concern me".

One health professional commented "I had no concerns when in the home and in the support, they were offering the client I assessed"

Complaints

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.

The home's complaints policy was reviewed during the inspection. It described the complaints process to be followed in the event of receiving a complaint and included the Commission's contact details. The manager provided details of the process that was completed in response to a complaint received in 2019. There were no active complaints being investigated at the time of the inspection.

Care receivers and their representatives described a culture of openness in the home and of feeling confident in approaching the staff team if they needed to raise any issues. This was demonstrated by comments made to the Regulation Officer to include "I wouldn't feel frightened to bring anything forward I could speak to anyone" and "they've responded to my concerns on the rare occasion that I have had any".

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

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.

The safe recruitment policy was examined and discussed with the registered manager who described the recruitment process which is utilised when new staff are recruited. A sample of staff files were reviewed which confirmed that Standards are consistently met with regard to safe recruitment. This was evidenced in that all necessary checks are completed before staff start work.

New staff are provided with a staff handbook and go through an induction programme which sets out the provider's expectations as to how care receivers will be cared for. Records of one staff member's probationary review were reviewed, which showed that the individual had been provided with feedback as to the how they were performing in their role.

All staff receive an annual appraisal and regular opportunities to discuss their role during supervision discussions. Samples of supervisions records were available for review, although the details of these discussions were not reviewed in detail. Samples of minutes from staff meetings were reviewed during the inspection.

Staff described having access to appropriate training and the records which were reviewed evidenced that they had received training in safeguarding, manual handling, fire safety, infection prevention and control, cardiopulmonary resuscitation (CPR), and food hygiene. Provision is made for staff to complete vocational

qualifications in health and social care also. Sixty five per cent of care staff have a level 2 award or above, and four care staff are progressing towards completion of level 2. Catering staff also have relevant food safety certificates.

The staffing rosters confirmed that the Standards in respect of minimum staffing levels were being met. During the inspection, there appeared to be an adequate number of staff on duty who were observed interacting with and assisting care receivers. There are several staff who have worked in the home for many years.

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.

Samples of care receivers' records were examined which found that they had their needs assessed prior to admission. Care plans were detailed relating to individual preferences and care choices, and the care documentation was easy to follow and understand. Assessments also take account of care receivers' risks of falling and skin damage. The records showed that care receivers are included in the development and review of their care plans.

During the inspection, some care receivers were observed participating in meaningful activities and appeared interested and motivated to join in. One person commented on the benefits of these activities and their enjoyment of the range of activities provided. Another care receiver was observed in the activities room and described that they enjoy socialising with others and described it as an opportunity for keeping stimulated. The home has recently subscribed to 'Netflix' so that care receivers are provided with more choices to watch films.

Care receivers were complimentary of their care experiences and made the following comments:

"I'm settling in, I feel better now I'm here. The staff are excellent, and they have great patience. I've noticed how well I'm feeling since I moved in here".

"I'm very impressed with it, it's very comfortable and the carers are excellent. There's plenty going on and the activities lady takes care of you".

"It's lovely here, nobody ever has any words. You never hear anyone be nasty to anyone, the staff are very good, and I wouldn't want to be anywhere else".

"There's nothing to complain about, the food is lovely, I've never had to send any of it back, it's all marvellous".

Representatives commented, “X is instantly more relaxed, and his general health and wellbeing improved rapidly, it’s not just where he lives, he clearly feels that it is his home and he is very comfortable there”.

“It was wonderful to see how relaxed and at home she quickly felt in her new environment. This stems from the wonderful care and kindness of the staff in this home. I also believe it is because the home is very homely”

“Even on Christmas Day they were great, we were able to stand outside, and they assisted her opening her presents, they made it so lovely even though we couldn’t go in”.

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 provider’s system for regularly reviewing the quality of services provided was explored during the inspection. The provider has a nominated individual who generally visits the home on a monthly basis to monitor and report on the quality and safety of the service to identify gaps, plan for improvement and measure outcomes to improve the overall quality of service provided. There were some occasions in 2020, where the nominated person had not visited the home which coincided with the restrictions on visiting that had been applied due to the pandemic. However, after the inspection the provider submitted an action plan as to how this level of oversight will be managed in future.

The registered manager explained that care receivers were asked to provide their views relating to the quality of food and dining room experience. During the review, one care receiver expressed dissatisfaction with the amount of frozen vegetables provided at mealtimes. This was addressed and during the inspection the care receiver told the Regulation Officer of their appreciation that the quality of vegetables had improved as a result of the food survey. This was also noted during a review of the kitchen where supplies of fresh vegetables were available.

The manager explained that they were mindful of disruptions to the team as a result of the pandemic and explained how communication was maintained so that every team member is kept informed of relevant information.

IMPROVEMENT PLAN

There were no areas for improvement identified during this inspection and an Improvement Plan has not been issued.

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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