



**Jersey Care
Commission**

INSPECTION REPORT

L'Avenir

Care Home Service

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

13 May 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 L'Avenir. The service is situated in the parish of St Clement. It is close to a local supermarket and a main road with a regular bus service between St Helier and Gorey. There is also easy access to local beaches.

The service operates within a detached six-bedroom property located within a quiet residential cul de sac. There are gardens to the front and the rear of the property with a driveway to the front which has parking provision for up to six vehicles.

The main part of the house accommodates four residents and includes one bedroom with en-suite which is used by one care receiver, and a communal bathroom shared by three others. There is also a sleep-in room for staff located on the first floor.

The home also has a conversion to the ground floor which provides a self-contained, annexed accommodation for one care receiver. This has a separate entrance from outside and an internal door through to the main building, to allow for easy access for staff and the care receiver into the main house.

This is one of 16 care home services operated by Les Amis. The service was registered with the Commission on 18 July 2019.

Regulated Activity	Care Home
Conditions of Registration	<u>Mandatory</u> Type of care: personal care, personal support Category of care: learning disability, autism Maximum number of care receivers: five Maximum number in receipt of personal care/ support: five Age range of care receivers: 18 years and over

	<p>Maximum number of care receivers that can be accommodated in the following rooms: rooms 1-5, one person.</p> <p><u>Discretionary</u> Johanna Jakubietz registered as manager of L'Avenir must complete a Level 5 Diploma in Leadership in Health and Social Care by 10th July 2022.</p>
Dates of Inspection	13 May 2021
Times of Inspection	13:00 to 18:00
Type of Inspection	Announced
Number of areas for improvement	One
Number of care receivers accommodated on the day of the inspection	Four

L'Avenir is operated by Les Amis Ltd and the registered manager is Johanna Jakubietz, who has been in post since July 2019.

Since the last inspection on 10 October 2020, the Commission has received an updated copy of the service's Statement of Purpose. This was submitted as part of the areas of improvement following the last inspection, with a further update on the 12 May 2021. This reflected changes in the Les Amis management structure.

The Commission also undertook two engagement sessions with Les Amis registered managers in April 2021. The purpose of this was to introduce new managers to their responsibilities in relation to the Regulation of Care Law (2014), and to provide an overview of the inspection process. There was also a separate session held for members of the Les Amis senior management team. At this session the new management structure was discussed, and feedback given from the engagement sessions.

The discretionary condition on the service's registration was discussed. The registered manager reported that there has been some disruption to her studies of the Level 5 Diploma in Leadership in Health and Social Care due to the impact of Covid-19. However, the registered manager feels that she will be able to successfully complete her studies within the time frame set out in the discretionary conditions. She also feels confident that support will be available from senior management should she require it.

The Regulation Officer discussed with the registered manager and team members the impact that Covid has had for residents and staff. It was evident that it has been a difficult year for everyone. The registered manager was absent from the home for a period and she feels that it was difficult for the staff to understand and interpret the guidelines. It was also difficult for staff to adjust to the strictness of the restrictions and support residents in understanding this. Residents reported that they found lockdown difficult and could not contemplate returning to such strict restrictions.

The home also suffered a bereavement, with the death of a resident during the second lockdown. This has clearly had a major impact for both residents and staff. The registered manager reported that it was a very difficult time and the Covid restrictions prevented everyone from being able to grieve in the normal ways. Staff have supported residents well, making use of easy read materials to discuss the bereavement and grieving process. This was evident when residents spoke with the Regulation Officer about their experiences. Whilst still very sad they were able to speak openly and honestly about the impact it had on them.

Staff reported that they felt angry and upset, and needed support to manage the impact of the bereavement. Therefore, a staff meeting was held which gave staff an opportunity to voice the issues and concerns that they had. As a consequence, counselling support was offered to the team. The registered manager reported that despite it being a difficult time she feels that the team are now stronger.

SUMMARY OF INSPECTION FINDINGS

The following is a summary of what we found during this inspection. Further information about our findings is contained in the main body of this report.

Overall, the findings of this inspection were positive. There was evidence that care receivers were being provided with a service that is safe and which takes their wishes and preferences into account.

The Regulation Officer followed up on four areas for improvement identified in the previous inspection report. There were clear indications of improvement in two areas. While progress has been made in the two remaining areas, further developments are required which are discussed in more detail within the inspection findings.

There are robust recruitment and selection processes in place and there was clear evidence that staff members are supported through an induction process. Training is a key part of the induction process with a focus on regular training updates and personal development as staff progress within the Les Amis organisation.

There was been much work undertaken by Les Amis in recent months to make improvements to care planning systems and develop easily accessible information for residents. The Regulation Officer was able to review some of the progress made to date and discuss the future plans with members of the senior management team.

The L'Avenir team have been working hard during Covid to maintain a positive environment for residents during lockdown and restrictions. The Regulation Officer found evidence of good practice in relation to positive risk taking, and the team are to be commended for their efforts.

The staff team are very knowledgeable and skilled, with positive and supportive relationships between staff and residents. There are good induction processes in

place which respect the individual needs of residents and support staff to get to know residents over a period of time.

Whilst being registered as a care home, L’Avenir very much provides a domestic home environment. Residents move around the home freely and are very much a part of the daily activities and routines. The home is decorated in accordance with residents’ preferences and wishes and it was evident that there is a sense of pride from residents about their environment.

There have been some recent changes to the management structure within the home with the introduction of a team leader role. This is having a positive impact to date; however, the role is still developing.

All relevant policies and procedures were found to be in place to support the management of the home. The registered manager has good understanding of both internal and external practices and procedures in place to support management, staff and residents.

Covid has had an impact on all aspects of the daily lives of the residents at L’Avenir, which has had an affect upon the wishes, preferences and choices of individuals. At the same time there have been reviews of funding and rotas during Covid, when restrictions have been in place. There is a need to test changes made to ensure that they continue to fully support the rights and choices of individuals as they return to their normal activities.

INSPECTION PROCESS

This inspection was announced and notice of the inspection visit was given to the registered manager two days before the visit. This was to ensure that the registered manager would be available during the visit and to confirm the home’s infection prevention and control arrangements. The inspection took place on the 13 May 2021. A follow up visit was undertaken on the 01 June 2021 which focused upon discussion with the registered manager in order to clarify some key points and provide feedback.

The Care Home Standards were referenced throughout the inspection.¹

This inspection focussed on the following lines of enquiry:

- **Staff recruitment, training and development**
- **Approaches to care and welfare of care receivers**
- **Staff competence relating to categories of care provided**

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

- **Care home environment**
- **Management of services**
- **Range of activities which reflect choice, preferences and lifestyle**

Prior to the inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection reports, notifications, correspondence and the home's Statement of Purpose.

The Regulation Officer sought the views of the people who use the service, speaking to all four residents at the time of inspection. Discussions were also held with the registered manager and three members of staff.

Following the inspection, contact was made by telephone with three relatives who were happy to provide feedback on the home. The views of two of professionals were also requested as part of the inspection process.

In addition, the Regulation Officer requested a meeting with representatives of the Les Amis team who were involved in the development of the new care planning system. The purpose of the meeting was to obtain a demonstration of the new system in order to, establish an understanding of the aims and objectives and provide a benchmark for determining the effectiveness of the system within individual Les Amis homes.

One further meeting was held with the Human Resources (HR) manager to check the recruitment file of one new member of staff and review Disclosure and Barring Service (DBS) records.

During the inspection, documentation including policies, care records, incidents, complaints, induction processes, staffing rotas, staff meetings and training records were examined. This inspection also included a tour of the premises which was facilitated by one of the residents.

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

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

INSPECTION FINDINGS

At the last inspection on 10 October 2020, four areas for improvement were identified and an improvement plan was submitted to the Commission by the registered provider setting out how these areas would be addressed.

The improvement plan was discussed during this inspection and it was good to note that two of the improvements had been made. This means that there was evidence

of appropriate repairs being undertaken within the home. There is also now an updated Statement of Purpose in place which is reflective of the range of services provided at L'Avenir.

The areas of improvement relating to care planning and monthly quality reports are explored in more detail within the inspection findings. Whilst the registered provider has not yet met the Standards in relation to these areas, there is evidence that plans are in place to resolve this.

Staff recruitment, training and development

Reference was made to Standard 3 of the Care Home Standards which states: "You will be cared for and helped by the right people with the right values, attitudes, understanding and training."

L'Avenir has six full time staff. There is currently one vacancy due to maternity leave and the registered manager reported that she is awaiting a replacement member of staff from another Les Amis Home. The registered manager reported that this will help to stabilise staffing levels with a regular staff team. It is anticipated that they will join the team in mid-June. The vacancy is being covered by relief workers or overtime for existing staff in the meantime.

There have been two new members of staff join the team since December 2020. One has been a newly recruited member of support staff, and the other a newly appointed team leader, already employed by Les Amis.

The registered manager reported that she was involved in the recruitment of the team leader. She also received a copy of all safer recruitment documentation for the new member of support staff. The Regulation Officer met with the Les Amis HR manager to review the recruitment file. All documentation was found to be in place including references and a recent Disclosure and Barring Service (DBS) certificate. There is a recruitment policy in place which was reviewed by the Regulation Officer following the inspection. The policy contained all the elements identified in Standard 3 of the Care Home Standards.

There is an induction programme in place which was viewed at inspection. The topics cover organisational practices and procedures, as well as focusing on the practical elements of working within L'Avenir. Once complete there will be a final review meeting with the registered manager to discuss progress and check all elements of the induction booklet have been completed.

Copies of the complaints, disciplinary, grievance and whistleblowing policies were requested from the HR manager, and made available to the Regulation Officer following the inspection.

There are training records in place for all staff members which were viewed by the Regulation Officer. Staff undertake a range of mandatory training courses as part of their induction programme and then will attend update sessions. There are also additional training opportunities available dependent upon the needs of the residents

or organisational requirements. Training courses provided include First Aid, safe handling, safeguarding, food hygiene, infection control and conflict management. All staff reported that they feel the training offered is good and supports them in their role within L'Avenir.

The registered manager reported that there are two members of staff who have a Level 2 Regulated Qualification Framework (RQF) or National Vocational Qualification (NVQ) in Health and Social Care. One member of staff has a Level 3 RQF/NVQ, and three members of the team are still to undertake the qualification. This constitutes 50% of the total staff team which is the minimum requirement as set out in Standard 3.9 of the Care Home Standards.

The registered manager explained that staff supervisions take place every six weeks. These are formalised and recorded sessions which provide staff with an opportunity to discuss their role. This was confirmed by the staff members spoken to at the time of inspection.

There is also an appraisal process in place for staff. The registered manager reported that a new electronic system has recently been introduced which the Regulation Officer viewed at inspection. The system allows for a self-appraisal process for staff which is then discussed with the registered manager and their views given. A development plan is then formulated. The staff member is responsible for updating their plan. It is then reviewed with the registered manager at 6 months and 12 months.

During discussion with the registered manager and staff members it was reported that staffing rotas within Les Amis were changed during Covid. The registered manager felt that the team found the new rotas difficult to adjust to. It has now been confirmed that the changes will be permanent. One member of staff voiced some concern that the new rotas will not support a return to normal social activities for the residents as Covid restrictions ease.

Approaches to care and welfare of care receivers

Reference was made to Standard 5 of the Care Home Standards which states: "You will be supported to make your own decisions and you will receive care and support which respects your lifestyle, wishes and preferences."

The previous inspection of L'Avenir on the 10 October 2020 highlighted the following as an area for improvement:

"Personal plans must evidence the involvement of care receivers and be prepared in a suitable format understandable to them".

The provider response highlighted that there had been a review of the care planning programme and a new system devised. The process would include the relevant communication needs of each resident being clearly identified in personal care plans.

At the time of this inspection all data had been transferred to the new system and had been live for approximately 10 weeks, therefore there had been no care plan reviews recorded. The minimum standard set for reviews is every three months. Through discussion with the registered manager and staff members it was clear that everyone was still getting used to the system with one member of staff requesting additional 1:1 training support. The Regulation Officer reviewed one resident's file and found relevant care plans to be in place. However, there was still some confusion from staff as to under which headings information was to be recorded, and some information was still awaiting transfer from the old system.

There were no resident specific tools or aids in place to promote individual communication. There was evidence that a generic resident supervision template was used as a guide to prompt discussion with a resident in seeking her views. One member of staff reported that they had found this document useful for generating discussion when inputting information into the new system, and they had learned things about the resident that they were not previously aware of. The staff member also commented that it was not a tool that could be used in one session and they had to have a series of discussions over a period of time to ensure that they were progressing at a pace suitable for the resident. This view was supported by the registered manager.

Following the inspection, the Regulation Officer met with members of the senior management team at Les Amis who were involved in devising the new system. This gave the Regulation Officer an opportunity to receive a demonstration on the functions of the system and the anticipated outcomes following implementation. Members of the management team acknowledged that the system is in the early stages of implementation and there will need to be regular opportunities to review progress, seek feedback and identify any adjustments required.

In order to support access to and enhance the use of individualised communication aids within each of the Les Amis care homes, there are plans for the communications facilitator to spend a period within each home. They will support staff to develop communication aids which promote effective communication for all. It is anticipated that this will also help to improve access to and involvement in personal care plans.

The Regulation Officer was unable to assess the effectiveness of the changes to the care planning system or indeed the proposed interventions to improve communication and involvement for residents. This is due to the system being in the early stages of development. Nevertheless, the Regulation Officer was encouraged by the efforts and plans in place to date.

The Regulation Officer had the opportunity to spend some time with each of the residents of L'Avenir and make some observations of the daily interactions between residents and staff. The residents were very relaxed and very much involved in the domestic activities, such as cooking and laundry. Three of the residents specifically spoke of their fondness for cooking and their involvement in preparing meals.

Through discussions with the residents it was apparent that they make decisions about their activities based upon their wishes and preferences. Three of the residents expressed that they feel listened to by staff. Another resident who has communication difficulties was observed interacting with a member of staff and receiving appropriate responses and re-assurances to their questions.

Due to the restrictions resulting from Covid, the social activities and family contact has been severely affected. This has been difficult for all the residents and some of them spoke openly with the Regulation Officer about their experiences, describing it as “boring” and “very hard”. They were all pleased to have returned to work and were also looking forward to the resumption of social outings and family visits. One resident had also returned to attendance at day services. There were good efforts made by staff to provide a variety of activities during lockdown with the use of Zoom to access arts and crafts, Zumba and fitness classes. They also tried to get out for walks when possible.

The registered manager explained that it was difficult creating a balance between following care home guidelines and recognising the needs of residents. Two of the residents regularly used public transport to travel to work. When they returned to work after lockdown, the Government of Jersey’s guidelines for care homes still advised against the use of public transport. The registered manager and staff team recognised the negative impact this was having on confidence and maintenance of skills. The team undertook a risk assessment for the use of public transport and provided some practical education for the residents on how to stay safe and minimise risks. The result has been a return to using public transport which has had a positive impact upon residents’ lives. When discussing their experiences with the Regulation Officer, both residents expressed their pleasure to be back to using the bus. One resident was able to tell the Regulation Officer of all the precautions that they take in order to remain safe. This is a good example of positive risk taking and is an area of good practice.

There have been no formal complaints received since the last inspection and the registered manager has set up an informal complaints log within the home, although none have been received to date.

Accidents and incidents relating to residents are recorded on the electronic care planning system and this was reviewed by the Regulation Officer at inspection. There is an accident form in place for general issues which is completed online and sent to senior management for review. The systems for accident reporting are explained to staff at induction. The registered manager is aware of her responsibilities in relation to submission of notification of incidents to the Commission.

The registered manager understands the Capacity and Self Determination (Jersey) Law 2016 and is aware of the process for making Significant Restriction of Liberty (SROL) applications. At the time of inspection there was one outstanding application for SROL. The registered manager shared with the Regulation Officer that the application was submitted in December 2019 and was still awaiting assessment. At a subsequent visit on the 01 June 2021 the registered manager

reported that the assessment had been undertaken by a member of the legislation team the previous weekend.

Feedback from relatives was very positive. All felt that their relative's needs were being met and that wishes, and preferences were "well respected". Communication by the staff team was praised with relatives feeling that they are kept informed. The impact of Covid has been hard for relatives but there was praise for staff and residents for how well they coped. On family member stated, "I think they do a wonderful job".

Staff competence relating to categories of care provided

Reference was made to Standard 6 of the Care Home Standards which states: "Your care will be provided with consistency by competent care and support workers who have the necessary training and qualifications to meet your needs."

L'Avenir operates with a core team of staff and are supported by relief staff who are familiar with the home. Rotas are prepared in advance electronically with a paper copy available in the office for both staff and residents and staff. The registered manager explained that a previous resident would request their own copy of the rota. All other residents in the home are happy to ask staff when they will be on duty.

Through discussions with staff it was very evident that they know the residents well and have a good understanding of their needs. The specific needs of one resident require the support of knowledgeable and experienced staff and as a result a longer induction period is required. Learning Disability training is available to all staff as part of the Les Amis core training.

Induction of new staff takes place over a six-week period. During that time new members of staff do not take part in any personal care or medication administration tasks. They will work alongside an experienced member of the team, taking time to get to know the residents.

During induction, staff will undertake online medication training. Once complete they will have three supervised medication administration sessions before being deemed competent. The registered manager reported that one member of staff is currently undertaking their medication unit as part of their RQF Level 3. Any medication errors are immediately followed up with a competency review for the member of staff.

The registered manager reported that some of the residents have additional health needs. The team are aware of the professionals and services that are available to support them in their role. One resident had been to visit their GP on the day of the inspection. Another had been referred to a specialist service for review following a noted change in presentation by staff. The Regulation Officer observed evidence of the team discussion and decision-making process within staff meeting minutes which prompted the referral.

The registered manager explained that there is a potential new resident undertaking introductory visits to the home and she is working closely with the case co-ordinator

to support a potential move. Any specific areas of need will be identified, and appropriate training offered to staff prior to the placement commencing. The Regulation Officer spoke with three of the residents to obtain their views. All were open of the idea of having a new housemate, with one stating that they wanted to “get to know them first”.

The registered manager reported that there is no specialist equipment or devices in use within the home which require additional training or procedures to be in place.

Care home environment

Reference was made to Standard 7 of the Care Home Standards which states: “The environment will enhance your quality of life and the accommodation will be a pleasant place to live or stay.”

The home has appropriate infection control procedures in place at the entrance in response to Covid, with visitors signing in and providing contact details. Staff were observed to be engaging in the correct use of personal protective equipment within the home.

The Regulation Officer was given a tour of the home by one of the residents who has lived there for a number of years and clearly has great pride in the environment. The communal areas are neutrally decorated and there are a number of pictures in the hallways and photos in the lounge and on the fridge door. The furnishings in the lounge were comfortable and spacious. There were also personal items set out in the lounge which supported ongoing activities, for example, a table with a jigsaw under construction, art books and art materials. The annex area was decorated and furnished to meet the needs of the resident. The Regulation Officer observed the resident utilising a small range of sensory items.

All of the bedrooms are decorated to the residents’ preferences and they have personal items of furniture and belongings. One resident had expressed an interest in moving to another vacant room within the home. This had recently been decorated to their taste and they were preparing to move in. The Regulation Officer noted an issue with curtains in one of the rooms. This was discussed with the registered manager who explained that this is the resident’s choice and gave assurances that privacy and dignity were not affected.

There is a fully functioning domestic kitchen with a small dining area attached. The registered manager explained that residents are included in the shopping and menu planning. Each resident takes a turn in preparing the evening meal with the support of staff.

There is access to outdoor space at the front and rear of the home. One resident explained that they enjoy barbeques in the garden in summer months. The Regulation Officer also observed preparation for a birthday party in the garden during the follow up visit.

Sleep in facilities are situated on the first floor away from the office area and staff have access to the communal bathroom facilities.

Laundry facilities are located in a separate area on the ground floor. Residents actively participate in the laundering of their own clothes. The annex area is equipped with its own laundry facilities.

The registered manager explained that there is an alarm on the front door which was installed in order to meet the needs of a previous resident. The Regulation Officer discussed with registered manager the possibility of removing or disabling the alarm if it was no longer required. The registered manager shared that the impact on current residents is not intrusive.

During the inspection, the Regulation Officer Observed several of the residents sitting together on the sofas chatting, with another using an iPad with headphones. It was evident that the residents see L'Avenir as their home.

Management of services

Reference was made to Standard 11 of the Care Home Standards which states: "The care service will be well managed."
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There have been some recent changes to the management structure within Les Amis with the introduction of team leader roles within each of the care homes. The team leader position sits below the registered manager role and has been put in place to support registered managers whose responsibilities have widened to include the management of two to three small care homes.

The registered manager reported that the team leader role has had a very positive impact, providing much needed administrative support. The team leader reported that they are settling into their role well. It is a new post which is still developing with an initial focus on compiling staffing rotas and undertaking staff supervisions. To date the team leader reports that they have five hours administrative time each week. The registered manager has ensured that this has been consistently allocated with an option to increase should it be required.

Staff are supported through supervisions and appraisals, as well as monthly team meetings. The Regulation Officer reviewed the minutes of the previous three months meeting minutes. They focus upon general house issues and also specific resident needs. The most recent minutes contained feedback on the new care planning system.

There is a complaints policy in place and feedback from two residents confirmed that they would speak with staff if they had any concerns and they always feel listened to.

The registered manager confirmed that contracts are in place for individuals when they move into the home which states the conditions of residency. Residents also receive a welcome booklet.

Funding of placements is through Long Term Care Benefit (LTCB), with top up funding from Health and Community Services, for those residents assessed as requiring it. This has recently been reviewed and funding arrangements updated for all residents. In addition, guidance has been issued to registered managers on funding structures and processes to be followed when changes in need are identified that may require additional funding. Information on specific funding for each resident has also been shared with registered managers.

The Regulation Officer discussed the new funding structures with the registered manager and the benefits of sharing this information with the staff team. This will not only positively inform and educate the team but allow them to play an active role in the processes for identifying changes in need, which may prompt re-assessment of funding requirements. A family member reported that they had requested information in relation to funding for their relative, but staff were unable to answer their questions. They felt that it was important that staff had this information.

Quality reports are currently undertaken by the head of governance. The registered manager was able to supply one report for the month of February. This is the only completed report for 2021, therefore it was difficult to determine if issues identified had been acted upon, or whether actions from previous months had been completed. A meeting was held with the head of governance and the Regulation Officer on the 21 April 2021 to discuss the content and format of monthly reports moving forward. The registered manager reported that there was a date set for the head of governance to visit the home in order to complete the May report. Whilst it is recognised that work is ongoing in this area, it remains an area for improvement.

Following the inspection, the Regulation Officer was supplied with information from Les Amis which included a copy of the current insurance certificate and information relating to current fees and charges,

Range of activities which reflect choice, preferences and lifestyle

Reference was made to Standard 9 of the Care Home Standards which states: "You won't have to give up activities you enjoy when you live or stay in a care setting. There will be a range of things to do which will reflect your preferences and lifestyle".

As previously stated, the impact of Covid has inevitably meant restrictions on the residents' normal activities and routines. During the lockdown period and subsequent restrictions, attendance at various clubs, social events and regular family visits had not been possible

The registered manager explained that each resident has a timetable of their weekly activities and they have time set aside for 1:1 support from staff each week. This time is spent participating in activities of their choice. Moving forward, this will now include more activities out of the home as Covid restrictions relax further. As an example, the weekly shop is currently being done online with delivery of goods to the home. It is hoped that residents will be able to return to going to the supermarket in due course.

The recent changes to staffing rotas and re-assessments of funding have taken place during Covid 19 restrictions. As residents return to a normal way of life, it is essential that there is a monitoring and review system in place to ensure that changes made can support and sustain a full return to pre-Covid activity levels for residents. This is particularly important for one resident who has dedicated funding in place to support social activities on a 2:1 staffing ratio. The Regulation Officer also discussed with the registered manager the importance of recording in individuals' care plans if they are in receipt of funding dedicated to specifically support of their needs.

All residents expressed that they enjoy the activities they do and were particularly happy to have returned to work and day service activities. They enjoy spending time together but also appreciate the opportunities they have to do things away from the home environment on a 1:1 basis with staff.

The registered manager explained that the staff team will adjust their shift patterns to accommodate residents' schedules, for example, to attend specific events or social outings. This was echoed by staff during discussions with the Regulation Officer.

The location of the home is quiet, and the registered manager reported that they have good relationships with neighbours. The close location of the local bus route supports opportunities for independent travel which is very much valued by the residents.

IMPROVEMENT PLAN

There was one area 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 12</p> <p>To be completed by: with immediate effect</p>	<p>The registered provider must ensure that suitable arrangements are in place to report monthly on the quality of care provided and compliance with registration requirements, standards and regulations. The monthly report should include a review of previous actions and clearly set out action plans for any areas of improvement identified.</p>
	<p>Response by registered provider: Monthly reports have been completed by Registered Manager in line with JCC guidelines. Also, monthly visits by Head of Governance are taking place now. This was confirmed during the meeting referred to in this report held on the 21st of April.</p>

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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