



**Jersey Care  
Commission**

## **INSPECTION REPORT**

**Care Home 01**

**Care Home Service**

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

**11 August 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 a care home which is registered 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. The service is situated in the parish of St Helier and has easy access to the centre of town, the bus station, waterfront facilities and town parks. The property is a two-bedroom single floor apartment within a four-storey accommodation block which has lift access to all floors.

This is one of 16 care home services operated by Les Amis. The service became registered with The Commission on 25 February 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: One  Maximum number in receipt of personal care/ support: One  Age range of care receivers: 18 years and above  Maximum number of care receivers that can be accommodated in the following rooms: Bedroom 1 – one person  <u>Discretionary</u>  None

Dates of Inspection	11 August 2021
Times of Inspection	12.30pm to 3.30pm
Type of Inspection	Announced
Number of areas for improvement	None
Number of care receivers accommodated on the day of the inspection	One

The care home is operated by Les Amis Ltd and the Registered Manager is Gary Hedgecock.

Since the last inspection on 22 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 submitted on the day before the inspection.

An application for a new registered manager was received by the Commission in December 2020. This was subsequently withdrawn as the person resigned and a notification of absence of the Registered Manager was submitted in February 2021. This provided details of the interim arrangements for the service.

A further application for a new registered manager was received on the 12 May 2021 for Gary Hedgecock. This was approved by the Commission on the 28 June 2021.

The Commission 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 Regulation Officer discussed with the Registered Manager and team members the impact that Covid has had for the care receiver and staff. There were very limited opportunities, particularly at the time of the first lockdown and this did create difficulties in planning the day and activities. However, the team tried to be creative in their approach by sourcing additional resources, such as puzzles and jigsaws. Staff also reported that they found their shifts quite long during periods of lockdown.

## 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 receiver was being provided with a service that is safe and which takes their wishes and preferences into account.

The Regulation Officer followed up on five areas for improvement identified in the previous inspection report. There were clear indications of improvement in three 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. However, some adjustments to policy are necessary to ensure that internal processes prevent start dates of new members of staff being agreed upon by the central HR team, before registered managers have reviewed the safer recruitment documentation.

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 has been much work undertaken by Les Amis in recent months to make improvements to care planning systems and to develop easily accessible information for care receivers. The Regulation Officer was able to review the progress made to date and provide feedback to members of the senior management team.

Care and support within the home is based upon the needs of the care receiver, with them taking the lead in the day to day decision making. Wishes, preferences and choices are respected.

The environment of the home is domestic and has a noticeably 'homely' feel to it. It is an environment which is personal to the care receiver and this is respected by the people supporting them.

There have been some recent changes to the management structure within the home which include a new registered manager and the introduction of a team leader role. This appears to be working well, with the Team Leader and Registered Manager working collaboratively to develop and maintain good practices within the home.

All relevant policies and procedures were found to be in place to support the management of the home. The Registered Manager has a good understanding of both internal and external practices and procedures which support management, staff and care receivers.

## INSPECTION PROCESS

This inspection was announced and notice of the inspection visit was given to the Registered Manager one day 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 was undertaken on the 11 August 2021 by one Regulation Officer.

The Care Home Standards were referenced throughout the inspection.<sup>1</sup>

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**
- **Care home environment**
- **Management of services**

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 person who uses the service and was able to spend a period of time with them during the inspection. Discussions were also held with the Registered Manager and a member of the staff team.

Following the inspection, a further two members of staff and a relative were contacted by telephone. The views of one professional were also sought as part of the inspection process.

As part of the inspection, documentation including policies, care records, incidents, complaints, induction processes, staffing rotas and training records were examined. This inspection also included a tour of the premises which was facilitated by the care receiver.

In addition, the Regulation Officer met with representatives of the Les Amis team who were involved in the development of the new care planning system. The purpose of the first 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. A further meeting was held to provide feedback on the Regulation Officers findings in relation to care plan evaluations and reviews.

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

Meetings were also held with the Human Resources (HR) manager to check the recruitment files of all new members of staff and review Disclosure and Barring Service (DBS) records.

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, five 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 positive to note that all of the improvements had been made as follows:

- Evidence of appropriate safe recruitment practices
- Easy access to complaints policy and procedures for relatives and care receivers.
- There is an updated Statement of Purpose in place.

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 made significant progress in these areas, some further evolution is required, and the Regulation Officer will continue to review these areas with the provider.

### **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."

The home had three full time members of staff and one vacancy at the time of inspection. There is also time allocated within the rota for team leader support, the purpose of which is to assist the Registered Manager with administration tasks and conduct staff supervisions. Staff shift patterns consist of one 24-hour period on duty which incorporates a sleep-in shift.

The team leader works between two Les Amis homes and reports that this is working well. They are in close proximity which means time can be easily spent between each home. The Registered Manager reported that the role of the team leader is developing well within the areas that they have responsibility for.

The staff team within the home has been consistent over the past year. The care receiver reported that they were happy with the team as they knew them well. This was a view shared by the care receiver's relative. One member of staff informed the Regulation Officer that they are leaving the team at the end of August but will remain with the organisation on a zero hours contract. During feedback, some staff expressed concern over the staffing levels and the impact it may have upon the team.

During discussion with the Registered Manager, it was reported that two new members of staff had recently been interviewed and were awaiting start dates following all relevant recruitment checks being in place. The Registered Manager also shared their plans for induction of new staff to the team. In order to ensure a more robust introduction to the organisation staff will initially work in an environment where other staff are present, before moving to this home where they will lone work on a 1:1 basis with the care receiver. In the meantime, the Registered Manager is formulating a contingency plan to allow an experienced member of staff to join the team on an interim basis. This will be subject to the agreement of the care receiver.

The Regulation Officer reviewed the process for safer recruitment checks with the Registered Manager and was assured that they were aware of their responsibilities. The Registered Manager stated that they would not agree start dates for new staff until they had reviewed and approved all recruitment documentation.

The Registered Manager also shared that they had recently been involved in the risk assessment process for a new recruit. This is a part of the process which is new to them and they now feel confident in taking the lead in the future. The Registered Manager understands that any decisions in relation to employment must be taken by them.

There is a recruitment policy in place which contains all the elements identified in Standard 3 of the Care Home Standards. Prior to the inspection, the Regulation Officer discussed recruitment practices with the managing director of Les Amis. It was agreed that the organisation would benefit from an amended to current policy in order to ensure that there can be no deviation from a process which must ensure that the Registered Manager makes the final decision in relation to employment and start dates of new recruits.

The Registered Manager explained that the care receiver is not directly involved in the recruitment of staff. However, they do meet with all potential new members of their support team and give approval before the staff member commences.

There is an established induction programme for new staff which is completed over a six-week period. The topics cover organisational practices and procedures, as well as focusing on the practical elements of working within the care home.

The Registered Manager confirmed that there is an electronic database in place which allows them to track progress of all team members training. They also receive reminders on a monthly basis from the learning and development team of any members who are required to update training,

A copy of staff training records was requested from the learning and development team following the inspection and was reviewed by the Regulation Officer. Staff are required to 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 care receivers 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 the home.

It was noted by the Regulation Officer that one member of staff had not updated some of their mandatory training which was several months overdue. This was raised with the Registered Manager and the Learning and Development Manager. It was confirmed that reminders had been sent but the issue had not been picked up on by the Registered Manager. This is an area for improvement.

The Registered Manager reported that there are two members of staff who are currently undertaking the Level 2 Regulated Qualification Framework (RQF) in Health and Social Care and are due to finish their award by November 2021. There are also plans to introduce a third team member who holds an RQF Level 3. This will constitute over 50% of the total staff team which is the minimum requirement as set out in Standard 3.9 of the Care Home Standards.

Staff supervisions are in place and are conducted on a monthly basis by the Team Leader. Appraisals are undertaken on an annual basis by the Registered Manager and are reviewed at six monthly intervals.

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.

### **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 the care home on 22 October 2020 highlighted the following as an area for improvement:

*"Personal plans must evidence the involvement of care receivers and be prepared in a format that is accessible to them".*

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



Prior to 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 that there will need to be regular opportunities to review progress, to seek feedback and to identify any adjustments required.

The new system has now been in place for several months and reviews are commencing. The Regulation Officer reviewed all care plans at the time of inspection. They were found to be informative and person-centred. Quality of content was able to be cross checked from information supplied by both the care receiver, the staff member on duty and the Registered Manager. There was also evidence that the care plans had been reviewed by the Registered Manager.

During discussions with the Registered Manager, it was noted that the system is difficult to navigate in order to view recent evaluations. This may result in staff having to spend long periods of time on the system. In addition, when an update is added to one care plan, all others show as having been updated at the same time. This is misleading and also creates difficulties when attempting to retrieve key information in order to complete a comprehensive review of the care plan.

Following the inspection, a further meeting was held with a member of the senior management team to highlight the issues encountered in relation to care plan updates and evaluations. This has been acknowledged and will be addressed as part of the feedback and review process.

The Regulation Officer had the opportunity to spend some time with the care receiver to discuss their expectations and experiences of the care provided and to make some observations of the daily interactions with staff. The Regulation Officer found strong evidence that the care receiver is provided with information that meets their individual communication needs and style. This was evidenced in the way the care receiver planned their day, with staff making suggestions rather than directing. The care receiver was given time to consider all options and make their own decisions. It was also clear that the care receiver has a good understanding of events that are ongoing within their life. They were found to be well-informed and confident in their conversation with the Regulation Officer. A family member commented that their relative "very much has choice and control over what they do, and this works well for them".

The care receiver directs all aspects of their daily activities. They have a range of hobbies which they pursue within their home. They also participate in a range of social activities within the local community which are meaningful to them. They are open to ideas and suggestions from carers but ultimately make their own decisions. The care receiver explained that they do not like to participate in trips to the supermarket for the weekly shop. During Covid, they have been making a shopping list with staff and having provisions delivered. This has worked well for the care receiver who would like to see this continue.

Staff have also tried to support the care receiver to continue to participate in preferred activities during the recent increased Covid activity within the island. The

Registered Manager gave an example of discussing with the care receiver what safety measures they could adopt while still ensuring that they were able to go out for coffee, advising that visiting outdoor cafes was an option to consider, which was well received by the care receiver.

Family relationships and contact is hugely important to the care receiver and staff are supportive in maintaining close contact. Relatives report that they are happy with the care that is provided. They feel that they are included, listened to and kept up to date with any changes in need.

Following the last inspection, ensuring awareness of complaints procedures for care receivers and relatives, in suitable communication formats, was identified as an area for improvement. There have been no complaints received since the last inspection, however a relative was able to confirm that they were aware of the steps to take should they wish to raise a concern or make a complaint.

Registered managers within Les Amis meet on a monthly basis. It has been identified within these meetings that there is a need to update the welcome packs issued to new care receivers and their relatives. This is to ensure that they not only provide an introduction to Les Amis but are also personalised to each home and are accessible to care receivers. This will include information on the procedure for making a complaint.

Accidents and incidents relating to care receivers are recorded on the electronic care planning system and this was reviewed by the Regulation Officer during the 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 their responsibilities in relation to the submission of notification of incidents to the Commission. This is a task which is also being shared with the team leaders.

The Registered Manager understands the Capacity and Self Determination (Jersey) Law 2016 and is aware of the process for making applications for Significant Restriction of Liberty (SROL) authorisations. The staff team also receive training in this area.

Feedback from both the care receiver and relatives was very positive of the support team. It is clear that positive and respectful relationships have been developed. One professional described the care receiver as having "a very good rapport with the staff team".

## **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.”

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 care receivers.

During induction, staff will undertake online medication training. Once this is completed, they will have three supervised medication administration sessions before being deemed competent. Any medication errors are immediately followed up with a competency review for the member of staff. Two staff within the home are presently undertaking the Level 3 RQF in medication administration.

Additional staff training is in place in order to meet specific needs of the care receiver and is updated on an annual basis. The Registered Manager explained that this had been put in place to support the care receiver when they were living in a different environment. Significant progress has been made in recent times and therefore a review will be undertaken to assess the need for the training to continue.

Staff reported that they have support of the Team Leader and the Registered Manager and are happy raising any queries or concerns with them. The Regulation Officer was satisfied the team know when to seek support and will work collaboratively relatives and other professionals when required. A recent example of this was given by a relative who had made some suggestions in relation to a health issue. This was listened to, taken on board by the staff team and the relevant professionals were contacted for support.

During the time of the inspection, there were no specialist equipment or devices in use within the home, which would have required 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 Regulation Officer was met by the care receiver at the front door who welcomed them inside. The care receiver very much considers the environment to be their own home. This was evident in every area of the home which was filled with personal belongings which were arranged in a way suit individual preferences. The furniture and fittings are comfortable and clearly meet the care receiver’s needs.

The accommodation is a two-bedroom apartment, with one room being utilised as a staff office and sleep in room. There is also a lounge with a dining area, kitchen and bathroom.

The care receiver showed the Regulation Officer around and took time to explain various items within the environment, such as family photos. They clearly have great pride in their home and make their own decisions as to how it is laid out and maintained.

The Regulation Officer was able to see evidence of maintenance and safety checks throughout the home which included cleaning schedules and records of equipment checks.

The care receiver was noted to be freely making drinks and snacks throughout the visit and shared with the Regulation Officer that they enjoy cooking. Staff confirmed that they provide support and guidance in the preparation of meals, but the care receiver is fully involved in the process and chooses meals for themselves.

Domestic tasks are undertaken by the care receiver with minimal input from staff. This includes washing, ironing and hoovering. There are also additional cleaning schedules in place for Covid and staff were observed to be wearing appropriate personal protective equipment (PPE).

There is real homely feeling and staff presence was noted to be unobtrusive. Any items which are necessary for the running of the home do not encroach upon the care receiver and are kept within the staff sleep in room.

The Regulation Officer discussed the procedures in place for maintenance and repair. The Registered Manager explained that this was the responsibility of the letting agent and gave examples of recent repairs that had been completed within the home. The Regulation Officer noted that there was a build of mould on the sealants in the bathroom. This was brought to the Registered Manager's attention who agreed to arrange for this to be addressed.

The Registered Manager explained that it has been acknowledged that the home is not a typical 'care home' environment. It was positive to note that the opportunity for the care receiver to move towards their own tenancy and receive services under a 'home care' arrangement will be kept under review.

### **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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The home's Statement of Purpose was reviewed and updated as part of the Improvement Plan following the previous inspection on 22 October 2020. As previously stated, a further update was submitted to the Regulation Officer on the day before the inspection. The content of the Statement of Purpose was discussed

with the Registered Manager at the inspection and was found to be reflective of the range of services provided within the care home.

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 currently manages three Les Amis care homes. He reports that he splits his time between all three. He is currently working on establishing working practices and systems which can then be introduced in all three homes.

During feedback, staff reported that there had been several changes in management over the past year and they had found this unsettling at times. Staff acknowledged that the new Registered Manager had brought stability and structure to the home. The care receiver also spoke positively of the Registered Manager.

Quality reports are currently undertaken by the Head of Governance. The Registered Manager was able to supply reports for April, May and June. 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. There is some evidence of improvement in the quality of the reports and these will continue to be reviewed by the Regulation Officer.

Prior to 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,

Funding of placements is through Long Term Care Benefit (LTCB), with top up funding from Health and Community Services, for those care receivers assessed as requiring it. This has recently been reviewed and funding arrangements updated for all care receivers. 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 care receiver has also been shared with registered managers.

## 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.

<b>Area for Improvement 1</b> <b>Ref:</b> Standard 3.11	The registered provider must ensure that all training updates for staff are undertaken within agreed time frames and recorded within the organisations database in a timely manner.
<b>To be completed by:</b> with immediate effect	<b>Response by registered provider:</b> All training for all team members has been re reviewed and all full time team members at this location are currently in date for all mandatory training with up coming expiry dates noted and advanced notice of booking completed.

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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