



Jersey Care  
Commission

## **INSPECTION REPORT**

**La Mabonnerie**

**Care Home Service**

**La Rue de La Monnaie  
Trinity  
JE3 5DG**

**8 September 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 La Mabonnerie Care Home. The service is a five-bedroom detached house situated near Trinity Church, with easy access to a local shop, public house and a bus route which goes to St Helier town centre.

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	<p><u>Mandatory</u></p> <p>Type of care: personal care, personal support</p> <p>Category of care: learning disability, physical disability and/or sensory impairment, autism</p> <p>Maximum number of care receivers: Four</p> <p>Maximum number in receipt of personal care, personal support: Four</p> <p>Age range of care receivers: 18 years and over</p> <p>Maximum number of care receivers that can be accommodated in the following rooms:</p> <table><tr><td>Rooms No: 1-4</td><td>one person</td></tr><tr><td>Persons with a physical disability can be accommodated in the ground floor bedroom only</td><td>one person</td></tr></table>	Rooms No: 1-4	one person	Persons with a physical disability can be accommodated in the ground floor bedroom only	one person
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	<u>Discretionary</u>  Johanna Jakubietz must complete a Level 5 Diploma in Leadership in Health and Social Care by 10 <sup>th</sup> July 2022.
Dates of Inspection	8 September 2021
Times of Inspection	9:30am to 2.00pm
Type of Inspection	Announced
Number of areas for improvement	None
Number of care receivers accommodated on the day of the inspection	Three

La Mabonnerie 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 December 2020, the Commission received an updated copy of the service's Statement of Purpose. This was submitted as part of a general review, with information being updated which was specific to the services provided by La Mabonnerie.

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 discretionary condition on the service's registration was discussed at the time of the inspection. The Registered Manager reported that there has been disruption to her studies of the Level 5 Diploma in Leadership in Health and Social Care due to the impact of Covid-19 and staffing shortages. The Registered Manager meets regularly with her assessor and line manager; however, she feels that her progress is slow. The Regulation Officer emphasised with the Registered Manager the need to request a plan of support which will allow for the successful completion of the course within the agreed timescales.

The Regulation Officer also discussed with the Registered Manager and team members, the impact that Covid has had for residents and staff. The team feel that they are now slowly getting back to normal, with care receivers re-establishing social routines and family contacts. The Registered Manager praised the team for their efforts during Covid.

## 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 two areas for improvement identified in the previous inspection report. There were clear indications of improvement in one area. While progress has been made in the remaining area, 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.

There is person-centred approach to care within the home. Staff know care receivers well and are able to respond to individual needs effectively. This is particularly important for care receivers who have complex communication needs.

The home is domestic, with a warm and friendly atmosphere. It is decorated to a high standard and is in a good state of repair.

A range of activities are in place which support both indoor and outdoor hobbies and interests. All care receivers also have strong family contact which is respected and supported by the team

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 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 8 September 2021.

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**
- **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 two residents at the time of inspection. Discussions were also held with the Registered Manager and two members of staff.

Following the inspection, contact was made by telephone with three relatives who were happy to provide feedback on the home.

During the inspection, documentation including policies, care records, incidents, complaints, induction processes, staffing rotas, staff meetings and training records were examined.

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.

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

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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/>

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.

## INSPECTION FINDINGS

At the last inspection on 10 December 2020, two 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 one of the improvements had been made. This means that there was evidence that the Registered Manager and Provider are aware of their responsibilities in relation to notifying the Commission of Registered Manager absences.

The area of improvement relating to monthly quality reports is explored in more detail within the inspection findings. Whilst the registered Provider has not yet fully met the Standards in relation to this 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."

La Mabonnerie has six full time members of staff. There are two members of staff on duty each day, with one member of staff sleeping in each night. There is also provision for additional staff to support social outings and appointments. These hours are organised around care receivers' activities.

The Registered Manager reported that there have been no new recruits since the last inspection, but there are two members of staff who will be leaving in the coming weeks. This was concerning for the Registered Manager who did not yet have any replacements. Vacancies will be covered by relief workers or overtime for existing staff in the meantime. The Registered Manager also reported that she has been providing cover in recent weeks. Whilst this is acceptable for a short period of time, it is not sustainable as it could impact on their managerial responsibilities. The Regulation Officer also discussed with the Registered Manager the importance of maintaining support hours for care receivers based upon their assessed needs.

The Registered Manager shared with the Regulation Officer that the staff team have been involved in deciding upon the shift patterns for the home. Two options were

considered, and the team had the opportunity to decide on which one was preferred. Discussions with staff confirmed that they were happy with the process and the implementation of the rota. Staff also appeared willing to be flexible and adjust shifts to accommodate care receiver activities.

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.

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 amendment 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.

There is an 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 La Mabonnerie.

A copy of staff training records was requested from the Registered Manager 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. Staff spoke positively of the training offered to them, and felt it supported them in their role.

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.

The Registered Manager reported that there is one member of staff who has a Level 2 Regulated Qualification Framework (RQF) or National Vocational Qualification (NVQ) in Health and Social Care. Three members of staff have a Level 3 RQF/NVQ. 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 is currently looking at a potential change to the staffing rota in order to ensure that there are sufficiently qualified staff available on each shift when staff leave later in the month.

Staff supervisions are in place and are conducted every six weeks 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 prior to 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.”

Prior to the inspection, the Regulation Officer met with members of the senior management team at Les Amis to discuss the new care planning system which was introduced earlier this year. 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.

A further meeting was held with a member of the senior management team in August 2021 to highlight the issues encountered by Regulation Officers in relation to care plan updates and evaluations. This has been acknowledged and initial steps have been taken to rectify the issues raised.

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 the inspection. They were found to be informative and person-centred. Quality of content was able to be cross checked through observation of the daily routine, and from information supplied by both the staff member on duty and the Registered Manager. There was also evidence that the care plans had been reviewed by the Registered Manager.

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. During discussions with relatives, it was evident that La Mabonnerie staff are very responsive to any issues raised by family members and steps are taken to resolve matters in a timely manner. No official complaints have been received by the home since the last inspection and the Regulation Officer was satisfied that relatives were aware of the process for making a complaint.

Accidents and incidents relating to care receivers are recorded on the electronic care planning system. It was noted by the Regulation Officer prior to the inspection, that no notifications of incidents had been received by the Commission. Therefore, an in-depth review of incident records since the last inspection was undertaken. All records were found to be in order and no notifiable incidents were identified. The



Regulation Officer was satisfied that the Registered Manager is aware of their responsibilities in relation to the submission of notification of incidents to the Commission.

There is also 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 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. There were two SROL authorisations in place at the time of inspection.

All care receivers who live at La Mabonnerie have close family contact with some choosing to spend periods of time at their family homes each week. Staff report good relationships with families and gave several examples of the support provided to ensure that family relationships are promoted and maintained.

Feedback received from relatives was consistently positive with the service provided being described as “excellent” and “perfect”. A common theme was the need to have a staff team that are consistent and know the care receivers well, as changes can be unsettling for care receivers. The staff team were praised for their openness, friendliness and positive approach to care delivery.

### **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.”
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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.

A medication inspection was undertaken by the Senior Pharmacist from Health and Community Services on 25 August 2021. It was positive to note that there were no areas of concern recorded and practices within the home were of a good standard.

Several examples were found of collaborative working with professionals in order to support care receivers’ needs. Staff were aware of the services available to support them and reported that they were comfortable raising any queries or concerns they may have with the Team Leader and the Registered Manager. The Regulation

Officer was satisfied that the team are aware of the scope of their professional responsibilities and work with relatives and other professionals when required.

Through discussions with staff, it was very evident that they know the care receivers well and have a good understanding of their needs. This is essential for the care receivers at La Mabonnerie, as some have complex communication needs which require a good level of understanding from the staff supporting them. Staff were observed during the inspection to be understanding of and responsive to care receivers' needs.

There are several pieces of equipment used within the home to support the mobility of care receivers. These were observed to be used appropriately. Staff training is provided for the use of specialist equipment and updated at regular intervals. Maintenance schedules are also in place for all equipment.

### **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."

When the Regulation Officer arrived, the care receivers were busy with their morning routines. There was a lot of activity within the home but there was a relaxed and friendly atmosphere with lots of joking and laughing between care receivers and staff.

The home has a rural setting and is situated on a quiet country road. The accommodation is over two floors with a spacious communal living, dining and kitchen area on the ground floor. There is also one wheelchair accessible bedroom on the ground floor with an ensuite wet room. Upstairs has three large bedrooms, the house bathroom, a sleepover room for staff and a small office.

The Regulation Officer had the opportunity to look around and found the surroundings to be comfortable. Communal areas are bright with vibrant décor and accessories. There were lots of personal touches in the communal areas, such as photos of care receivers engaging in activities, which really personalise the environment. The home was observed to be maintained to a good standard.

Care receivers' bedrooms are large and spacious. All were decorated in accordance with individual wishes and preferences.

Equipment which is required to support access and mobility within the home is unobtrusive and care receivers were observed to be supported with great dignity and respect when using the equipment.

The Regulation Officer spent time chatting with two care receivers in the kitchen over the lunch period which was very relaxed. Staff interacted well with care receivers guiding and prompting where required.

Due to the varying degrees of ability of the care receivers living in the home, domestic tasks are directed by staff with care receivers encouraged to participate as fully as possible. There are cleaning schedules in place which are carried out by staff. There are also appropriate supplies of personal protective equipment available which was observed to be utilised appropriately by staff.

There is a large garden area which is accessible from the kitchen. Staff reported that this was used a lot during the lockdown periods for dining and activities. Residents have also begun planting and growing activities with the support of staff.

## **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 by the Regulation Officer who was satisfied that the home is working within their conditions of registration.

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 two Les Amis care homes and reports that the introduction of the team leader roles has been of great benefit. The Team Leader was described by the Registered Manager as “a very good asset” who supports with general administrative tasks and takes a lead role with staff supervisions.

During feedback with staff, they spoke positively of the Registered Manager stating that they felt well supported in their roles. Staff felt that the Registered Manager had a consistent presence within the home and was available via telephone or e-mail for advice and support at other times.

Staff meetings are held monthly, and meeting minutes were reviewed by the Regulation Officer. There are opportunities within meetings to discuss general issues, such as health and safety, finance and staffing. There are also discussions and information sharing in relation to care receivers. Actions are identified and carried forward to the following month for review.

Quality reports are currently undertaken by the Head of Governance. The Registered Manager was able to supply reports for June, July and August 2021. 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.

### **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".

Overall, the impact of Covid has greatly affected the ability to participate in preferred activities with limitations on what could be offered. Staff spoke of the things they put in place for care receivers during periods of lockdown which included walking, baking, tie dye, arts and crafts and living room discos.

The choices and preferences of care receivers were reflected in the care plans reviewed by the Regulation Officer and also in the practice observed.

One care receiver was observed going through a list of events provided by a local social group and picking the activities they wanted to attend. The Regulation Officer also witnessed an afternoon activity being planned with the full inclusion of the care receivers and participation in an interactive Zumba session in the morning.

Staff spoke of their understanding of the need to include care receivers to the best of their abilities in all tasks, recognising that although they may not be able to manage all elements of a task, they can contribute at different levels. Staff also recognised the benefits to care receivers when they are involved in the social aspects of activities. An example given was of having care receivers in the kitchen when preparing meals or baking so they can enjoy the sensory benefits.

The recent changes to staffing rotas and re-assessments of funding have taken place during Covid 19 restrictions. As care receivers 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 care receivers. This is particularly important for any care receivers who have experienced changes in their confidence, health or wellbeing and may require additional support on either a short or long-term basis.

As previously noted, there is some concern in relation to current staffing levels and vacancies. It is important that systems are in place to monitor staffing levels within

the home to ensure that they do not impact upon the assessed needs of care receivers. Agreed funding packages must be fully utilised by the home to ensure that care receivers have access to the levels of support that they have been assessed as requiring. Any sustained deficits in support hours need to be reported to the commissioning service.

## **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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