



**Jersey Care
Commission**

INSPECTION REPORT

Les Amis (Home Care) Domiciliary

Home Care Service

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

4 November 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 Les Amis (Home Care) Domiciliary. The service was registered with the Commission on 21 June 2021. Previously, the service was part of a home care service which was divided into two separate home care services. Kerri Ann Frain was confirmed as Registered Manager of this service on 21 June 2021.

Regulated Activity	Home Care Service
Conditions of Registration	<u>Mandatory</u> Type of care: Personal care, personal support Category of care: Learning disability, physical disability, autism Maximum number of personal care/personal support hours to be provided per week is 600 Age range of care receivers: 18 years and above
Date of Inspection	3 November 2021
Time of Inspection	9.45am – 1pm
Type of Inspection	Announced
Number of areas for improvement	One
Number of care receivers using the service on the day of the inspection	30

The home care service is operated by Les Amis Limited and the Registered Manager is Kerri Ann Frain.

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.

During this year, Les Amis made an application to separate the original Home Care service, into two separate services, with this service concentrating on smaller care packages.

An updated copy of the service's Statement of Purpose was received during the period of inspection.

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.

This is a new service which was part of Les Amis (Home Care) Limited. An inspection of the service under the previous name was completed in 2020. The Statement of Purpose has been updated to reflect the separation of this service into two services.

There were no staff vacancies at the time of the inspection, with a consistent staff team. Improvements have been made to the recruitment process to ensure safe recruitment and there is a robust induction and training programme. Most members of staff have a Level 2 Health and Social Care qualification and all staff reported that they are encouraged to undertake training for their own development. The recruitment policy is robust, and safe recruitment practices are in place. There is a good training and development programme, and staff were positive about the induction and support which is in place.

The Registered Manager provides bi-monthly supervision to staff. Supervision is provided above the level of that expected by Commission Standards, and staff felt well supported. Appraisals take place yearly, with a six-monthly review.

There have been improvements to the care planning system since the last inspection of the home care service provided by Les Amis. Each care plan was person centred and promotes independence. There were no reviews on the system but there was evidence of a new system which would ensure that these take place on a regular basis. Frequency of reviews should be considered based on the complexity of care provided. All care receivers visited had knowledge of the care provided and when to expect visits.

Staff are provided with Level 3 medication administration training, with competency reviews undertaken by the Registered Manager on a regular basis. Staff receive

specialist training relative to the care receiver they are supporting. Generally, notifications of incidents are made to the Commission appropriately.

There has been some improvement in the arrangements for monthly reporting. However, actions are not robust and timely and could be improved to support the Registered Manager. This is an area for improvement.

INSPECTION PROCESS

This inspection was announced and notice of the inspection visit was given to the Registered Manager on the day before the visit. This was to ensure that the Registered Manager would be available during the visit on 4 November 2021.

The Home Care 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**
- **Management of services**
- **The service will be reviewed regularly**

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the inspection report for the previous Home Care service.

The Regulation Officer met with three people who use the service and contacted ten members of staff by email. Two members of staff provided feedback by phone and five members of staff provided feedback by email.

During the inspection, records including policies, care records, incidents and complaints were examined.

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 is attached at the end of the report.

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

INSPECTION FINDINGS

This is the first inspection for Les Amis (Home Care) Domiciliary.

Staff recruitment, training and development

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

Les Amis (Home Care) Domiciliary has ten staff, with no vacancies at the time of inspection. There has been one new permanent member of the staff team who is still completing the induction programme. A stable and consistent staff team is a positive feature of this service.

There is an induction programme for new staff which is completed over a six-week period. The topics cover both organisational practices and procedures, as well as practical elements of joining this home care service. The Registered Manager reported that new staff shadow an experienced member of staff for six weeks, or a minimum of 40 hours, before being solely responsible for providing care.

The Regulation Officer met separately with the Les Amis Human Resources (HR) Manager to review recruitment files. All documentation was found to be in place including references and recent Disclosure and Barring Service (DBS) certificates. It was noted that safer recruitment documentation was not consistently reviewed by Registered Managers prior to start dates being agreed. There is a recruitment policy in place which was reviewed by the Regulation Officer following the inspection. The Regulation Officer met with the HR Manager and with the provider separately and it was agreed that an adjustment to the current policy would be made to ensure that start dates were not agreed until the Registered Manager has reviewed the safer recruitment documentation. By the time of this inspection visit, the Registered Manager confirmed that this was now in place and that they are required to sign off before a start date is given to a new employee.

Due to the impact of Covid-19, care receivers have not been involved in the recruitment process during the past year. However, the Registered Manager confirmed that they would be planning for any future involvement of care receivers in the interview process.

A central record of staff training is kept by the Head of Learning and Development and this was reviewed following the inspection visit. Staff undertake a range of mandatory training courses as part of their induction programme and attend update sessions. The Registered Manager reported that they receive a quarterly reminder of the members of staff who need to update their training. Training courses provided include first aid, safe handling, safeguarding, food hygiene, infection control and conflict management.

All staff working for this service also complete training in diabetes and epilepsy awareness. Two staff need to complete training in epilepsy awareness and the Registered Manager was aware of this.

All staff reported that the standard of training and development offered was good. Nine members of staff have Regulated Qualifications Framework (RQF) Level 2 Health and Social Care qualification which meets the Standards for Home Care services. Four members of staff are currently studying RQF Level 3. Les Amis provide a variety of training over and above the mandatory areas.

There is evidence of additional specialist training provided where necessary. Classroom training has resumed where possible and there is also a programme of e-learning for areas where this is appropriate.

All staff reported that they receive regular supervision sessions and that, if requested, the Registered Manager is also available in between these sessions to provide support. The Registered Manager stated that they see most staff informally on a weekly basis during visits when they visit the head office to complete paperwork or collect money.

Appraisals are in place for all staff. There is an electronic system which consists of a self-appraisal process for staff which is then discussed with the Registered Manager and their views given. A development plan is then formulated, and the staff member is responsible for updating their plan. The plan is then reviewed with the Registered Manager at six months and 12 months.

Some staff expressed concern over staffing levels. While they did not feel under pressure to take on additional shifts, they felt that there were regular additional shifts offered and that this could have an impact on the team and the service offered to care receivers.

Copies of the complaints, disciplinary, grievance and whistleblowing policies were requested from the HR Manager and were made available to the Regulation Officer for review prior to the inspection and were found to be satisfactory and up to date.

Approaches to care and welfare of care receivers

Reference was made to Standard 5 of the Home Care 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."

Over the last year, the Les Amis management team have been working on the care planning system to ensure that plans meet the needs of the individuals and that evaluations can be demonstrated.

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 would be regular opportunities to review progress, seek feedback and identify any adjustments that may be required.

The data for all care receivers in receipt of this service had been transferred to the new system which has been live since April. The Regulation Officer reviewed three care plans which demonstrated that choice and independence are promoted. The care planning system remains under review and it is acknowledged that some care receivers have only small packages of care for specific support. For these care receivers, the system needs to only collate information which is relevant and appropriate for the service provided. This remains an ongoing area of review for Les Amis internally as part of the overall care planning system.

The care plans reviewed provided evidence that they are person-centred, with the preferences of the care receiver being highlighted. One care plan demonstrated that there was consideration to reduce the hours provided. All care plans indicated that care receivers were provided with choice and that the decision on, for example, meals or activities, was their own.

Three care receivers were visited in their own homes. The Registered Manager respected the need to be invited into the home and checked that they were happy for the Regulation Officer to visit. All care receivers had a good understanding of what they expected from their care team. They knew who would next be visiting them and what they would do if the member of staff did not arrive. All care receivers reported that they were satisfied with their staff team but that they were aware they could raise issues with the Team Leader or Registered Manager. All care receivers requested that a member of staff remain with them during the discussion with the Regulation Officer. This indicated that they have felt safe and have a good relationship with staff members.

One member of staff demonstrated how the choices of a care receiver was respected, in terms of potentially unwise financial decisions. However, they were also aware of the potential for financial abuse and the need for referral to the Adult Safeguarding team if necessary.

Staff promote the independence of care receivers by supporting with tasks such as cooking, rather than undertaking the task themselves.

The Registered Manager reported a situation where a care receiver had refused medication. The team worked with the care receiver and healthcare professionals to find a solution which also included education as to the consequences of refusing the medication. The decision to refuse part of the care plan was respected and the team were able to work with the care receiver to find an alternative plan.

Staff competence relating to categories of care provided

Reference was made to Standard 6 of the Home Care 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."

When commencing work with Les Amis (Home Care) Domiciliary, new staff meet with the Registered Manager who can provide advice relating to the needs of the care receiver(s) that the care worker will be supporting. Following this, the member of staff is introduced to the care receiver and there is a six-week period of shadowing which includes at least 40 hours with an experienced colleague.

Care receivers consulted demonstrated that they have information about their staff rota and the choices for activities within their care plan. All reported that they can contact the Registered Manager to discuss issues or report if the care worker has not arrived.

Staff can discuss and share the care plan with care receivers using an iPad during visits. The Regulation Officer discussed having a copy of the care plan in the home of each care receiver but understood from the Registered Manager that this was likely to be declined as the care receivers often prefer to have as little formality to the process as possible.

The Registered Manager intends to review the care plans every three months. There has recently been a decision within the Les Amis service for this to be recorded as a Word document while the care planning system is reviewed. However, some care receivers are asking for less reviews and this should also be considered, with review times reflecting the complexity of each package.

All care workers receive support in first aid and are aware of when to seek medical advice. There was evidence that notifications to the Commission had been made appropriately by staff. Where a care receiver is feeling unwell, staff members put a plan in place with them before leaving the premises. For example, ensuring that they have the Registered Manager or on-call phone number and discussion about when it would be appropriate to phone for medical help.

Six members of staff have RQF Level 3 medication administration training, with a further two members of staff currently studying this qualification. Once staff have received this training, there are regular competency reviews with the Registered Manager. It was noted that the monthly report had highlighted that reviews for medication competency are due by the end of November.

One care receiver described the support provided to them for taking medication. It was evident that they are part of the process to ensure that medication is taken as prescribed.

Specialist training is provided according to the needs of the care receivers. For example, staff are trained in the understanding and management of epilepsy and diabetes.

There are no authorisations for a Significant Restriction on Liberty (SRoL). There was evidence that staff receive training relating to the Capacity and Self-Determination (Jersey) Law 2016. The Registered Manager understands their responsibility in notifying the Commission of any authorisations.

Management of services

Reference was made to Standard 8 of the Home Care Standards which states: "The home care service will be well managed."

This service is part of Les Amis Limited and is based at the head office. There is a separate HR and Finance department, and records are kept securely. Records are gradually moving to a solely electronic based system. Staff reported that they can access policies and information through the electronic system.

During this year, a decision was made to divide the previous Les Amis Home Care service into two separate services. Kerri Ann Frain was the Registered Manager of the previous larger service.

The service will be reviewed regularly

Reference was made to Standard 9 of the Home Care Standards which states: "The care service will be checked and reviewed regularly to sort out any issues and make things better for you and others."

Monthly quality reports are currently undertaken by the organisation's Head of Governance. The Regulation Officer reviewed the last three months' quality reports along with the internal action tracker, which records actions outstanding and is maintained by the Head of Governance. There has been some improvement in monthly reporting since the inspection in 2020.

The Regulation Officer met with the Head of Governance on 3 November 2021 to discuss the monthly reports. Les Amis have a separate recording system for training and these two systems should work well together to highlight any areas where action needs to be taken. Actions in the tracker have not been robust or timely and do not support the Registered Manager to understand what needs to be completed. The Regulation Officer will continue to work with Les Amis to support improvements to this system.

The Registered Manager or the Team Leader meets with care receivers on at least a quarterly basis to gain feedback of the service provided. They will also undertake

more informal visits to maintain good communication with staff and to make any improvements or adjustments to the provision of the service. One care receiver reported that when they had raised an issue relating to the care provided, they had felt listened to and action was taken.

At the time of the last inspection visit in 2020, it was discussed with the Registered Manager that it would be helpful to have a record or log of informal complaints. The Head of Governance reported that there is now a system in place for recording both formal and informal comments and complaints.

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 9.2</p> <p>To be completed by: with immediate effect</p>	<p>Monthly reports will ensure compliance with registration requirements, standards and regulations. The action plan should be robust and will highlight outstanding issues to ensure the Registered Manager is aware of actions needed.</p>
	<p>Response by registered provider:</p> <p>We will continue to liaise with the regulator around how and what should be considered and reported to meet this improvement. Steps have already been taken in order to improve this reporting capability such as more detail added to the live Action Tracker.</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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