



**Jersey Care
Commission**

INSPECTION REPORT

12 Clos de Ville

Care Home Service

Clarke Avenue

St Helier

Jersey

JE2 3WJ

2 and 6 December 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 12 Clos de Ville Care Home. The service is a six-bedroom detached house situated on the edge of St Helier, with access to shops, restaurants, and public transport. The care home also has the benefit of a seven-seater car which can be used for those care receivers who have less access to independent travel.

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, personal support: Five Age range of care receivers: 18 years and over Maximum number of care receivers that can be accommodated in the following rooms:

	<p>Rooms No: 1-5 one person</p> <p><u>Discretionary</u></p> <p>Donna Bentley must complete a Level 5 Diploma in Leadership in Health and Social Care by 24 December 2022.</p>
Dates and times of Inspection	<p>2 December 2021 – 10.30am – 1.30pm</p> <p>6 December 2021 – 4.30pm – 5.30pm</p>
Type of Inspection	Announced
Number of areas for improvement	One
Number of care receivers accommodated on the day of the inspection	Five

12 Clos de Ville is operated by Les Amis Ltd and the Registered Manager is Donna Bentley, who has been in post since 15 October 2021. This is the third Registered Manager since the last inspection. Alison Brolly was registered as Manager from 21 May 2021 to 15 October 2021.

Since the last inspection on 10 December 2020, the Commission received updates to the service's Statement of Purpose. The Statement of Purpose has again been updated during the inspection, following a change to the Registered Manager and staffing.

The Commission undertook two engagement sessions with Les Amis Registered Managers in April 2021. The purpose of these sessions were 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 an impact on their ability to progress their studies for the Level 5 Diploma in Leadership in Health and Social Care due to Covid-19 and responsibilities at other care homes. The Registered

Manager meets regularly with their assessor and line manager; but is concerned at their slow progress. Following this inspection visit, the Regulation Officer received a request for an extension of the due date to complete the qualification. Further discussion with the Provider confirmed that the Registered Manager would be supported in completing the Diploma and therefore, an extension to 24 December 2022 was agreed.

The Regulation Officer also discussed with the Registered Manager and team members, the impact that Covid has had for care receivers and staff. The team at this care home stated that they found it difficult during the period of the pandemic and this has resulted in the loss of some staff members. Fortunately, at the time of the inspection, it was evident that care receivers were back to their normal routines and engaging in employment and community activities.

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 all areas.

There has been an improvement in the quality of monthly reports which supports both the Registered Manager and Provider to understand areas where action needs to be taken.

There was evidence that the quality of care plans had improved, with person-centred information. This electronic system continues to be reviewed, with a new process recently communicated to the Commission, to ensure that reviews are carried out on a three-monthly basis.

There are robust recruitment and selection processes in place and there was clear evidence that staff members are supported through an induction process. Recent adjustments to policy have ensured that registered managers of Les Amis review the safe recruitment documentation before a member of staff starts employment with the service.

Since the last inspection, Les Amis have circulated the complaints procedure to all relatives and there is a complaints form in easy-read format for care receivers. The complaints policy is also available online.

There is a robust induction process which includes a period of shadowing more experienced staff. Les Amis have improved their safe recruitment checks to include agency staff. It was positive to note that, where possible, agency staff who have already worked with this group of care receivers are used to cover any available shifts.

Staff receive training in all statutory areas and in respect of a medical condition of one of the care receivers. However, one care receiver would benefit from working with staff who were trained in Makaton and this is an area for improvement.

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. Care plans were person-centred and of good quality. Reviews had not been undertaken at this home, but the Registered Manager had only been in post for a few weeks and had prioritised this task to be completed for all care receivers by the end of January.

It was evident that individual needs and preferences of care receivers were promoted within the home. The home is busy with a variety of activities and levels of support which match the needs of care receivers.

There is a welcoming and friendly atmosphere, and the home is currently undergoing redecoration in communal areas. Two bedrooms had also been redecorated, with a third planned for early 2022. It was evident that bedrooms were decorated according to the wishes and preferences of the care receivers. It was positive to note that one

care receiver was involved in the decoration, working alongside the maintenance team.

This home has been managed by three Registered Managers since the last inspection. However, it is important to acknowledge that this does not reflect a deficit on the part of the organisation. Following the resignation of the manager at the time of the last inspection, Les Amis appointed an existing manager from a different home on the basis that they would manage a small group of homes. This was not entirely successful and following discussion with the Commission, Les Amis made the decision to restructure the management arrangements. The Manager has been in post since October 2021 and a Team Leader is also appointed to this home. The Manager is in the process of undertaking supervisions for all staff and is reviewing all care plans.

The Regulation Officer reviewed a recent monthly report which highlighted actions to be undertaken by the Registered Manager. Monthly reports need to continue to be robust and to ensure that actions are completed within timescales.

INSPECTION PROCESS

This inspection was announced and notice of the inspection visit was given to the Registered Manager four 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 initial inspection visit took place on 2 December 2021, with a follow up visit to meet with care receivers on 9 December 2021.

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 three residents at the time of inspection. The Registered Manager informed relatives of the inspection and asked if they would like to provide feedback. Discussions were held with the Registered Manager, three members of staff and one relative.

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 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 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 is attached at the end of the report.

INSPECTION FINDINGS

At the last inspection on 10 November 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 positive to note that there had been improvements in all areas. This means that there has been a policy and process change with respect to recruitment and the Registered Manager now has oversight of safe recruitment documents before a new employee starts work. The care planning process has been reviewed and there is more clarity for staff in understanding the individual needs and outcomes. The complaints policy is now available in a format appropriate to the communication needs of the care receivers. At the time of inspection, the décor of the communal areas was being updated. Further detail on these areas of improvement is contained within the report.

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 area, 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."

12 Clos de Ville has five full time members of staff, additional to the Registered Manager. There are always two members of staff present in the home between 7.30am and 6.30pm, with one member of staff staying in the home overnight.

There was one staff vacancy, with a plan for this post to be covered from January 2022, by redeployment from another Les Amis home. One member of staff was just

completing their probation and reported that they felt that training had been appropriate and that they had felt well supported.

The period of induction includes ensuring that new staff understand policies and procedures, undertake a period of shadowing, and are assessed as competent before taking on responsibilities to work alone.

At a meeting with the Provider on 14 December 2021, they confirmed that any vacant shifts should now be covered by agency staff. There is a process in place to ensure that Registered Managers have sight of safe recruitment checks for staff who are not permanently employed by Les Amis. Additionally, the Registered Manager has one member of staff who is not on a permanent contract but will regularly cover shifts on a zero-hour contract. Cover by care workers who know the care receivers and have had safe recruitment checks is an area of good practice.

Staff members at this home had been involved in a decision to change the shift pattern. From January 2022, all staff will work a system where they work every other weekend. Staff understood previous decisions during the period of the pandemic to reduce footfall, which meant long days on duty, but were happy that their views had been considered and that this had effected change.

The staff training record was requested and 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. 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. Staff at this home also receive training related to a specific medical condition of one of the care receivers. Training in mandatory areas is up to date.

All staff need to attend sessions on behaviour management training (MAYBO). It is acknowledged that it has been difficult for staff to access this training during the period of the pandemic as it must be a face-to-face session. The Provider confirmed

that training sessions have now been reinstated. It was positive to note that other agencies also attend these sessions which enables the sharing of experience.

The Registered Manager confirmed that there is an electronic database in place which enables them to track progress of all team members' training. They receive a quarterly update from the Learning and Development team, and this enables them to remind staff that they need to undertake an update to their training.

The updated Statement of Purpose confirms that there are two members of staff who have a Level 3 Regulated Qualification Framework (RQF) in Health and Social Care. One member of staff is working towards RQF Level 2 in Health and Social Care, with a further two members of staff due to start this qualification during 2022. Five members of staff have RQF Level 2 qualification in Health and Social Care which is 50% of the staff team and is the minimum requirement as set out in Standard 3.9 of the Care Home Standards.

Staff supervisions are in place and are conducted every six weeks by the Registered Manager. 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 Regulation Officer reviewed all care plans at this care home. They were informative and person-centred. It should be noted that this Registered Manager has only been in post for a few weeks. They are ensuring that they are familiar with the care receivers and that the care plans are informative for staff. However, there are no current reviews of care plans. The Registered Manager was aware of this and already had a plan to focus on this home for the next few weeks to ensure this is completed. For this reason, this has not been made an area for improvement.

Registered managers within Les Amis meet monthly. 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 provide an introduction to Les Amis and are also personalised to each home and are accessible to care receivers. This will include information on the procedure for making a complaint.

One relative reported that there was good communication with the staff and that the new Registered Manager had introduced themselves when first in post. This relative stated that they felt the Registered Manager has a good understanding of the needs of their loved one and that where they have raised issues in the past, they have always felt listened to and appropriate action has been taken to resolve the matter.

Accidents and incidents relating to care receivers are recorded on the electronic care planning system. There had been no notifiable incidents since the last inspection. Where there are internal incidents and accidents which do not require external medical advice, these are still reported for senior management review and to identify

any trends. 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.

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 was one SROL authorisation in place at the time of inspection.

Four care receivers at this care home need support but also have independence. It was evident in care plans that independence skills are promoted. During the inspection visit, one care receiver was preparing the evening meal for which they received minimal advice; another returned from a day at work, having caught public transport back to the home. Care plans demonstrated that care receivers are encouraged to make their own medical appointments but can request support to attend if they feel this is necessary.

One care receiver has a very specific morning routine and, to ensure that both the care receiver and care staff understand the structure to be followed, this has been filmed. This has enabled care staff to ensure that the care receiver consistently has a good start to their day. This was an example of a creative way to ensure a care plan is followed.

The Registered Manager contacted relatives and one requested contact with the Regulation Officer. The relative stated that, in their opinion, the staff “do a marvellous job” and that they “can’t ask for more”. The relative praised the good communication with staff and stated that they are always accommodating and open to suggestions.

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.”

All staff complete a six-month probation period, during which time they complete the care certificate and medications training. New staff members are introduced to care receivers and shadow more experienced members of staff, before being assessed as competent to take on the responsibility of working alone.

Where appropriate, care receivers are encouraged to complete a medications competency assessment. Providing it is assessed as safe to do so, care receivers can then manage all or part of their own medication administration. This is then reviewed every six months.

A staff rota is displayed in the kitchen/dining area with photos in order that all care receivers know who is coming on duty. There is also a rota for meal preparation and for daily tasks around the home. The Registered Manager has ideas to develop communication aids for the benefit of all care receivers at this home.

Care workers at this home had a good understanding of the different needs of the care receivers. One care receiver has a higher level of support and care workers supported them to communicate with the Regulation Officer. The Registered Manager reported a care receiver at this home would benefit from additional communication aids, such as staff who are trained in Makaton. There is currently no Makaton training offered to staff and this is an area for improvement.

A risk assessment is on record for care receivers in respect of Covid-19. However, the Registered Manager agreed that each care receiver needs to have their own assessment which identifies the risks for them and actions to be taken to ensure their safety. These should be completed with the care receiver and a copy given to them in a format that meets their communication needs. The Registered Manager had already identified this as an action.

The staff team had a good understanding of activities available in the community and there was evidence that all care receivers are encouraged to engage with activities which they enjoy. Where necessary, support is provided by staff.

While there was improvement in the standard of care plans for this care home, there was no evidence that they had been reviewed. The monthly report for December identified that reviews for all care plans would be completed by the end of January 2022. The Registered Manager also reported that this would be a good way for them to familiarise themselves with the care plans and to meet with all care receivers.

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 care home is in a quiet close on the outskirts of St Helier with good transport links to the centre of town. There are two bathrooms on the first floor and a laundry/utility room on the ground floor. There is a rota for care receivers to undertake their laundry, each with the appropriate level of support.

This care home is busy with the care receivers undertaking both employment and leisure activities.

At the time of the inspection visit, the lounge and kitchen were being redecorated. One care receiver was supporting the maintenance staff with the painting in the lounge. At the time of the second visit, the painting of the lounge had been completed and this gave the home a fresh and clean appearance. The carpet in the hall and stairs was also being replaced.

The bedrooms of two care receivers had recently been redecorated. Both care receivers proudly showed their bedroom to the Regulation Officer. It was also evident that the bedrooms were decorated according to their preferences. One care receiver's preferences were balanced with a need to maintain a hygienic environment.

The Regulation Officer also viewed a third bedroom with a care receiver. The care receiver stated that their bedroom was being decorated in the New Year. Staff had

supported the care receiver to choose paint colours for their room. All care receivers reported being satisfied with their bedrooms.

There is a small outside area, and this was particularly important during the period of the pandemic when it could also be used to maintain contact with relatives.

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 had recently been updated to acknowledge the new Registered Manager. This also reflected the staff team and qualifications. The Regulation Officer is 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 small care homes.

The Registered Manager currently manages two Les Amis care homes. It was positive to note that the Registered Manager intended to share areas of good practice between the homes.

There have been three managers at this care home since the last inspection. It is acknowledged that this could have been difficult for both staff and care receivers. It is intended that the current manager is permanent, and they have been working for Les Amis for some years. It was not possible to identify during this inspection if staff feel well supported by the new manager. The Registered Manager is currently meeting with all staff to complete supervisions, and this will ensure that they are aware of any areas of development and support which are required by staff.

Staff spoke positively of the training provided by Les Amis. The member of staff currently completing their probation period confirmed that this had enabled them to confidently be part of the care team.

Quality reports are currently undertaken by the Head of Governance. The Regulation Officer reviewed a monthly report completed in December 2021. While the quality of this report is improved, it is based on data provided in October 2021. 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".
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The Regulation Officer noted that care receivers can enjoy a variety of work and leisure activities which have all resumed following the initial period of the pandemic.

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

One care receiver was working alongside the maintenance team and was involved in the redecoration of the lounge area. Another returned from work outside of the home, having used public transport. A care receiver had been supported to attend an activity outside the home and one care receiver informed the Regulation Officer that they knew they would be going out for an activity later that day. It was a busy household and reflected the individual preferences and needs of the care receivers.

During the initial period of the pandemic, there were concerns that all care receivers needed to cope with the experience of lockdown and that this had the potential to be detrimental to their emotional well-being. There were no visits to or from relatives/friends and care receivers were not able to take exercise outside of the home. The Registered Manager confirmed that individual risk assessments would be put in place to ensure that future decisions would be taken based on personal vulnerability.

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 6</p> <p>To be completed: Training plan to be provided to JCC by end February 2022</p>	<p>People with learning disabilities will be provided with support by care staff with appropriate advance and specialised training. This includes communication training in Makaton or similar.</p> <hr/> <p>Response by registered provider:</p> <p>As a responsible provider of care and support for people with Learning Disabilities and Autism Les Amis regularly reviews the learning and development options available on Island for its staff teams. If face to face training is not available we review online options and/or applications through Medtech to determine if they are applicable to our working environment, and if they meet the needs of the individuals requiring said support. Les Amis are working with the Learning Disability and Autism Cluster group to ensure the apparent gap in learning and development to cover such areas is discussed and addressed through partnership arrangements. This will be tabled at the next Cluster group occurring bi-monthly, next meeting date is 26.01.2021. It must be noted that currently access to a MAKATON trainer on Island is very limited (possibly only 1) however alternatives will be looked at in partnership as this is an area that impacts on all service providers supporting people with a learning disability.</p>
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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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