



**Jersey Care
Commission**

INSPECTION REPORT

Les Amis (Home Care) Domiciliary Plus

Home Care Service

**La Grande Route de St Martin
St Saviour
JE2 7GS**

19 August 2022

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 Plus which is situated at the Les Amis head office in the parish of St Saviour. The service provides packages of support over 30 hours per week to individuals living in their own homes in central and east locations.

Les Amis (Home Care) Domiciliary Plus is one of two home care services operated by Les Amis.

Regulated Activity	Home Care service
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 personal care / personal support hours: 2249 hours per week</p> <p>Age range of care receivers: 18 years and above</p> <p><u>Discretionary</u></p> <p>Katherine Foley registered as manager of Les Amis (Home Care) Domiciliary Plus must</p>

	complete a level 5 Diploma in Management and Leadership in Health and Social Care by 21 June 2024
Date of Inspection	19 August 2022
Time of Inspection	9am to 12:30pm
Type of Inspection	Announced
Number of areas for improvement	None
Number of care receivers using the service on the day of the inspection	Six

The Home Care Service is operated by Les Amis Ltd and the Registered Manager is Katherine Foley.

The discretionary condition on the service's registration was discussed. The Registered Manager reported that there has been a break in her studies due to unforeseen circumstances. However, she will be commencing again in September 2022 and is confident that the discretionary condition will be met within the agreed timeframe.

The service's Statement of Purpose was reviewed as part of the inspection process. The Registered Manager explained that the document was updated in May 2022 following the discharge of a care receiver from the service. A copy of the revised Statement of Purpose was reviewed by the Regulation Officer and it was found to be reflective of the services provided.

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 very positive. The Registered Manager was fully engaged in the inspection process and prepared documents and evidence in advance of the visit.

Feedback received from care receivers, family members and professionals was consistently high. All spoke positively of the care provided, the positive attitudes of the staff team and the professionalism of the Registered Manager.

Staff were also eager to engage in the feedback process, giving open and honest reflections of their roles and responsibilities.

The Regulation Officer undertook a review of the organisational policies and procedures in place. These were found to be reflective of the requirements of the Home Care Standards.

Training for staff was examined in detail and cross referenced with the service's Statement of Purpose and categories of care provided. Training offered is generally consistent with the requirements set out within the Home Care Standards.

There were several examples of robust safe systems of working practices within the service. This included fire safety, incident reporting, de-brief, risk assessments and recruitment practices.

Care plans showed a good understanding of care receivers' needs and were reflective of individual wishes and preferences, they also demonstrated a 'can do' approach that supported independence skills. The Registered Manager was found to be proactive in supporting care receivers to achieve their goals and aspirations,

whilst ensuring that they were equipped with the skills to manage the everyday challenges that come with living in your own home.

INSPECTION PROCESS

This inspection was announced and notice of the inspection visit was given to the Registered Manager, 14 days before the visit. This was to ensure that the Registered Manager would be available during the visit and to confirm the service's infection prevention and control arrangements. In addition, the Registered Manager made arrangements for care receivers to meet with the Regulation Officer on the day of the inspection visit.

The Home Care Standards were referenced throughout the inspection.¹

This inspection focussed on the following lines of enquiry:

- **Safety**
- **Care and support**
- **Training**

Prior to our inspection visit, all of the information held by the Commission about this service was reviewed, including previous inspection reports, the home's Statement of Purpose, communication records and notification of incidents.

The Regulation Officer sought the views of the people who use the service, and / or their representatives, and spoke with managerial and other staff.

During the inspection the Regulation Officer spoke with the Registered Manager, and had the opportunity to spend time with care receivers who are in receipt of a service. This took place at the Les Amis offices and within a care receiver's own home.

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

Following the inspection visit, the Regulation Officer sought the views of two family members who were contacted via e-mail, having given prior consent to be contacted. Contact was also made with four professionals and ten members of staff.

During the inspection, records including policies, training records, incident reports care records and staff rotas were examined.

At the conclusion of the inspection visit, the Regulation Officer provided initial feedback to the Registered Manager. This was followed by final written feedback on 26 August 2022.

This report sets out our findings and includes areas of good practice identified during the inspection.

INSPECTION FINDINGS

At the last inspection, three 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:

- Monthly reports highlight outstanding issues in order to ensure that the Registered Manager is aware of actions required
- Care plans are regularly reviewed
- Sufficient resources are available for the Registered Manager to manage the regulated activity.

The service is currently providing a total of 381 hours of support each week to six care receivers. The size of packages of care ranges from 30 hours per week to provide leisure and social opportunities and daily living skills, to 24 hour support within care receivers' own homes. There are ten permanent members of staff

employed on a full time basis. The service is also supported by five zero hour contracted staff who provide cover for vacancies, holidays and sickness.

As highlighted at the last inspection, there were significant staff resource pressures upon the service to adequately maintain agreed levels of staffing. This resulted in the Registered Manager spending extended periods of time providing direct care and support. A decision was taken earlier in the year to reduce the size of the service which has resulted in a stabilisation of staffing levels. The Registered Manager described the decision to reduce services as “wrenching” as it meant some care receivers who staff had worked with for many years left the service; however, it was recognised that this would improve services for existing care receivers and improve working practices for staff.

Safety

<p>The Standards outline the Provider’s responsibility to ensure that people will feel safe and are kept safe. Care receivers will have the right to live safely and free from harm.</p>
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A key focus in reviewing the safety measures was to examine the policies and procedures in place to support the operation of the home. The Regulation Officer reviewed a sample of eight policies and procedures which were cross referenced to the Home Care Standards and included safeguarding, complaints and medication. The content was found to be robust with references to key legislation and supporting agencies where appropriate. All policies viewed were found to be in date or under review.

There have been two formal complaints received since the last inspection. The Registered Manager was able to provide an account of the steps taken to investigate and resolve matters to the satisfaction of the complainants, using the Les Amis complaints process. A further informal complaint has also been received and the Registered Manager reported she was working with a care receiver to explore possible solutions. If a resolution cannot be found then the matter will be referred to the Governance Manager.

There has been one safeguarding incident raised by the service since the last inspection. Outcomes were identified and these were reflected in the care receiver's care plan. Through discussion with the Registered Manager, it was evident that she is aware of her responsibilities, support available and processes to follow when raising a safeguarding alert.

There was one Significant Restriction of Liberty (SROL) authorisation in place at the time of the inspection. Review of the SROL highlighted that there were no recommendations or conditions in place. The Registered Manager reported that she is now more familiar and confident with the process for renewal, but described it as a long process and gave an example of one renewal application which took three months to process following submission.

There are robust safe recruitment practices in place which are overseen by the central HR team. Work has been undertaken to implement robust procedures for the use of agency staff. This has been necessary in order to meet the challenges of staff shortages both within the sector and as result of Covid19.

A review of recruitment files was undertaken by the Regulation Officer at the Les Amis head office on 13 July 2022. All files were found to have all the necessary documentation in place and were compliant with the requirements of safe recruitment practices. The Registered Manager was also able to provide an example of a situation where additional steps were taken as part of the safe recruitment process and as detailed in appendix 4 of the Home Care Standards.

The Registered Manager described several different initiatives that were in place to include care receivers in the recruitment of staff to support them and that are based upon individual wishes and preferences. This ranges from one care receiver interviewing staff before they are offered a place on the support team on a trial basis, to another submitting a set of criteria to the Registered Manager. For other care receivers there is the need to provide long transition periods working alongside familiar staff, in order to build trusting relationships. This is an area of good practice.

Each care receiver has an identified team of support workers. Staffing levels are determined by the assessed needs of individuals and the times which support is most needed. The Registered Manager reported that diaries of support were recently completed with care receivers to highlight when their support hours would be required, based upon the other routines and activities they have in their lives. This helped to formulate a timetable of when support would be available and what activities would be undertaken.

All care receivers have details of who to contact in the event of late / missed visits, or if they wish to cancel visits themselves. The Registered Manager is always available during office hours and there is access to an on-call system in the evenings and at weekends.

The organisation has a lone worker policy in place and staff also have access to the on call system at evenings and weekends. Staff are regularly required to work on their own and there is a requirement for the team to respond to behaviours that challenge. Specific protocols will be put in place as and when required and staff have access to behaviour support plans for any care receivers who may present with behaviours that challenge.

There is a good de-brief process in place which gives staff the opportunity to express how they are feeling, describe the details of the incident, explore what needs to be done differently moving forward and any additional support that they may require.

All staff spoken to during feedback stated that they felt well supported in managing challenging situations.

“I have worked in many different care settings and feel very supported at work and when lone working. On call are always quick to respond. I will have a check-up with my Registered Manager or Team Leader after an incident of any kind has arisen and confirm my wellbeing and how the incident was dealt with”.

“I definitely feel as if I am given enough support in my role, and the Registered Manager and other people on the team are always checking on each other's wellbeing. I have been fortunate enough that I have not encountered an extremely challenging situation but am aware that if this were to happen then there would be a debrief meeting with senior management to check on how I felt the situation went, how I was feeling, and how we could learn from it moving forward”.

“I feel we get good support especially when we have challenging situations, and we can de-brief after any situation”.

“I feel there is enough support. Our Maybo training helps us to deal with situations and the team and Registered Manager are a good support”

There was evidence of personal emergency evacuation plans for all care receivers. These were reviewed by the Regulation Officer and found to clearly detail the specific needs of each individual.

Staff support the weekly testing of smoke alarms within each care receiver's property and also facilitate three monthly reviews / practice of safe evacuation procedures. During feedback, one care receiver who is a wheelchair user, demonstrated their knowledge and understanding of the alternative methods they would use to safely evacuate the property if they could not access their hoist in the event of a fire.

There is adequate provision for first aid. Where there is a 24-hour provision provided, first aid boxes are available within the care receiver's home. Staff have been issued with their own kits to carry with them, and all receive first aid training which is updated every three years.

Notifications to the Commission since the last inspection were reviewed along with care receivers' records of accidents and incidents. No unreported notifiable incidents were noted.

Monthly quality assurance reports are undertaken by the Head of Governance. The Registered Manager supplied the reports for April, May and June 2022. Upon review

the reports were found to have clearly identified actions in relation to the Home Care Standards. The Registered Manager also has a tracker document for all actions identified which sets targets for completion and provides updates on progress made.

The HR Manager has confirmed that Les Amis is registered with the Jersey Office of the Information Commissioner.

Care and support

<p>The Standards outline that people in receipt of care and support should experience compassion, dignity and respect. Care receivers, where appropriate should be involved in all decisions relating to their care and support in a way that respects their rights, individuality and beliefs.</p>

The organisation has an assessment process in place in order to determine that they can appropriately meet the needs of care receivers, prior to offering a package of care. This is supported by access to the assessment undertaken by the commissioning service which forms the basis for the development of appropriate care plans and risk assessments.

Care plans and risk assessments were reviewed for all four care receivers which are stored electronically. Each individual has an 'All about me' assessment document which gives a comprehensive overview of specific needs, wishes and preferences, aspirations and background information. This information is used to formulate care plans in five key areas (community inclusion, finances, health and medical, keeping safe and prospects, dream and goals). Each care plan has identified outcomes and interventions, there was evidence that reviews are undertaken every five to six months.

The Regulation Officer found the care plans demonstrated a good understanding of care receivers needs. They took account of individual wishes and preferences, focusing upon a person centred approach to the support provided. Goals are agreed with care receivers and regular opportunities are taken to seek their feedback.

There is a strong focus on promoting and developing skills which will equip individuals with the necessary skills to live as independently as possible. Several examples were given of how this is achieved in practice and included a care receiver being empowered to independently report issues with fly tipping at their property; practicing for the eventuality of equipment breakdown and how this could be managed independently and supporting an individual to understand the consequences of poor budget management.

Another care receiver had expressed a wish to move to alternative housing and they were able to explain to the Regulation Officer, the steps that had been taken to help them achieve this.

The Regulation Officer had the opportunity to meet with two care receivers at the Les Amis Head office and with another in their own home. All expressed their satisfaction with the staff and support that they receive. It was positive to note through discussions with care receivers that all information detailed within the care plans was observed to be evident within practice.

Individual communication styles of care receivers are recognised and strategies put in place to support effective communication. All have copies of staff rotas which are adapted to meet individual needs. One care receiver was observed to have a daily timetable board within their home which details their activities for the day.

Another care receiver uses finger spelling as their main method of communication. All staff are taught how to finger spell during their induction by experienced members of the team and the care receiver.

During feedback, a member of staff described their experience of supporting a care receiver who has received new equipment to support them with their hearing and communication. This has opened up new opportunities for the care receiver. Staff are eager to explore new ways of communicating and create new experiences.

Les Amis have recently set up a social club for residential and home care clients. A timetable of activities is sent out to all care receivers. They will then choose which

activities they wish to attend. On the day of the inspection visit the Regulation Officer spoke with two care receivers who were attending a 'sing and sign' session that afternoon. When asked about what they had been learning they were able to demonstrate their skills in Makaton signing. They spoke enthusiastically about the session and the other activities offered by the social club.

One staff member said of the social club, *"I think the social club has been a huge success. It has given people an amazing sense of community which has expanded opportunities for people"*. Other staff spoke of how it was helping to re-build people's confidence after the pandemic.

Feedback from staff was consistently positive. All reported that they felt supported in their roles by both their colleagues and the Registered Manager. One member of staff commented *"Domiciliary plus is a brilliant team to work in and after working in different roles, it has made me appreciate how supportive the team really is"*. This was echoed by several members of the team with another stating *"We are a good team. Xxx is a good manager. She promotes staff autonomy and I feel confident and empowered to try new things"*.

Professional feedback emphasised a confidence in the team and Registered Manager. Some of the comments received are included below.

"The Registered Manager is responsive and adaptive. I feel my client is supported well. The team understand the complexities of their needs and staff manage this really well".

"In my recent dealings with the Registered Manager and her team they have shown an exceptional commitment to the individual concerned and support for family members".

"There is good communication between myself and the staff and management team".

Training

<p>The Standards outline that at all times there should be competent and skilled staff available. Staff should be provided with a range of relevant training and development opportunities.</p>

There is a well-established induction process in place which provides appropriate supervision and support for staff during the first few months of their employment. All new recruits are made aware of, and given access to, a copy of the Code of Practice for Health and Social Care Support Workers in Jersey.

There have been three new recruits since the last inspection. The Regulation Officer reviewed the induction programme for one member of staff. The Registered Manager explained that the induction process will vary depending upon which care receivers the staff member is being introduced to.

One new member of staff commenced at a time of year when the care receiver finds it difficult to cope with change. Therefore, the member of staff spent two weeks within residential services focusing upon organisational induction and transferred to working with the care receiver when it was convenient for them. This is an area of good practice.

Another member of staff spoke of their introduction to a new care receiver who has very specific communication needs. They were given time to shadow and learn how to communicate effectively as part of the induction. The member of staff requested additional shadowing time to ensure that they could independently meet the care receivers needs and this was facilitated by the Registered Manager.

Following induction, staff are supported in their role through regular supervision, appraisal and competency assessments for specific tasks. This was confirmed by staff who provided feedback to the Regulation Officer.

The Learning and Development team oversee training for all Les Amis staff. A training policy is in place for the organisation, which is currently under review. A range of mandatory training courses are made available to staff and updated at regular intervals. This includes: First Aid, safeguarding, food safety, infection

control, health and safety, manual handling, positive behaviour support and data protection. This was confirmed by a review of training records. All new recruits are expected to undertake the Care Certificate within the first few weeks of employment.

There is a blended approach to training with both online and classroom-based sessions being undertaken. The Learning and Development team reported that, due to Covid19, online training was being utilised more frequently. The Regulation Officer discussed the benefits of classroom training for particular subjects / scenarios, and it was agreed that this would be a consideration for future training.

Online training is facilitated through Social Care TV. The organisation also has accredited trainers for MAYBO, which provides positive and safer approaches to behaviour support, and a key trainer for safe handling.

In relation to specific categories of care for which the service is registered to provide (autism and learning disability), initial online training is provided. Staff will then undertake learning disability specific units as part of their Regulated Qualification Framework (RQF) qualification. Discussion with the Learning and Development Team highlighted the need to explore further training opportunities for staff who have completed RQF as part of an ongoing learning process. As a result, staff have recently been afforded the opportunity to undertake an online autism course with the Open University which provides 24 hours of directed learning.

Training in the Capacity and Self Determination (Jersey) Law 2016 (CSDL) has commenced within the Les Amis organisation and is available to all staff who have not undertaken previous training based specifically on Jersey law. The Registered Manager has attended one of the recent sessions and reported that it was very informative.

Overall, staff felt that the training opportunities offered to them were very good and were happy to make requests for any further training they required. One area which was identified by some members of staff was mental health training. This was fed back to the Registered Manager who agreed to progress this on behalf of the team.

The Registered Manager described the Learning and Development team as “very open and supportive”. The team will try to facilitate any suggestions or requests made. A staff member gave feedback that they had requested access to a specific training course for autism and this had been facilitated by the team.

The Registered Manager reported that there are three members of staff who have a Level 3 RQF, or National Vocational Qualification (NVQ) in Health and Social Care. Two members of staff have a Level 2 RQF/NVQ, with another two working towards the qualification. This constitutes over 50% of the total staff team which is the minimum requirement as set out in Standard 3.9 of the Home Care Standards.

Les Amis provide medication training for all staff as part of their induction. This is delivered in-house by staff who have a RQF Level 3 qualification and is based upon Les Amis medication competencies booklet which is very comprehensive. Once completed, staff will be observed in practice on at least three separate occasions by the Team Leader or Registered Manager. All observations are recorded, and a checklist is completed.

Medication competency continues to be reviewed at six-monthly intervals. New competency checklists have been implemented for reviews. All staff progress to a Level 3 administration of medication unit as part of their RQF qualification.

The team are also provided with specific training in relation to care receivers’ needs. This includes hoist training which is facilitated by the Registered Manager who is also the organisation’s key trainer for safe handling. Training in the use of a wheelchair adapted vehicle is also incorporated as part of safe handling training. Updates are undertaken on an annual basis.

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.



Jersey Care Commission
1st Floor, Capital House
8 Church Street
Jersey JE2 3NN

Tel: 01534 445801

Website: www.carecommission.je

Enquiries: enquiries@carecommission.je