



**Jersey Care
Commission**

INSPECTION REPORT

La Mabonnerie

Care Home Service

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

8 August 2022

THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014, all services carrying out any regulated activity 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 property situated in the parish of Trinity. There is a garden centre, adult education centre and local shop within walking distance. There is also a bus stop nearby with a route directly to St Helier.

The home is a two storey building with en-suite bedroom facilities to accommodate a care receiver with physical disabilities on the ground floor. There are three double bedrooms on the first floor, as well as a shared bathroom and staff sleep-in room. The home also has a lounge, kitchen and enclosed garden area.

La Mabonnerie is one of 11 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, physical disability and / or sensory impairment Maximum number of care receivers: 4

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. The Regulation Officer had the opportunity to observe care receivers within the home engaged in their daily activities with the support of staff who were positive in their approach, and evidently knew the care receivers well. Staff appeared motivated in their roles and spoke of their willingness to support a new care receiver into the home. However, this has had some challenges which have impacted upon staff working patterns.

Feedback from family members was complimentary of the staff team and the standard of care provided to their relatives. One relative spoke of their concerns that recent changes within the home has had upon their loved one.

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 Care Home 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 Care Home Standards. One area of training in relation to meeting the communication needs of individual care receivers was identified as an area for improvement.

Several examples of robust safe systems of working practices were demonstrated including fire safety, equipment maintenance, infection control and cleaning schedules.

A review of care plans demonstrated a good understanding of care receivers needs and were reflective of individual wishes and preferences.

INSPECTION PROCESS

This inspection was announced and was completed on 8 August 2022. Notice was given three days prior to 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 Care Home 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 both the Registered Manager and the Team Leader and had the opportunity to spend time with care receivers who live in the home.

Following the inspection visit, the Regulation Officer sought the views of three family members who were contacted by telephone having given prior consent to be contacted. Contact was also made with three professionals and a further two members of staff.

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

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 16 August 2022.

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 improvement plan is attached at the end of the report.

INSPECTION FINDINGS

At the last inspection, no areas for improvement were identified that required any follow up on this visit.

La Mabonnerie has provision for six permanent members of staff, one of whom is a Team Leader. There were two staff vacancies at the time of the inspection. The home is supported by zero hour contracted staff members who provide cover for the vacancies, sickness and annual leave. There is also occasional use of agency staff.

There are currently four care receivers living in the home with varying degrees of ability. Staff are respectful of the diversity of the group and work with them to ensure that individual needs are met.

Safety

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.

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 with the Care Home 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 in date or under review at the time of inspection.

There has been one formal complaint by a care receiver since the last inspection on 8 September 2021. The Registered Manager explained that this resulted in a change in working practices and additional security measures being implemented. This has been shared with the care receiver and ongoing support and reassurance is being given. This is discussed further in the Care and Support section of this report.

There have been no safeguarding alerts raised in relation to the home. The Registered Manager demonstrated an understating of the team's responsibilities in relation to safeguarding policy and procedures.

There have been staffing pressures in recent months due to the staff vacancies and cover for annual leave over the summer period. This has impacted upon the team who have covered additional shifts. One staff member commented during feedback that, "This is okay for the short term".

It has also encroached on the administrative time for both the Registered Manager and Team Leader, with the Registered Manager spending up to 50% of her time undertaking care shifts. The Regulation Officer discussed the potential impact on the Registered Manager's ability to undertake their managerial role if this was to continue. The Registered Manager stated that she felt the volume of additional hours was temporary and will reduce.

Staffing rotas from May to August were reviewed. A minimum of two staff are maintained at all times during the day, with one member of staff sleeping in overnight. The home also has funding for additional daytime staff three days per week to support the social and leisure activities of care receivers. Due to the current vacancies, this cannot be facilitated.

Staff reported that they will adjust their staff patterns when possible, in order to ensure that care receivers can maintain their activities. The Registered Manager spoke of the stability that a full staff compliment would bring for both care receivers and staff but explained the difficulties that the organisation is experiencing with recruitment. A staffing risk assessment is in place to ensure that levels of support do not fall below a safe operating level.

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

There was a fire evacuation plan for the home which had been recently updated. This provided clear instructions of staff responsibilities in the event of a fire. The fire logbook was up to date including regular fire drills for staff. Due to the varying degrees of support required by care receivers to evacuate, the Regulation Officer discussed the benefit of having a generic risk assessment in place. This would give the home and the organisation assurance that fire evacuation can be managed effectively at any time of the day or night.

A brief review of medication practices was undertaken at the inspection visit. Daily checks are undertaken to ensure that all medication has been administered. All Medication Administration Records (MAR) charts were found to have been signed daily. Where medication had not been administered, agreed codes had been used appropriately and notes completed on the back of the MAR chart. Information was available relating to each medication that was administered which gave details of possible side effects and interactions.

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.

There were three Significant Restriction of Liberty (SROL) authorisations in place at the time of the inspection. The Registered Manager is aware of the process for SROL applications and renewals and her responsibilities within the process. Training in the Capacity and Self Determination (Jersey) Law 2016 (CSDL) has commenced within the Les Amis organisation and the Regulation Officer discussed the importance of all staff attending training which is specific to Jersey law.

There are good 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 Covid 19. The Registered Manager confirmed that she now has access to copies of Disclosure and Barring Service (DBS) certificates of any agency staff required to work within the home. There have been no new recruits at La Mabonnerie since the last inspection.

The interior of the home was found to be in a good state of repair. It is decorated to a good standard and there many personal items which give it the appearance of a domestic environment. Care receivers' bedrooms are personalised to their wishes and preferences.

Maintenance schedules are in place for specialist equipment, such as hoists and slings. The home also has cleaning schedules in place which include appropriate infection control practices.

Monthly quality assurance reports are undertaken by the Head of Governance. The Registered Manager supplied a sample of recent reports. Upon review the reports were found to have clearly identified actions in relation 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 confirmed that Les Amis is registered with the Jersey Office of the Information Commissioner (JOIC).

Care and support

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.

There has been one new admission to the home since the last inspection. This was a transfer from another Les Amis home therefore no new assessment of need was undertaken. The Registered Manager explained the process for admission which included the involvement of commissioning professionals, visits to the home by the care receiver, involvement of individuals already living within the home and transfer of staff who were familiar to the care receiver to work in the home. In addition, a review was undertaken four weeks after the placement commenced.

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. This information is used to formulate care plans in five key areas. Each care plan has identified outcomes and interventions. The Regulation Officer noted that information in one care receivers file had not been properly transferred from the assessment document to the plan. This was reported to the Registered Manager who took immediate steps to identify the issue and rectify the plan. There was clear evidence of regular reviews of all care plans.

There is a range of communication styles amongst care receivers. This ranges from verbal language skills, objects of reference, pictorial aids and the use of ipads. Care receivers use a range of these methods in order to express themselves. Staff explained that one new care receiver has an understanding of Makaton sign language.

Observations made by the Regulation Officer during the inspection visit evidenced the steps taken by staff to ensure that individuality of care receivers is recognised.

One staff member spoke of the importance of *“respecting individuals and their preferences and not meeting collective needs”*. This was reflected in the choices of indoor activities.

Care receivers move around the home independently and access a variety of activities of their choice. One individual was observed playing the keyboard which was set up in a corner of the lounge and wearing headphones to enjoy the music. Meals are chosen by the care receivers who access recipes in magazines and pictorial cookbooks. Staff recognise the variety of abilities amongst care receivers and will adapt activities such as cooking so that care receivers can join in with elements of the activity that they can achieve and enjoy. Another member of staff commented that, *“The team try to make every day enjoyable, and I feel that we are quite successful at this”*. This is an area of good practice.

There is a wide range of activities available each week. All care receivers have access to Mencap and Les Amis social club events. Staff will go through the timetables and care receivers will choose what they wish to attend. Some will attend community activities of their choice, such as horse-riding, art classes and local exercise groups. Other care receivers have part time jobs. All care receivers in the home have strong family contacts and will spend periods of time visiting family on a weekly basis. There is also a focus on supporting individuals to maintain friendships by supporting outings with friends.

In recent months, the team have identified some difficulties with nocturnal sleep patterns which has impacted upon both care receivers and staff. This has led to a complaint being raised by one of the care receivers. The Registered Manager identified steps which have been taken to date to resolve issues for care receivers following the complaint. This has been effective and some family members reported an improvement. One family member felt that their relative was still feeling the impacts of the disturbances and that further steps needed to be taken. This was reported to the Registered Manager.

The sleeping patterns of staff continue to be affected. Evidence of this was reflected in the staffing rotas. While staff are offered the option to leave their shift early the

next day or be paid for disturbed hours, this cannot be seen as a long term solution. Staff spoke of their willingness to support the Registered Manager to find a solution, but acknowledged the impacts that disturbed nights were having. One member of staff commented *"I find this hard then I go home so tired"*.

The Registered Manager explained that steps are being taken to try and resolve the issue and some time was needed to implement identified strategies. The Regulation Officer acknowledged the efforts being undertaken. However, the impact of the issue/s on both staff and care receivers cannot be underestimated and an alternative solution will be needed in the longer term. The situation will require close monitoring and regular review.

There was general praise for the staff team from professionals and family members. Feedback received included the following comments.

"They appear to keep our client engaged in various activities with regular outings in the community".

"I was happy with the staff and the care being delivered. My visit was quite positive and I was happy with the placement. Everything that the resident needed was there for them".

"Information sharing was good. Records were up to date. The staff member had a good background and up to date knowledge of the resident".

"Staff have warm and respectful relationships with the people they support. The environment is clean and homely. I have no concerns about this house".

"I have a good rapport with staff and there is no issues, I am very happy with the care provided".

"There is lovely staff in the home and I am happy with them and the support given".

“Staff are very good and also the management. I would raise any concerns I had and I find the staff and management very approachable”

Training

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.

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. Staff are not expected to work independently until both the Registered Manager and staff member feel that they are competent to do so. One member of staff spoke of *“being given plenty of time to shadow”*, and felt it was a positive experience because it gave them different perspectives and ideas. 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.

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. A sample of supervision and appraisal records were also viewed during the inspection visit.

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.

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 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.

The Registered Manager reported that there is one member of staff who has a Level 3 Regulated Qualification Framework (RQF) or National Vocational Qualification (NVQ) in Health and Social Care. Two members of staff have a Level 2 RQF/NVQ. This constitutes over 50% of the total staff team which is the minimum requirement as set out in Standard 3.9 of the Care Home 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 and the Regulation Officer was able to view samples of some that have recently undertaken. All staff progress to a Level 3 administration of medication unit as part of their RQF qualification.

One care receiver uses Makaton as a form of communication. 'Sing and Sign' sessions have recently been set up as part of the Les Amis social club. This is designed to provide a fun and informal way for care receivers and staff to learn Makaton and maintain their signing skills. Staff reported that they had not all yet had the opportunity to attend and there is no structured plan for regular access to sessions. One member of staff commented that they felt the team would benefit from Makaton training. The Registered Manager explained that the organisation is exploring opportunities for more structured training sessions.

It is essential that staff have appropriate training in order to promote effective communication and ensure that care receivers needs are fully met. Opportunities to regularly practice signing skills are also required. This will promote confidence for both staff and care receivers and prevent frustration for individuals if they can clearly communicate their needs. This is an area for improvement.

The team are also provided with specific training in relation to care receivers needs, as detailed within the home's Statement of Purpose. This includes hoist training which is facilitated by the organisation's key trainer for safe handling, and training in the use of a wheelchair adapted vehicle. Updates are undertaken on an annual basis.

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 by: 4 months from the date of inspection (8 December 2022).</p>	<p>The Registered Provider must ensure that care receivers are supported by a staff team who have training which meets individual communication needs / styles and promotes effective communication.</p>
	<p>Response by registered provider:</p> <p>Les Amis have recently secured the option to fully train a staff member as a MAKTON trainer however this will take a period of months to achieve this fully.</p> <p>In the interim the Registered Manger will continue to utilise different communication tools, such as PECs, Flash Cards, My Choice (Makaton app), easy reads etc.</p> <p>In addition to this a request for the SALT manager to meet with the Registered Manager to assist them in the use of appropriate and effective communication tools through an assessment of the individuals needs has been made.</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.



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

Tel: 01534 445801

Website: www.carecommission.je

Enquiries: enquiries@carecommission.je