



**Jersey Care  
Commission**

## **INSPECTION REPORT**

**Sandybrook Day Centre**

**Adult Day Care Service**

**La Rue du Craslin  
St Peter  
JE3 7ZZ**

**Dates of the inspection  
12 April, 17 April and 18 April 2023**

## 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 on the inspection of Sandybrook Day Centre. The centre is in the Parish of St Peter. It provides social day care for care receivers with cognitive impairment and/or dementia, mild memory loss to a moderate level of dementia. The centre is open six days per week, Monday to Saturday. There is access to a range of activities and opportunities for social outings to encourage social, mental and physical stimulation. It is a single-story building with communal facilities, including a central hall, a dining area and social activities room leading to an outdoor patio area.

Regulated Activity	Adult day care service
Conditions of Registration	<u>Mandatory</u> Type of care: Personal care and personal support.  Category of care: Adults 60+ and dementia care.  Maximum number of care receivers: 20.  Age range of care receivers: 60 years and above.

Regulated Activity	Adult day care service
	<u>Discretionary</u> Registered Manager must complete a Level 5 Diploma in Leadership in Health and Social Care by 5 February 2024.
Dates of Inspection	12, 17 and 18 April 2023
Times of Inspection	09:40 – 13:00, 11:50 – 13:40 and 08:30 – 10:50
Type of Inspection	Announced
Number of areas for improvement.	One
Number of care receivers using the service on the day of the inspection.	On the first day of the inspection 7 care receivers were attending the centre and 3 care receivers were on outings.

The Adult Day Care Service is operated by the Government of Jersey, Health and Community Services who is the Registered Provider.

The discretionary condition on the service's registration is for the Registered Manager to complete a Level 5 Diploma in Leadership in Health and Social Care by 5 February 2024. This was discussed with the Registered Manager, who is continuing the study and is on track to complete it by the required date. Since the last inspection in April 2022, the Commission received an updated copy of the service's Statement of Purpose. This was submitted on request to include a new outreach scheme of twice weekly access to a community hub based at Trinity Youth Centre. It was submitted in September 2022.

## **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.

The findings from the inspection of Sandybrook Day Centre were positive.

There was a clear consensus in the feedback gained and the practice observed by the Regulation Officer that the team is kind, caring and hard-working. Their focus is person-centred and recognises both the care receivers' experiences and wishes and the broader impact the care receives condition has on families.

The service offers a wide range of engaging activities to care receivers. These include singing, cooking, gardening, games and outings.

The team holds a check-in meeting called "The Hub" every morning and afternoon. The session observed by the Regulation Officer was skilfully chaired and demonstrated positive team working and effective communication.

It is acknowledged that low staffing levels have been an issue for the service. However, the strategies employed to manage this represent effective management and a flexible, committed team. The Registered Manager understands her role and responsibilities and has a practical and compassionate approach to undertaking these.

The referral process through to a care receiver attending the centre is straightforward. It is outlined in the Sandybrook Day Centre leaflet given to all care receivers.

There is one area for improvement. The Registered Provider must ensure that all risk assessments document the date that they were completed, the date of any updates and the date of the next review.

## INSPECTION PROCESS

This inspection was announced and completed over three separate visits to provide a comprehensive review of the service. Notice of the inspection visit was given to the Registered Manager 12 days prior to the first visit.

The Adult Day Care Standards were referenced throughout the inspection.<sup>1</sup> This inspection focussed on the following lines of enquiry:

- **Management of the service**
- **Care and support**
- **Choice and safety**

Prior to our inspection visit, all the information held by the Commission about this service was reviewed. The information included previous inspection reports, the discretionary condition, the Statement of Purpose, and any notifications of incidents and correspondence sent to the Commission from the service since the 2022 inspection.

The Regulation Officer spoke face-to-face with the Registered Manager during two inspection visits and via email correspondence and telephone as part of the inspection process.

During the inspection visits, the Regulation Officer sought the views of people who use the service, including care receivers and three care receiver representatives. The Regulation Officer spoke to one care receiver individually and four other care receivers as part of a group. Care receivers attending Sandybrook Day Centre have varying degrees of cognitive impairment. Therefore, the Regulation Officer was sensitive to this and adapted the feedback approach to observation, participation and

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

a general discussion about a game being played; rather than asking detailed questions about the service.

During the inspection, the Regulation Officer observed and participated in activities with the care receivers and attended the morning meeting and spoke with staff. A wide range of documents were examined as part of the inspection process. These included care records, monthly reports, care receiver information and training records. Following the inspection visits, views of professionals external to the service were obtained by telephone.

At the conclusion of the inspection, the Regulation Officer provided feedback to the Registered Manager.

This report outlines our findings and includes areas of good practice identified during the inspection. One area for improvement has been identified, which is described, 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.

### **Management of the service**

The Standards outline the Provider's responsibility to ensure that where people stay is right for them and safe. There will be a management structure in place, with an integrated organisational and governance framework, which is appropriate to the needs, size and complexity of the service.

The Regulation Officer reviewed the service's Statement of Purpose with the Registered Manager. The newest amendment to demonstrate twice weekly access to a Community Hub in Trinity was discussed. The Registered Manager explained that following feedback from care receivers that the space lacked the atmosphere and the largest of the rooms felt cold, the project has not continued. However, the team can still access this and may revisit the project in the future.

The categories of care under which the service is registered were also explored. It was agreed that, at present, the categories of Adults 60+ and Dementia Care were appropriate and the Statement of Purpose accurately represents the service.

The centre is registered to support a maximum of 20 care receivers at each session. The number of care receivers attending each session during the week of April 10 2023 varied from seven to 12. The Registered Manager explained that the service is delivered to fewer care receivers than it is registered for due to a change in the care receivers' needs and low staffing levels.

The Registered Manager explained that a change in dependency levels of care receivers attending is a consequence of the closure of The Willows Day Centre. The Willows Centre had supported care receivers with more advanced levels of cognitive impairment than had Sandybrook at that point. Following its closure, all care receivers began attending the Sandybrook Centre. On days when care receivers have been assessed as having a higher level of dependency, the maximum number of care receivers is 12. This enables the service to be inclusive, provide good quality support and enable safety.

The Registered Manager explained that there had been recent difficulties in maintaining sufficient staffing numbers. These difficulties had related to staff absence and recruitment. The staffing levels at present are, a Registered Manager, three full-time Senior Health Care Assistants (SHCAs), two full-time Health Care Assistance (HCA) and two part-time HCA (more than full-time equivalent).

The Registered Manager has implemented strategies to maintain safety and staff continuity for care receivers. These include staff working at Sandybrook and the Hollies Day Centres and using three Bank/supply HCAs regularly.

The March monthly Provider report affirms that vacancies currently being recruited to are a HCA post and an Assistant Manager post. The report also highlights that a Registered Manager has been recruited to the Willows Day Service and will work with care receivers at Sandybrook Day Centre until the Willows re-opens. At the time of the inspection, the Assistant Manager post had been recruited too.

It is acknowledged that difficulties in recruiting and retaining care staff are island wide. However, the strategies represent effective management and a flexible, committed team. The Registered Manager explained that the interlinking work with other teams in Government of Jersey Health and Community Services was also positively impacting the team regarding role modelling for staff and sharing ideas from different areas.

At the time of the inspection, six care receivers were on a waiting list to attend the Day Service. Care receivers on the waiting list are sent a letter every four weeks to update them on the situation. It was discussed with the Registered Manager that having a waiting list is not desirable. However, it was recognised that some of the reasons for this were outside the Registered Manager's influence and that providing regular written communication was positive.

Monthly Provider reports are a requirement of the Adult Day Care Standards. The Regulation Officer reviewed the January, February, and March 2023 reports. The reports cover topics which include, the number of care receivers, staffing levels and training, incidents, feedback, and health and safety checks. The reporting in each section is detailed, with the feedback and health and safety sections being particulate comprehensive. Each month's report focuses on a different Adult Day Care Standard, documenting how the service considers it meets the Standard and any actions required. The reports demonstrate a commitment to ensuring good quality service and in meeting the standards.

The Registered Manager reported they had complied the recent monthly Provider reports. However, the Registered Manager of another Day Service will be compiling future reports. The Regulation Officer is satisfied this is being undertaken with immediate effect. Therefore, this is not an area for improvement.

Staff support was discussed. The Registered Manager was aware of the requirement for staff to receive quarterly supervision. It was reported that staffing levels and absences have caused some challenges in scheduling sessions.



However, this is now being to be rectified. The Regulation Officer was satisfied that now has a clear plan to ensure all staff receive quarterly supervision.

Support is ongoing through the Hub and group meetings and an open-door policy is in place which enables staff members to seek support quickly or informally. When discussing staff support, the Registered Manager clearly understood her role and responsibilities and has a practical and compassionate approach. The Registered Manager expressed that the team is hard-working and committed.

The Commission had received four notifications from staff at Sandybrook since the last inspection. The notifications clearly outline the event, the response and the outcome and were submitted promptly. The Registered Manager explained that she is informed of any incidents by staff and by reviewing entries on the Health and Community Services centralised reporting system. This enables the Registered Manager to have clear oversight of the service, undertake a review of the incident, and consider any learning or change in practice from the event.

### **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>
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The Registered Manager described the process from receiving a referral to a care receiver attending the centre. The Regulation Officer reviewed the documentation related to this process. Referrals are received from Health and Community Service professionals, mostly the care receivers' care co-ordinators, who complete and forward a Strength and Needs Assessment via Care Partner (a Health and Community Services electronic care record system accessed by social care professionals). The language on the form is person-centred. For example, one section heading is entitled, "Your life and how it might change for the better." It gives the opportunity for care receivers' to talk through anything that has recently changed in their life and or what is important to them.

The referrals are triaged by the Registered Manager from Sandybrook and the Hollies Day Centre and an assessment is arranged. Care receivers are offered the choice of an assessment being undertaken either in their home or the centre. This is undertaken by either the Registered Manager or a senior health care assistant. The assessment includes all the areas stipulated in the Adult Day Care Standard 2:2.

The plan of support is agreed upon with the care receivers' and, if appropriate, with their representative/s, depending on the care receivers' wishes and level of mental capacity. Care receivers may have a one hour or a day trial before commencing a full day if they wish.

The outcome and plan of support are shared with the team, which considers the needs of the individual and the wider group of care receivers attending. During the inspection days, the Regulation Officer acknowledged with the team that the latter is an extra dimension to consider and was satisfied the team approached these discussions professionally, aiming to balance the best interests of all care receivers attending.

The referral process through to a care receiver attending the centre is clearly documented in the Sandybrook Day Centre leaflet, which is given to all care receivers. It also clearly details the criteria for attendance, the aims and philosophy of the service and staff roles, qualifications and approach. It describes the activities and events provided and the provision for getting to and from the centre. It sets out how care receivers can have a voice in the service delivery, explore if it is not meeting their needs, give feedback or make a complaint and what to do if they no longer wish to attend.

The process, and the documentation, including the centre leaflet, are clear and demonstrate a person-centred, inclusive and collaborative approach. The Regulation Officer noted this as an area of particularly good practice and met standard 2.4 of the Adult Day Care Standards.

The service offers a wide range of engaging activities to care receivers. These include singing, cooking, gardening, board games, puzzles, cards, art and crafts, Pat dogs, and visiting guests.

The Regulation Officer observed and participated in a singing session. Care receivers and staff, including a visiting Faith Minister, sang a variety of songs together. The songs were from an era when most care receivers would have been in their late teens. Everyone present looked comfortable and engaged. Care receivers could move away to another area if they wished. However, each person remained, appeared comfortable to be there and the majority of people joined in the singing.

There is wall art made by care receivers. The patio garden area is planted with a range of flowers and vegetables. These are sometimes cooked and served at the centre.

Feedback from a care receiver's wife was that her husband was previously a Chef and that the team has supported him to undertake cooking at the centre. She values how the team recognise something that has always been important to her husband. She explained sometimes he brings things he has cooked at home and that this is "lovely for both of us." She said of the team, "they are excellent, I can't fault them."

The centre also arranges outings, including trips to the garden centre, walks, or going for a drive and an ice cream. Some activities and outings are prearranged, though they are determined mainly by the care receivers' wishes on the day, which care staff work flexibly to accommodate. This is an area of good practice as it offers stimulation and choice. Feedback from a care receiver reinforced this when they said, "it is great coming here, I choose what I want to do each day."

The Centre is clean and well-maintained. The functionality of the space benefits from, being on one-level, having an abundance of light from the skylights and from a design that facilitates both open plan and areas designated for particular activities. This enables the Centre to feel vibrant and active yet also have an overall feeling of calmness. It also enables people with a range of physical abilities to move without obstruction within the centre.

Throughout the inspection, whenever the Regulation Officer spoke with the Sandybrook staff or when gaining feedback about the team, there was a consensus that the team are kind, caring, friendly and hard-working. They recognise the broader impact that the care receivers' needs have on their families. The team ensures that relatives are afforded time and are actively listened to; demonstrating empathy and offering practical solutions when appropriate.

A care receiver's wife said, "They are brilliant and I don't know what I would do without them." Another wife of a care receiver spoke of how she can share any concerns that have occurred between sessions with staff and they update her regarding how her husband has been in the day. She spoke of this being particularly helpful, stating, "The staff always let me know how exactly how [relatives name] day has been.

The Regulation Officer reviewed a sample of care records. Care records are both on paper and stored electronically. The paper records sampled all had a clearly written summary of essential and relevant information. Support plans were in place and it was evident that six-weekly reviews of care receivers' needs take place.

Records which contained risk assessment were reviewed as part of the inspection. The Regulation Officer noted that several documents included only one identifying factor and that the date the assessment was commenced, updated, or planned to be reviewed was unclear. This is an area of improvement.

### **Choice and safety**

<p>The Standards outline the Provider's responsibility to ensure that people will feel safe and are kept safe. People will be supported, enabled and empowered to be as independent and autonomous as practicable. People's rights will be supported and protected.</p>
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The Sandybrook Day Centre Team holds a check-in meeting every morning and afternoon; called "The Hub". The Regulation Officer joined the morning Hub, discussed the afternoon Hub with several staff and reviewed the documentation used for both.

The focus of the morning Hub was planning the day. This included which care receivers were attending and any change in their conditions or support plans since the last attendance. Care receivers' wishes and preferences were highlighted; this ranged from resuscitation status to dietary likes and requirements.

The team discussed what activities would be offered and if there were any outstanding actions or tasks. It was observed that during the meeting, that staff had arranged an outing to be offered that day. The team had already undertaken risk assessments, which enabled them to plan outings safely and at short notice, blending the plans to fit care receivers' individual wishes and preferences. It was positive to see this balance of choice and safety and clearly demonstrated the social model which the team uses.

The morning Hub was skilfully Chaired by one of the SHCAs. The meeting followed a clear pre-set agenda; each staff member had the opportunity to contribute and there was flexibility to add other issues if needed. The meeting is documented. The language used by the care staff present was compassionate, with a person-centred approach to the day's plans. There was clear evidence of positive team working and effective communication.

The afternoon meeting focuses on debriefing on the Day Centre Session. The team reflects on what went well and what could be improved and consider any lessons learned. Any feedback received is discussed. Actions such as escalating any issues to the Registered Manager and entries required on Care Partner (the shared electronic system shared with other agencies and professions), are explored, agreed and actioned. The afternoon Hub represents a proactive approach to reflective practice, hearing care receivers' voices, collaborative working and staff wellbeing.

The Hub session represents many areas of good practice.

A person-centred approach was also reflected in feedback the Regulation Officer received from professional's external to the centre. It was reported that centre staff are strong advocates for the care receivers, and that "they have (care receivers) at the heart of what they do". The feedback further detailed that there had previously

been some communication challenges which the centre staff took a proactive approach to resolving with regular telephone communication and proactive monthly formal meetings.

Feedback from a social care professional also reported the team keeping care receivers at the heart of what they do. The professional also praised the team's communication skills and joint working, detailing how they had worked together on a complex situation and summarising that "they nailed it", to acknowledge the many ways in which the team excelled.

Staff recruitment is managed centrally through the Health and Community Service Human Resources Department. The Registered Manager has access to completed applications to shortlist and interview prospective employees. Disclosure and Barring Service checks, references and start dates are managed centrally by Health and Community Service Human Resources department. It was not possible for the Regulation Officer to review staff recruitment or induction documents as there have been no new staff recruited since the last inspection.

The Registered Manager provided a list of the policies and procedures the team must adhere to; the list is generic to Health and Community Services. The list included but was not limited to policies regarding medicines, dignity and respect at work, equality and diversity, data protection, customer feedback (complaints), and annual leave.

Staff reported to the Regulation Officer that they were aware how to access the policies and procedures to revise the detail and undertook this dynamically when required. The Registered Manager gave examples of when the documents had been recently used to ensure practice aligns with requirements.

The Registered Manager explained that staff training is online and in-person at the centre and advised that staff were provided with protected time to complete this within the working day. In-person training on dementia care has recently been organised and will be bespoke to the centre staff.

The Regulation Officer was shown the staff training records for online training. It detailed training topics, frequency required to be undertaken and if complete. The online course topics covered those required by the Adult Day Care Standards. The Registered Manager acknowledged some challenges with the electronic system being updated to demonstrate if the course had been undertaken. However, it was reported that changes that are being undertaken to the IT system which will improve this and the Regulation Officer was satisfied that this is in hand.

During the inspection, the Regulation Officer met with the Health and Safety Training Compliance Officer who was undertaking an unscheduled visit. The Officer explained that the Sandybrook team work collaboratively to enable Health and Safety compliance. It was explained to the Regulation Officer that in the event people were required to evacuate the building urgently, there is an evacuation plan in place which is bespoke to the needs of the care receivers.

Staff reported to the Regulation Officer that they knew how to access the policies and procedures to revise the detail and undertook this dynamically when required. The Registered Manager gave examples of when the documents were recently used to ensure that practice is aligned with requirements.

## IMPROVEMENT PLAN

There is one area for improvement identified during this inspection. The table below is the Registered Provider's response to the inspection findings.

<p><b>Area for Improvement 1</b></p> <p><b>Ref:</b> Standards 4.6 and 4.7</p> <p><b>To be completed by:</b> 3 months from the date of inspection (18 July 2023).</p>	<p>The Registered Provider must ensure that all risk assessments clearly document, the date commenced, updated and when the next review is required.</p>
	<p><b>Response of Registered Provider:</b></p> <p>We have redesigned our documentation to reflect the required improvement.</p> <p>We have a meeting booked on the 14th of July with our JCC Inspector to demonstrate this area of improvement has been actioned.</p> <p>We have implemented this improvement across all of our day care provision, in order to standardise our paperwork to adhere to standard 4.6 and 4.7.</p> <p>We have also shared this area for improvement with the HCS registered manager group and will offer the standardised format for use across the care group as appropriate.</p> <p>We welcome a further scheduled visit to Sandybrook in October to review what we have put in place and to ensure we have met this area for improvement.</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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