



**Jersey Care
Commission**

INSPECTION REPORT

Stuart Court

Care Home Service

**La Rue de Haut
St Lawrence
JE3 1JQ**

13 and 19 September 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 80 of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 (as amended) 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 Stuart Court Care Home. The home is a four-storey building in St. Lawrence which provides short- and long-term care to people over 60 years. Single en-suite bedroom accommodation is provided on four floors, with the fourth floor allocated to support the most independent care receivers. A range of communal areas are located throughout the building, and some communal areas and bedrooms have views overlooking the garden and St Aubin's Bay. Activities are organised daily, and a large garden and separate patio terrace area can be accessed independently.

According to the Statement of Purpose, the home's objective is to 'provide a high quality service that assists residents to maintain their quality of life and to safeguard their privacy, dignity and confidentiality'.

Regulated Activity	Care home
Conditions of Registration	<u>Mandatory</u> Type of care: personal care and personal support Category of care: Adult 60+ Maximum number of care receivers: 28 Age range of care receivers: 60 years and above

	Maximum number of care receivers that can be accommodated in the following rooms: Rooms 1 – 26: one person Rooms 27 and 28: one person for respite care only
Dates of Inspection	13 and 19 September 2023
Times of Inspection	1pm – 5pm & 12pm – 4pm
Type of Inspection	Unannounced on 13 September 2023 Announced on 19 September 2023
Number of areas for improvement	None
Number of care receivers accommodated at the time of the inspection	26

Methodist Homes for the Aged (Jersey) operates the Care Home, and a Registered Manager is in place. Since the last inspection, completed on July 27, 2022, the Registered Manager has upheld their statutory responsibilities, informed the Commission of notifiable events, and provided a revised Statement of Purpose.

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 this inspection were exceptionally positive, with evidence that the home has continued to comply with Regulations and Standards. The Registered Manager's presence and leadership style positively impact and affect the experience of care receivers and staff. Care receivers reported they receive a good standard of care and are supported to live a good life. They said their right to choose how to spend their time was respected, and a relaxed and calm atmosphere was noted in the home during both inspection visits.

Staff were motivated and committed to providing a quality service and took pride in their work. New staff are subject to a robust recruitment process and are provided with a comprehensive induction, supervision and appraisal programme. Staff retention is good, and there is typically a low staff turnover. Mandatory and other

appropriate training is provided for staff; most have obtained a health and social care vocational qualification. The staffing levels consistently meet Standards, and the skill mix of staff is given a high priority.

The home is well-governed, and robust governance processes are in place to ensure effective oversight of the service. A clear management structure is in place, and consistency in quality of care, leadership, staffing and management has been evident since the home was last inspected. There is a planned maintenance, refurbishment and renovation programme. The home environment positively impacts care receivers' quality of life. Samples of care records were detailed, showing that care receivers' choices, safety needs, rights and views are considered when planning and delivering support.

The inspection found that the home operates according to the aims and objectives described in the Statement of Purpose.

INSPECTION PROCESS

This inspection was a combined unannounced and announced visit which took place over two days. The first visit was unannounced and the Registered Manager was given notice of the second visit.

The Care Home Standards were referenced throughout the inspection.¹

This inspection focussed on the following lines of enquiry:

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

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

Before our inspection visit, all of the information held by the Commission about this service was reviewed, including the previous inspection report. A poster was displayed in the home, informing visitors that an inspection was underway, which invited people to contact the Regulation Officer to share their views if they wished.

Eight care receivers and two relatives gave the Regulation Officer their views of the home. The Registered Manager, Deputy Manager and seven care assistants also provided their thoughts and supported the inspection process.

The views of three professionals were requested; one person responded.

Records, including policies, care records, medication administration records, staff files, training records, and quality monitoring reports, were examined during the inspection. This inspection included a walk through the home where the Regulation Officer spoke with care receivers and observed interaction between them and staff.

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.

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.

Based upon the findings from the previous two inspections, one of the home's strengths confirms a history of good regulatory compliance. Evidence from various

sources, including written records, feedback from staff, care receivers, relatives and external health professionals, shows that care receivers are provided with a safe, well-managed, well-led home that prioritises their health and well-being needs.

An updated Statement of Purpose (SoP) was provided to the Commission in February 2023 and accurately reflected the facilities and the range and nature of care and support and clarified the intended outcomes for care receivers. The SoP promotes transparency and responsiveness, describing the aims and objectives clearly. Based on care receivers' views and thoughts, the Regulation Officer was satisfied that the home operates in line with the SoP.

The Registered Manager maintains a daily presence in the home and identified lines of authority and accountability are in place to deputise in their absence. Each staff member spoken with displayed an understanding of the management structure in place and knew of their responsibilities to promote quality care and ensure the safety of care receivers. Staff commented that they noticed the provider representatives were less visible in the home than previously.

Several care staff members came across as enthusiastic and passionate while talking with the Regulation Officer. They described a positive team working culture, encouraging them to discuss and reflect on care practices openly. They said they felt valued, supported and appreciated by the Registered Manager and encouraged to place great value in delivering care that upholds the care receiver's dignity and individuality.

The views of one health professional reinforced this view, and they told the Regulation Officer, "I love the enthusiasm of the team; they reflect on their practice, and it's a really happy team. The leadership is really strong, and that is obvious in how the staff perform".

Development opportunities are provided for staff; the Deputy Manager had recently completed a Level 5 Diploma in Leadership, and another staff member is working towards this qualification also. Most staff have completed at least vocational training at Level 2, with a number having also completed Level 3. This meets the Standards

regarding having an adequate skill mix and ensuring that the correct number of care staff on duty have completed a relevant Level 2 Diploma.

Robust governance arrangements are in place to oversee the running of the service. The Registered Manager monitors incidences within the delivery of care, such as recording of falls, tissue viability, nutrition and hydration and medication administration practices. A recently implemented proactive initiative developed by the home requests feedback from external agencies such as GPs, district nurses and other health care professionals.

The provider has additional quality assurance processes in place so that someone other than the Registered Manager monitors the quality and safety of the home's operation. Samples of reports were reviewed and identified, for example, response times to care receivers' requests for help, staffing levels and the benefit and impact of social activities. The outcomes are shared with the Registered Manager.

In addition, the provider has engaged with an external agency to review further and assess the quality of service provided. Good governance and management arrangements are a crucial strength of the service, ensuring the service remains appropriate, safe and consistent in complying with regulatory and practice Standards.

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 SoP describes the range of care needs that can be provided and clarifies that the home offers individualised care to care receivers based on their personal and health care needs and preferences. It also states that the home values the care receiver's independence and encourages them to continue to be part of the community. Evidence from the inspection confirmed that these practices happen routinely and are embedded into the heart of the service's operation.

Care receivers were overwhelmingly positive in expressing their satisfaction with the care and support they receive in the home. They described they are treated with dignity and respect, and they have choice and control over their lives. The Regulation Officer noted that care receivers looked relaxed and comfortable. Care staff respected their wishes to make choices in their daily routines, which included staying in their bedrooms, joining others in the lounges or going out of the home. A selection of care receiver comments is recorded as follows;

“I felt welcomed immediately and I knew it was a good place. I feel the standards are very good and they’re looking after me very well. I’m confident here and I feel very happy that I moved in. I can go out whenever I want and the staff are very respectful”

“It’s wonderful and I can’t fault anything. The staff are lovely and they’re so good and caring. The food choices are wonderful. You can do what you like, there’s activities and exercises to join in and they wash your clothes beautifully. I’ve put on weight and I’m much happier since I moved here”

“The girls take great care of you and I’m very happy here. It’s nice and peaceful and my room is always kept immaculate”

“It’s the best home on the Island and I think it’s wonderful. I’m really happy and comfortable. The staff do anything for you and if you’re not well they look after you and they bring you a tray of food. I see the manager every day and she brings me a paper. She’ll be the first one to do anything and the staff follow that too”

“The best thing is the staff and they kill you with kindness. You can get out and about and the activities are very good. We get some lovely meals and you can ask for anything”

It’s very pleasant and they always pull out all the stops to make it pleasant for you. I couldn’t wish for anymore”

“It’s perfect, it really is. I had a sense of being at home straight away and it’s the best thing I’ve done. The staff are so happy and they always make you feel special”.

One health and social care professional told the Regulation Officer that the home is “always clean and smells fresh” and made reference to the excellent standard of record keeping practices and staffs’ competencies in having a good working knowledge of care receivers. They described a well-managed home and said they’d never had a bad experience when visiting and found the staff team to always be happy and professional in their practice. Recent feedback provided directly to the home by visiting health professionals was noted to be equally as complimentary about the staff team.

One care receiver described that they had been admitted to the home with a pressure ulcer that had developed before they moved in. They spoke of the discomfort this had caused and described due to the staff intervention, equipment and district nurse skills; it had healed sooner than expected.

A lengthy discussion with several care staff members highlighted their understanding and appreciation of the need for timely referrals to health professionals when indicated. They spoke of ensuring dietary and hydration needs are considered, effective administration of medicines, and freedom to make decisions and choices were essential. They were clear in describing these fundamental aspects of care help keep care receivers well. Staff were aware of their safeguarding responsibilities.

The home environment supports care receivers to achieve good well-being and comfort. Several care receivers spoke positively about their bedrooms and the indoor and outdoor communal areas they enjoy using. Bedrooms were personalised with their possessions, and they described the home as giving them a sense of identity and control. Since the last inspection, the home has use of a car, which is used to take care receivers out socially.

Samples of care records were examined. They were person-centred, informative for staff, promoted independence where relevant, contained risk assessments and

stated the ultimate goals and outcome for care receivers. The details within the records included important information pertinent to the care receiver and evidenced that they had been involved in their development and ongoing review process. Attention is paid to care receivers' oral health, and records showed that this is assessed and subjected to continuing review and monitoring. Daily notes capture recordings such as social interactions, outings, health professional visit outcomes, and anything relevant.

Choice and safety

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.
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The staffing levels confirmed that the number of staff planned on each shift and skill mix meets the needs of care receivers and the minimum staffing levels as stated in the Standards. Care staff commented favourably on the staffing levels, which allowed them to provide care in line with care receivers' care plans. Throughout the inspection visit, staff were visible throughout the home, tending to care receivers' needs. Requests for assistance were answered without delay, and care receivers told the Regulation Officer they did not have to wait long for staff to come to answer their requests for help.

Samples of induction records showed that new staff are provided with support, and there are procedures in place to induct them into their role to protect the health and welfare of care receivers primarily. Samples of records maintained during the probationary period evidenced that new employees are adequately monitored to assess their performance against the job description.

The Standards for providing staff with opportunities to discuss their role through formal supervision and appraisal were met. The Registered Manager and other staff facilitated supervision sessions across the staff team. Records confirmed that supervision includes reflective practice, encouraging staff to participate and considering how situations may be managed.

Staff training records were reviewed and noted to be well maintained, easy to follow and allow the Registered Manager to monitor and track the completion of mandatory and other training completed by staff. The training records showed that a comprehensive training programme, including mandatory and service-specific training, includes subjects such as dementia awareness, tissue viability and suicide prevention. The staff were positive about their training and liked the face-to-face learning styles. Staff files contained training certificates and reflected training had been provided, which was specific to the job role. Training for staff in the use of specific equipment is also provided as evidenced by the records.

All staff who administer medication have completed training as the Standards suggest. Samples of medication administration records were examined, showing good practice in record keeping, medication storage and governance.

The home evidenced a safe approach to health and safety matters; monthly monitoring reports showed issues are addressed routinely, and maintenance work is carried out regularly. The records showed the safe maintenance of the property and equipment. Routine water management, electrical safety and fire safety checks are undertaken and align with best practices and fire service requirements. At the time of inspection, the bathroom radiators were being replaced to reduce the risk of harm.

The Commission has received appropriate notifications of notifiable events from the home as required by the Regulations and Standards. Records are maintained in the home and cross-referenced with the information provided to the Commission. There was a good culture of reporting incidents, internal review, and team discussion to establish and reflect on circumstances where harm occurred.

The inspection found strong evidence that care receivers care and support is based upon the principles of choice, dignity and respect. Care plans and feedback from care receivers, relatives and external health professionals highlighted how care receivers' personal preferences and choices were identified in their daily routines. The staff team place an emphasis on maximising care receiver comfort, and provided an example whereby a specific piece of equipment had been provided to enhance one person's wellbeing.

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