



**Jersey Care
Commission**

INSPECTION REPORT

Les Amis (Home Care) Domiciliary Plus

Home Care Service

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

30 October and 6 November 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 as per 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 Les Amis (Home Care) Domiciliary Plus, which is situated at the Les Amis head office in the parish of St Saviour. The service provides support packages over 25 hours per week to individuals living in their 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	<u>Mandatory</u> Type of care: personal care, personal support Category of care: learning disability, physical disability and / or sensory impairment, autism Maximum number of personal care / personal support hours: 2249 hours per week Age range of care receivers: 18 years and above

	<u>Discretionary</u> The Registered Manager of Les Amis (Home Care) Domiciliary Plus must complete a level 5 Diploma in Management and Leadership in Health and Social Care by 21 June 2024
Dates of Inspection	30 October and 6 November 2023
Times of Inspection	14:00-16:00 and 15:00-17:30
Type of Inspection	Announced
Number of areas for improvement	None
Number of care receivers using the service on the day of the inspection	Six

Les Amis Ltd operates the Home Care Service, and a Registered Manager is in place.

In March 2023, the Commission received an updated copy of the service's Statement of Purpose. The Statement of Purpose was reviewed as part of the inspection process and was found to reflect 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.

The inspection outcome was very positive. The Registered Manager was present through the inspection processes and provided the regulation officers with all the evidence requested.

The regulation officers received feedback from care receivers, professionals, and staff which evidenced confidence in the service and the Registered Manager.

During this inspection process, the regulation officers reviewed the staffing levels, training, policies and procedures, monthly provider reports, audit systems, notifications, and care planning. These documents were reflective and met the requirements of the Home Care Standards.

The Registered Manager provided the regulation officers with several examples of robust, safe systems of working practices within the service. This included staff meetings, risk assessments, and staff training.

The regulation officers had the opportunity to thoroughly review the care plans, which showed a good understanding of care receivers' needs and were reflective of individual wishes and preferences. They also demonstrated a close involvement and promoted the care receiver's independence skills while ensuring they were equipped with the skills to manage the everyday challenges of living in their own home.

INSPECTION PROCESS

This inspection was announced and notice of the inspection visit was given to the Registered Manager one week prior to the inspection. This was to ensure that the Registered Manager would be available during the visit. In addition, the Registered Manager planned for care receivers to meet with the regulation officers on the second inspection visit. The inspection took place on the 30 October and 6 November 2023 and was undertaken by two regulation officers.

The Home Care Standards were referenced throughout the inspection.¹

This inspection focussed on the following lines of inquiry:

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

Before the inspection visit, all 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 officers sought the views of those who use the service and spoke with professionals and other staff.

The regulation officers also met separately with the Head of Human Resources and the Learning and Development Assistant in March 2023 as part of the inspection process. In addition, the regulation officers met with the Provider and the Head of Governance at a separate meeting in June 2023. Another visit is scheduled for December 2023 between Human Resources and the regulation officers to check the recruitment processes.

During the inspection, the regulation officers spoke with the Registered Manager and had the opportunity to spend time with two care receivers. This took place at the Les Amis offices and within care receivers' own homes.

The views of two professionals were also obtained as part of the inspection process.

Records, including policies, care records, incidents, staff rotas, and complaints, were examined during the inspection.

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

At the conclusion of the inspection, the regulation officers provided initial feedback to the Registered Manager. In addition, final written email feedback was provided on 16 November 2023.

This report outlines 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.

The service is currently providing a total of 375 hours of support each week to six care receivers. The size of care packages ranges from 28 hours per week to provide leisure and social opportunities and daily living skills to 24-hour support within care receivers' homes.

The Registered Manager explained that they are less "hands-on" currently, and to fulfil their discretionary condition, they will undertake a day per week to focus on finalizing their Regulated Qualifications Framework (RQF).

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 Registered Manager is supported by a team of eight full-time staff and five bank staff. Two full-time posts are currently out for recruitment, and ongoing recruitment is taking place, including from overseas. The Registered Manager is hopeful for an additional staff member at the end of 2023 / beginning of 2024.

A clear organisational structure is available in the Statement of Purpose, which was previously provided to the Commission as evidence that this is proportionate to the size and needs of the service.

The Registered Manager believes that "*knowledge is power*". Therefore, every quarter, the Registered Manager and their team meet to reflect on strengths and weaknesses, and the Registered Manager provides guidance and support for the staff to improve and enhance their skills. This is seen as good practice, reviewing, and discussing their practice to ensure quality oversight of services.

The Registered Manager writes a monthly quality report, which includes information on staffing, incidents, and medication errors. The report must be submitted to the Head of Governance on the first day of the month. The Head of Governance then completes the monthly reports for the service; a sample of three-monthly reports was requested and reviewed as evidence. The Head of Governance attends the home care service every other month. In alternate months, the reports are completed remotely. The reports contained clear details of the areas reviewed each month with conclusions and actions identified. The Registered Manager also demonstrated an electronic 'action tracker' updated with actions/outcomes from the monthly reports.

There was also evidence of regular audits, risk assessments, and checks to assure the safety of care receivers, for example, accidents and incidents audits, care plan audits, and medication audits.

The Registered Manager also discussed with the regulation officers that risk assessments are in place for lone workers, which are reviewed yearly or before if required. There are measures to ensure staff safety while lone working with an on-call service in place to support staff and a lone working policy. This information is also available in the care receiver's care plan. This is seen as an area of good practice.

The Registered Manager discussed that there had been no complaints made about the service, either formal or informal, since the last inspection. There is an organisational complaints policy that is available online.

Staff receive supervision every six to eight weeks. These meetings are pre-arranged and agreed upon by both parties. Staff members' probation and supervision records are stored electronically; the regulation officers inspected these samples. The purpose and outcome of any meetings are recorded. Staff also receive an annual appraisal with a mid-year review.

The Training and Development Assistant described appropriate training and learning assessment per the Standards. It was positive to note a blended training approach with e-learning and face-to-face. The Learning and Development team will send reminders to all staff and reports to the registered managers. Training is also captured in the monthly reports.

Feedback received from staff members to the regulation officers regarding their training and induction was as follows:

“Regarding training, this is very good; they remind us of when we are due to renew some training, we have all the opportunities we need.”

“We have regular supervisions; we have loads of training that we can access; we also have reminders promptly when our mandatory training is due.”

“Induction is good; I feel part of the team.”

There is a six-week induction period with shadowing, which is extended if required. The Registered Manager expressed that they do not like to “shorten” this period because the care receivers that are in the service have complex needs. Therefore, they want this period to be fulfilled.

At the meeting on 30 March 2023, the regulation officers were advised that an advanced epilepsy awareness training course had been sourced and were shown the content of this course as evidence. The content was comprehensive and included education about the different types of seizures and treatment/management.

In addition, there is a designated MAYBO (managing challenging situations safely) trainer within the organisation.

The Registered Manager is undertaking RQF Level 5. Two staff within the service have RQF Level 3, and another staff undertaking Level 3. One staff member has Level 2, and another staff undertaking Level 2. Three staff members are not qualified presently.

The Registered Manager confirmed that seven staff received medication training at Level 3 RQF standard in addition to in-house medication competencies.

There are adequate maintenance arrangements in place. The Registered Manager explained that maintenance requests are submitted daily and are usually acted upon quickly. It was also confirmed by the Registered manager, that Andium, the current landlord, is responsible for six-monthly inspections.

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 to determine that it can appropriately meet the needs of care receivers before offering a care package. This is supported by access to the assessment undertaken by the commissioning service, which forms the basis for developing appropriate care plans and risk assessments.

Care plans and risk assessments were reviewed for two 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, dreams, and goals). Each care plan has identified outcomes and interventions, and there was evidence that the care receivers' take ownership of their care plans. It was evident from analysing the care plans, observing, and discussing with the Registered Manager and the staff that care receiver independence is encouraged and supported.

The regulation officers found that 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.

The Registered Manager demonstrated a proactive approach to safeguarding care receivers, including financial matters. This indicated a mindful approach to the well-being and safety of the residents. This is an area of good practice.

In the sample of the care plans analysed, there was evidence of regular reviews with care receivers and staff. There were also regular entries and evidence of appropriate referrals to healthcare professionals. Feedback received from two healthcare professionals spoke of the professionalism of the Registered Manager and "a great staff team".

The Registered Manager is expected to undertake quarterly reviews of the care plans for each care receiver. An ongoing review of the plans was evident in the inspection review process. In addition, the Team Leader is competent and also undertakes part of the review process to assist the Registered Manager.

There is a strong focus on promoting and developing skills to 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 and accompanying a care receiver in recognizing the outcomes of an inadequate economic plan.

The regulation officers had the opportunity to meet with two care receivers in their homes. All expressed their satisfaction with the staff and the support that they receive. It was positive to note through discussions with care receivers that all information detailed within the care plans was evident within practice.

Individual communication styles of care receivers are recognised, and strategies are put in place to support effective communication. One care receiver was observed to have a weekly timetable board within their home, which details their activities for the week, with the corresponding staff member allocation.

The regulation officers observed a warm and respectful relationship between staff and care receivers, which supports and encourages independence for them.

During feedback, a staff member said they have worked at Les Amis for nineteen years. This staff member loves that they have the time to provide personal care, focusing on the care receiver's needs and areas where they need more support.

When the regulation officers visited the care receivers' homes, it was noted that they were appropriately decorated with personal items and adapted to the care receivers' needs. Feedback from the care receivers was also noted by the regulation officers, some lovely and reassuring comments were expressed, such as:

"I am going to France on holidays, I am very excited, they will help me."

"If I have any concerns, I know I can call the manager, they will help me."

"I have a busy life, I work, have friends, family and have lots of activities."

“I am happy, the girls take care of me.”

“I don’t want to change anything.”

“It is difficult to meet new people, I need to trust first and built a relationship, and Les Amis gives me that, the manager supports me, I trust and feel safe around.”

Since establishing the Les Amis social club, the Registered Manager stated that it has been noticed that the care receivers are much happier and can have the social life that they dreamed of. A timetable of activities is sent out to all care receivers. They will then choose which activities they wish to attend. On the second day of the inspection visit, the regulation officers spoke with two care receivers attending the bowling session that afternoon. When asked what they thought of this social club, they were able to verbalize how fulfilling this is and how much happier they are. They spoke enthusiastically about the activities offered by the social club.

The Registered Manager said that the social club is a huge success. It has given people an amazing sense of community, which has expanded opportunities for people and provided them with a very healthy social life. The Registered Manager also expressed their plans to develop further activities for 2024, such as “Neighbourhood swap meals”. This consists of the care receivers cooking a bigger meal, dividing it into smaller portions, and then swapping meals. This way, every care receiver will have different meals for every day of the week. This was seen as an area of good practice.

The regulation officers were shown the October social activity schedule for the organisation, which included several activities such as bowling and bingo. There is a bowling league/competition on the last Thursday of every month. Care receivers can also attend activities organised by MENCAP.

Feedback from staff was consistently positive. All reported that they felt supported in their roles by both their colleagues and the Registered Manager. One staff member commented, *“Our manager is the best manager I’ve ever had, there are no little or big challenges with them, I can call them anytime, they are very supportive”*. This was echoed by the other members of the team with another stating *“We are a good team. Our manager is a good manager”*.

Other feedback received from the staff emphasised confidence in the team and Registered Manager. See below some of the comments received:

“I have worked for Les Amis for three years and I love it, this is one of the nicest and kind and helpful workplaces that I ever worked for.”

“It is a good work-life balance.”

“Les Amis’ governance is also around, we are able to reach them if we need, they send us emails every month whilst they are producing the monthly provider reports.”

“We have enough time to do notes in our shifts, no problems with time or access to it.”

“We work together with our care receivers, we encourage and support them to be as much independent as they can, including with the meds, we support them.”

“We are a small team; we have good communication skills, and we are very consistent.”

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

“The manager is fantastic and so are the staff teams. I only ever receive positive outcomes when I work across their areas – they are organised, pro-active, very thoughtful, and passionate about their role. They are always willing to listen and learn and take on board professionals’ advice, if required.”

“Their staff are great too which is a reflection of the Registered Manager’s leadership. They look after their staff and the clients, and it really shows. Les Amis are a very lucky organisation to have the Registered Manager as one of their managers.”

“I can confirm that Les Amis support two of my clients, both are very well supported, these are not 24/7 packages, both ladies live alone in the community. However, communication is very good between myself and the Registered Manager, should their needs change or package increased/decreased I am kept informed, we work jointly to resolve any issues that may occur. Both my clients are supported with their physical and mental health. When asked they are happy with the support they receive. I have no concerns at this time.”

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 regulation officers reviewed the recruitment process and a sample of recruitment files during the first visit with the Head of HR. All recruitment files were neatly organised and contained two or three references, a registration card, ID checks, DBS certificates, a contract, and a job description. All files were satisfactory regarding pre-employment checks being in place before the staff member's commencement date. The Registered Manager confirmed that they can access all the recruitment information electronically.

The Registered Manager discussed with the regulation officers that there is currently no Significant Restriction on Liberty (SRoL) authorisation under the Capacity and Self-Determination (Jersey) Law 2016.

Medication management was reviewed within the service. There was evidence of safe storage and administration of medications. Observing the procedure for administration of medication, it was evident that the system in place enhanced collaboration with care receivers to maximize their independence. Staff members confirmed to the regulation officers that they liked the system. The Medication Policy was also available, with evidence of consistent in-house training. Overall, it was noted that there are safe work systems in place, which meets the standards 6.7 and 6.8, and Appendix 8.

The regulation officers triangulated incidents reported to the Commission with the incident file in care receivers' care plans. This was found to be consistent. It was noted that information relating to incidents was reflected in the care receiver's notes. The regulation officers found that the care plans had regular daily entries, and care receivers' input was emphasized.

The notification of medication errors was discussed with the Registered Manager. The Registered Manager had been unaware that this was a notifiable event until the latest update on the reportable events that the Commission sent to all care providers. It was agreed to ensure that further notification of medication errors is made to the Commission promptly.

The communication needs of care receivers were discussed with the Registered Manager. The manager advised that if specific communication needs are identified for individual care receivers, this is addressed within the team, and training can be provided. The team has the skills and resources to understand and meet care receivers' needs. Some examples of the existing skills and training within the team are finger spelling to meet the needs of hearing and sight-impaired care receivers. Staff also use a whiteboard and visual boards.

Four weeks of duty rota were provided to the regulation officers. Despite one staff vacancy at the time of the first visit, the Registered Manager managed to cover shifts with permanent and bank staff. A new staff member was on induction at the time of the second visit.

IMPROVEMENT PLAN

There are no areas for improvement identified during this inspection.

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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