



**Jersey Care
Commission**

INSPECTION REPORT

St Joseph's Residential and Nursing Home

Care Home Service

**St Johns Road
St Helier
JE2 4XZ**

11, 13 and 19 October 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 St Joseph's Residential and Nursing Home inspection, located in St Helier and on extensive grounds. The grounds are landscaped, including seating areas, paved areas, flower beds, and a pétanque area. The home is a four-storey building with single-bedroom accommodation and communal areas over all four floors.

The home is registered to provide care to a range of needs including nursing care and dementia care and is divided into five separate units: John of Eudes, Caroline Shephard, Jubilee, John of God and Jeanne Jugan. The Jubilee unit was recently completed and added to the home's registration in September 2023. It provides sixteen bedrooms for care receivers living with dementia who require a safe environment. The building, which was initially built in the 1970s, is in the process of being modified to improve the facilities for care receivers.

According to the Statement of Purpose, the philosophy of the home is to provide high-quality care in a person-centred manner, treating individuals with dignity and respect and safeguarding the wellbeing of all residents.

Regulated Activity	Home care service
Conditions of Registration	<p><u>Mandatory</u></p> <p>Type of care: Personal care, Nursing care</p> <p>Category of care: Dementia care (16 care receivers in Caroline Shepherd unit), Adult 60+</p> <p>Maximum number of care receivers: 99</p> <p>Maximum number in receipt of personal care: 43 Maximum number in receipt of nursing care: 56</p> <p>Age range of care receivers: 60 years and above</p> <p>Maximum number of care receivers to be accommodated in the following rooms:</p> <p>Caroline Shepherd 1- 16 (one person) Jeanne Jugan 17 – 32 (one person) Jubilee 33 – 48 (one person) John of God 101 – 105, 107 – 109, 111, 112, 112a, 113, 114, 114a, 115 – 118, 118a, 119, 119a, 120 - 123 (one person) John Eudes 201 – 227 (one person)</p> <p><u>Discretionary</u></p> <p>The Registered Manager must complete a Level 5 Diploma in Leadership in Health and Social Care by 23 May 2025.</p>
Dates of Inspection	11, 13 and 19 October 2023
Times of Inspection	12:15 – 5:20pm, 1:30pm – 5:15pm and 8.50am – 12 midday
Type of Inspection	Unannounced on 11 and 13 October 2023 Announced on 19 October 2023
Number of areas for improvement	One
Number of care receivers using the service at the time of inspection	94

LV Group Limited 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. The Registered Manager has submitted applications to vary the conditions of the service's registration.

This has included a request to increase the nursing care provision in May and the personal care provision in August 2023. The Commission approved both requests based on the information provided and updated the online register to reflect the changes.

The discretionary condition on the service's registration was discussed, and the Registered Manager advised that they anticipate completing their Level 5 Diploma before the time limit.

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 overall feedback from care receivers, their relatives and health and social care professionals was positive. They were particularly complimentary of the food quality and described the social activities as stimulating. Through observations, it was evident that care receivers are encouraged and supported to enjoy a good quality of life. They described being well looked after by staff whose commitment to upholding their rights and dignity was praised.

Staff were seen to be actively engaging in regular socialisation with care receivers, and they appeared comfortable and content in their environment. Visitors were seen coming and going and expressed their satisfaction with the quality of service provided.

The home promotes a safe environment, and if care receivers are subject to restrictions on their liberty, this is done in a way that meets legal requirements. The home informs the Commission of notifiable events and demonstrates compliance with its registration conditions. Records showed that the number of complaints received since the last inspection was very low.

Staff are recruited safely in a way that meets Standards. They are supervised and provided with induction and training specific to their job roles and responsibilities. The staff team were happy and felt valued, appreciated and respected by the management. Staff were open in their communication style and spoke proudly of the care and support they provided. The staffing levels confirmed they meet the minimum standards, and they confirmed that, on the whole, there were adequate staff with the appropriate skill mix to meet care receiver needs.

The provider is investing in the home and is still undergoing a refurbishment programme to enhance and improve the facilities for care receivers. One area for improvement is ensuring that where medication transcribing occurs, it is done following best practice guidance.

INSPECTION PROCESS

This inspection was carried out over three days, and the first two visits were unannounced. The Registered Manager was notified of the final inspection visit to ensure their availability and where final feedback was provided.

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**
- **Environment**

¹ The Care Home Standards 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. Part of the pre-inspection planning included reviewing the information submitted by the Registered Manager since the last inspection to vary the conditions of the service's registration.

The Regulation Officer sought the views of ten care receivers living across all units in the home and six relatives visiting at the time of inspection. Eight relatives were emailed after the second inspection visit, and seven people contacted the Regulation Officer to offer their views.

The Registered Manager facilitated the inspection and was present on all three visits. Staff of various job roles also spoke with the Regulation Officer and described their roles and responsibilities within the home.

The views of five health professionals were also requested as part of the inspection process; two people responded.

Records, including medication administration and care records, incidents and complaints, were examined during the inspection. Service records, fire safety records, staff personnel files, training records and staffing rosters were also reviewed. The Regulation Officer spent time on each unit and observed social activities, interactions and conversations between staff and care receivers.

After the inspection, the Regulation Officer provided feedback to the Registered Manager and brief written confirmation of the inspection findings. 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.

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 home's registration conditions have been varied on three separate occasions since the last inspection, and the Registered Manager supplied relevant, supportive information for the Commission to approve these variations. One of the variation requests related to the registration of the Jubilee unit, and before its registration, a visit to the home was undertaken by two Regulation Officers. During the inspection, the Registered Manager described that some care receivers needed nursing care; therefore, they applied to vary the registration conditions on the day of the final inspection visit. This was approved. This shows that the Registered Manager understood their responsibilities and complied with the general conditions of registration as set out in the Regulations.

The Registered Manager maintains a visible presence within the home; staff, care receivers and relatives confirmed that they see and speak with them regularly. The Regulation Officer noted the Registered Manager engaging with care receivers, families and staff throughout the inspection and was heard to provide practical support. Staff were complimentary of the manager's leadership style and said they understood, valued and engaged regularly with them and were a key influence in creating a positive working culture.

Staff said the manager and registered nurses were always available to speak with, and they appreciated their advice, guidance and offers of practical support. This was expressed by relatives also, who said they felt the management team and nurses were approachable. The staffing structure is well defined, and it was noted that there are sufficient numbers of staff employed who have a relevant mix of skills and qualifications to meet Standards. Samples of staff rosters on display confirmed this. There is typically low employee turnover, and four care assistant vacancies have been recruited, with essential checks underway before they start.

To support the Registered Manager, there are nominated staff within each home unit who oversee the day-to-day delivery of care and many other operational aspects of the home. Two staff members responsible for managing two units in the home were very clear about the aims and objectives of the home and spoke of approaching all care in a person-centred way. The Registered Manager described the communication strategies in place so that key staff from each unit and other heads of departments share information and discuss relevant issues.

Both unit leads consistently described the home culture as open and very person-centred, and that staff recognised that all care receivers had individual needs and preferences. They said that their roles include ensuring consistency in standards of care and ensuring that care receivers receive support to ensure a good quality of life. As described by the unit leaders, this ethos was mirrored in feedback from relatives, care receivers, entries in care records and observations made by the Regulation Officer.

The Registered Manager described their vision for the home and suggested changes within the home to enhance care receivers' experiences. Their respect and recognition for the staff team's commitment to caring for care receivers and, in particular, the role of all registered nurses' contribution to the running and management of the home was highlighted. The managerial position requires a recognised management qualification, and the Registered Manager advised they have almost completed it.

The Statement of Purpose (SoP) refers to the provider's complaints processes. This was displayed in the reception area of the home, near the visitor's sign-in book. The Registered Manager received some negative feedback from a family member and considered that to be a complaint about their experiences. The records were detailed and showed how it was handled and communicated and provided details of the outcome. It was noted that the complainant was satisfied with the result. Care receivers confirmed they could identify staff whom they would speak with if they were unhappy with something in the home.

Effective governance processes in place supported a commitment to quality improvement. There was evidence of ongoing internal evaluation of areas, including care planning, medication management, activities and food quality through scheduled audits. The outcomes of the audits showed some action plans were developed where relevant. A monthly governance report was generated, and samples were examined. This showed that the provider representative reviewed matters including health and safety and compliance with a variety of Standards each month. The Registered Manager is provided with the reports and made aware of any actions that result from the review.

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 Regulation Officer spent time in each unit talking with staff, care receivers and their relatives and observed the goings on around the home. Discussions took place in the communal areas and bedrooms. The atmosphere during all three visits, which took place at different times, was relaxed, and care and support were observed to be unhurried. Care receivers were observed in various communal areas or spending time in their bedrooms as was their preference. Staff of all roles, including care, activities, housekeeping and catering staff, were seen to engage in normal socialisation with care receivers. Visitors were seen coming and going throughout the day.

Communication and interaction between staff and care receivers were observed to be respectful and demonstrated that staff knew them well. Some good-spirited conversations were heard, staff were seen to assist care receivers kindly and to ensure their dignity was maintained.

Many activities took place either in group sessions or on a 1:1 basis during the inspection. Examples included care receivers participating in an art activity, playing chair-based floor games, and 1:1 activities included discussing someone's music preference, painting and listening and singing to music. Staff were also observed chatting with care receivers about topics of personal relevance, which was done naturally and not as part of a scheduled activity. Some care receivers were observed outdoors, making use of the outdoor areas. Family members spoke favourably of the stimulation and activities offered when providing feedback. One family member said "they really get the best out of the clients in all of the games and crafts they arrange".

Care receivers, their representatives and one health and social care professional were highly complimentary of the home. Care receivers commented the staff team were committed to ensuring care and support was provided as they preferred. The feedback provided to the Regulation Officer confirmed that the standard and quality of care were beyond what they had expected. A sample of comments included;

"It's lovely and the staff are all very nice. They are caring, they do whatever they can for you and the food is excellent. The Chef checks on us, the games are good and you can just do whatever you like. I'm very very happy here."

"It's always very clean, the girls never stop cleaning, and they always have a chat with you anytime you like. The call bell is answered quickly and I feel well looked after, I wouldn't want to go anywhere else."

"I've got no complaints, if you ask for something they will do it and my bed is really comfortable and I sleep very well. They try their best to make you comfortable and they're really kind which is the main thing. The staff are always happy and smiling."

“I feel very relaxed here and my room is lovely as they’ve moved it round so it’s better for me. The girls are good fun and we always have a laugh. I ask every day for something different to eat and it’s no trouble, the Chef does it for me.”

“It’s wonderful, the staff are amazing and it’s seamless and beautifully run. The staff do things individually and allow lots of freedoms and it’s really impressive. They’re very caring and X has settled really well, it’s put our mind at ease” [from a relative].

“The care is beautiful, they all stop and speak to X and they never ignore X. We think X is really happy here as X looks calm and peaceful. We feel very confident that the staff are so kind, and they look after X very well” [from a relative].

“The staff always call us and keep us informed of everything and we feel very involved in X care and they take our views on board The staff treat X very well and we observe them treating everyone with care and compassion. We come all the time and X is always kept immaculate” [from a relative].

“Overall we think St Joseph’s provides a very good level of care and professionalism” [from a relative].

One relative who was spoken with described that their trust and confidence in the home had lessened slightly due to an event that had occurred, which the Registered Manager and staff team were aware of.

Feedback from one health and social care professional was praiseworthy of the home and they described the care as “compassionate, thoughtful and kind” and they commented positively on the ways in which staff approach care receivers and their families.

Samples of care records for care receivers living across all units, with personal care and nursing care needs, were examined. Overall, the care records showed that care receivers' assessments outlined and shaped the care they required.

Individual preferences were reflected in care plans, and they were regularly reviewed and updated to reflect changing needs and evidenced that staff were knowledgeable

about their wishes. Pre admission assessments were completed and formed part of the care records.

Families and care receivers commented that they felt involved in the care planning and review arrangements and were consulted about changes in conditions. One family member spoke of their involvement in their relative's end-of-life care planning arrangements and said this had provided them with comfort in knowing what the home could provide for their relative. While the care planning Standards were met, consideration should be given to strengthening the quality of information about important events, people and places and family background for care receivers with dementia.

Staff with varied roles within the home, including nursing, care, catering and housekeeping staff, spoke of a positive culture and described it as an open, supportive, homely environment. They said they felt supported by the management and felt happy and content in their work and explained the care and support they provide in line with the SoP. Staff said they could differentiate between care receivers with nursing and personal care needs and described this in detail between the two units registered for dementia care. They spoke of sufficient staffing levels, with appropriate skill-mix to meet the demands of the home.

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>

The two units explicitly registered under the category of dementia care are fitted with keypad-controlled locks to prevent care receivers from exiting the building without supervision. The doors are locked for safety reasons, and care receivers have unrestricted access to all areas within the unit, except for store rooms and the like. The Registered Manager ensures where care receivers are subjected to significant restrictions on their liberty (SRoL), these restrictions are lawful. The home maintains

a register of care receivers subjected to SRoL. Care receivers were seen to walk freely through the home and had access to the Chapel.

Notifications are submitted appropriately to the Commission, and this includes care receivers who are subject to SRoL and other notifiable events as set out in the Standards. Staff were clear about the requirement to report events and also described their responsibilities to inform family members of incidents. The Registered Manager is made aware of incidents in the home and has, on occasion, telephoned the Commission to report issues. Where care receivers have fallen or are deemed to be at risk of falling, there are low beds and sensor mats provided.

The Jersey Fire and Rescue Service prohibited using one part of the building in July 2023, and a notification was made to the Commission about this. All routine fire safety checks follow the timescales set by the fire service and staff complete fire safety training by e-learning. The Registered Manager also performs a simulated emergency fire alarm response every three months for night staff and every six months for day staff. The home has a fire evacuation plan, and the staff team explained the fire safety measures they follow in an emergency. The Registered Manager has planned for fire evacuation training to take place in November, which will be delivered by an external professional with qualifications in fire safety.

The home has a water safety plan to maintain water hygiene, and water samples are checked for bacteria and temperatures. Equipment, including handling equipment and slings, was subjected to routine testing and records confirmed this.

Samples of medication administration records (MAR) were examined in three units, which found that on the whole, good practice in medication administration was noted. Care receiver information was detailed to supplement the MAR, and medication was stored safely. On one unit, there were five out of fifteen MARs where handwritten instructions to administer medication needed to follow best practice transcribing guidance. This is an area for improvement, which the Registered Manager acknowledged. Samples of MAR in the dementia-specific units noted a low incidence of the use of certain types of medications typically used for agitation.

A sample of employment records was examined, which noted a consistent, safe approach to recruitment, which was in line with the Standards. All checks, including references, enhanced criminal records check, immigration status and nurse registration details, had been provided in advance of the staff member starting work. The staff handbook, provided to staff when they begin work, was reviewed, which requests that staff seek the manager's permission if they should take up secondary employment. Samples of supervision and appraisal records were seen also.

Training records showed that staff received appropriate mandatory training, and additional training courses were provided to support them in their roles. The Registered Manager had arranged for several staff to undergo vocational training in the principles of dementia care, which is due to begin in November. Care staff in more senior positions in the home have a minimum of a Level 3 vocational qualification in health and social care. Forty-three care staff have a minimum of a Level 2 award, twenty-eight staff have completed the care certificate, and seven staff have recently started working through the care certificate.

One staff member takes responsibility for the staffing rosters, and consideration is given to the skill mix of the team. Some staff are given supernumerary time to focus on management duties if this is part of their role.

Care receivers and their representatives told the Regulation Officer that their choice was respected in many aspects of their daily lives, such as where they spend their day and their choice of meals. They said they could do as they wished and pursue activities if they wanted to, and staff respected their choices. Staff described how their role was to provide safe and quality care, and they emphasized respecting care receivers' choices and personal preferences.

Care receivers expressed their satisfaction with the choice and quality of food in the home. They said the chef is actively interested in speaking with them daily to get their feedback about the standard of food and preferences.

The chef confirmed this also and described that care receivers are included and involved in the menu planning and explained the importance of nutrition, hydration, social stimulation and presentation impacts on their dining experience. They said

that the staff team inform them about weight gain or loss to ensure care receivers are provided with the nutrition they need.

Environment

<p>The Standards outline that the environment will enhance the quality of life for people in receipt of care and the accommodation will be a pleasant place to live or stay.</p>
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The planned programme of refurbishment continues, and there have been improvements made to the environment. This has included improved outdoor garden areas, astro turf fitted to balconies, the creation of a family lounge in one of the units, and a hair salon in another unit. A new carpet was being fitted to another unit during the inspection, and the staff desk area was replaced with a seating area to benefit care receivers. The Registered Manager described their vision for the home and explained some planned environmental changes, which will enhance the communal spaces for care receivers and their families.

The home was found to be fresh smelling, and visibly clean. Families and care receivers commented on the standards of cleanliness and the quality of furnishings and décor.

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 6.7</p> <p>To be completed: with immediate effect</p>	<p>Where medicines are transcribed by staff in the home in exceptional circumstances, best practice guidance must be followed and clear records maintained.</p>
	<p>Response of Registered Provider:</p> <p>Deputy residential manager has worked alongside senior carers. Medication administration assessments carried out for all staff administering medication, as well as certificate of competency.</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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