



**Jersey Care
Commission**

INSPECTION REPORT

Highlands Care Home

Care Home Service

**La Rue de Froid Vent
St Saviour
JE2 7LJ**

**29 November 2023
5 January 2024**

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 Highlands Care Home. The service is situated within a residential area of the parish of St Saviour. The care home has easy access to town via a nearby bus stop. There is a garden centre and a small shop within walking distance.

The home's main building consists of 13 single apartments and eight two-bedroom apartments. All apartments have a kitchen, bathroom and lounge.

There is also a communal lounge and a central dining area.

The home also comprises 18 self-contained flats to the rear of the main building, which is known as Bon Air Court, and a two-bedroom bungalow, which is called Girasoli.

A large garden area has free access for all care receivers. Car parking is provided for both the main home and Bon Air Court.

Regulated Activity	Care Home Service
Conditions of Registration	<p><u>Mandatory</u></p> <p>Type of care: personal care</p> <p>Category of care: adult 60+, physical disability and / or sensory impairment, learning disability, autism, mental health</p> <p>Maximum number of care receivers: 49</p> <p>Maximum number in receipt of personal care: 49</p> <p>Age range of care receivers: 18 years and above</p> <p>Maximum number of care receivers that can be accommodated in the following rooms: Highlands Apartments 1,2, 3, 4a, 4b, 5, 6a, 6b, 7, 8, 9, 10a, 10b, 11, 12, 13, 14a, 14b, 15, 16, 17a, 17b, 18a, 18b 19, 20a, 20b, 21a, 21b - One person Bon Air Court Apartments 1 – 18 - One person Girasoli Bedrooms 1 and 2 – One person</p> <p><u>Discretionary</u></p> <p>The Registered Manager must either provide formal confirmation from an appropriate educational source that their academic qualifications have equivalence to QCF Level 5 Diploma in Leadership in Health and Social Care Module or obtain this specific qualification by 04 January 2025.</p>
Dates of Inspection	29 November 2023 & 5 January 2024
Times of Inspection	9:00- 16:30 & 9:00 – 13:30
Type of Inspection	Announced
Number of areas for improvement	Three
Number of care receivers using the service on the day of the inspection	46

St Philips Care Limited operates Highlands Care Home, and a registered manager is in place.

The discretionary condition on the service's registration was discussed, and the Registered Manager confirmed that they are close to completing the Level 5 QCF qualification.

Since the last inspection on December 7, 2022, the Commission has received an updated copy of the service's Statement of Purpose as part of the inspection process.

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.

St Phillips Care Limited oversees an extensive network of 34 care establishments, one in Jersey and the remaining across the UK these are managed by a structure of regional managers. The care homes employ quality assurance and governance procedures led by the Registered Manager and the Provider. The information technology system facilitates structured care assessments, planning, and record-keeping. Regular visits by the Regional Manager cover various aspects, such as maintenance, incidents, and complaints, with monthly audits, including compliance assessments.

The care home displays its insurance certificate, including a service user agreement in residents' welcome packs, and has received positive medication management feedback from a pharmacist inspector. Staffing levels are satisfactory, and employees express contentment and support. The inspection notes that while the Registered Manager demonstrates genuine care, there is room for improvement in task delegation to enhance operational efficiency and oversight across all aspects of home management.

The Registered Manager prioritises resident well-being with a focus on happiness and effective care. Feedback from residents, staff, and relatives aligns with this ethos. Relatives praise the smooth transitions into the home and the ongoing support provided.

Comprehensive assessments, care planning, and positive risk-taking strategies are evident, facilitated by an efficient information technology system, for both record keeping and overall governance. Care planning emphasises the autonomy of care receivers. During the inspection, staff demonstrated compassionate and respectful support, prioritising dignity and privacy. The home employs a full-time activities coordinator who tailors activities to the diverse needs of care receivers, typically planned on an individual or small group basis.

The care home prioritises person-centred care through thorough assessments and planning, ensuring that care receivers' needs and preferences are heard and supported. Staff, equipped with handheld devices, have easy access to care plans. In Highlands Care Home, staff respect care receivers' autonomy in their residences, allowing them to decide daily activities, waking times, and meal preferences. The home offers meal options, and care receivers can request alternatives or cook in their flats, promoting independence.

Consent is diligently obtained from care receivers, with adherence to the Capacity and Self-Determination Law, when concerns arise about an individual's capacity. The focus on positive risk-taking in risk assessments enhances care receivers' control over their lives, reflecting good practice. The Registered Manager complies with safeguarding procedures, with practical plans and actions to address concerns. Staff understanding of safeguarding criteria and their ability to suggest strategies showcase a commitment to maintaining a safe and supportive environment.

Following the previous inspection, an improvement plan was initiated, emphasising the necessity for recruitment files to meet Care Home Standards. While some improvements have been made, further organisation and oversight are required.

The Regulation Officer recognised the home's broad support across various care categories, including specialities like Autism and Drug and Alcohol support. Staff, especially those providing direct support to these specialities, require additional training to enhance their skills.

This inspection acknowledged the challenges faced by the home in the past year, emphasising the impact on staff within the Highlands Care Home. Caring for individuals with diverse needs was acknowledged, suggesting that staff could benefit from resilience and bereavement support as part of their training and well-being program. While supervision records indicate good standards with evidence of training and development, there is a need to improve the frequency of supervision and annual appraisals to meet established standards.

There are three areas of improvement identified as a result of this inspection.

INSPECTION PROCESS

This was an announced inspection carried out by two regulation officers on November 29, 2023, & January 5, 2024; the Registered Manager was provided with seven days' notice of the first day of the inspection and 21 days' notice of the second inspection. This was to ensure that the Registered Manager would be available during the visits.

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**

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection reports, notifications, complaints, safeguarding alerts, correspondence, and the home's Statement of Purpose.

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

The regulation officers sought the views of those who use the service and their representatives and spoke with managers and other staff.

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

During the inspection, records including policies, care records, incidents, maintenance schedules and complaints were examined. The Regulation Officer also undertook a walk round of the premises.

At the conclusion of the inspection, the Regulation Officer provided initial feedback to the Registered Manager. Final written feedback was provided on 25 January 2024 following completion of the inspection process.

This report sets out our findings and includes areas of good practice identified during the inspection. Where areas for improvement have been identified, these are described in the report and an improvement plan is attached at the end of the report.

INSPECTION FINDINGS

At the last inspection, one area for improvement was identified, and an improvement plan was submitted to the Commission by the Registered Provider, setting out how these areas would be addressed.

The improvement plan was discussed during this inspection, and it was identified that more progress needs to be made. This means that the registered provider still needs to meet the Standards concerning safe recruitment checks and needs a plan to resolve this.

Highlands Care Home has a total of 49 beds, which provide personal care to care receivers with a wide range of needs.

The team comprises of one deputy manager, seven senior carers, 16 carers and four zero-hour contracted staff. The home is also supported by domestic, catering and maintenance staff.

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 Provider, St Phillips Care Limited, is an extensive organisation with 34 care establishments. They have a range of regional managers within their organisational structure to reflect the number of care homes being managed.

The care home implements various quality assurance and governance procedures overseen by the Registered Manager and the Provider. During the inspection, the Regulation Officer was shown the information technology system, which provides a structured and coherent way of carrying out care receiver assessments and care planning, including risk assessments and case notes recorded by staff.

The Regulation Officer was also provided with evidence of governance policies and reports and how management functions are monitored to ensure tasks are being carried out.

The Regional Manager visits every six weeks to review various areas such as maintenance, accidents, incidents, falls, and complaints. A detailed report of each visit is prepared for the Registered Manager, highlighting any necessary actions. Furthermore, monthly audits of care plans are conducted, utilising a compliance assessment tool to assess aspects like health and safety, finances, infection control, and the dining experience throughout the year. The frequency of audits is tailored to the specific area under review.

During the inspection, the care home was visited by the Commission's Pharmacist Inspector, who found positive practices when managing medication, which had led to

no medication errors since the last inspection. The Pharmacist Inspector found robust training around medication and good record keeping.

The Registered Manager demonstrates genuine care for residents and staff; however, improving task delegation would be beneficial. This would help contribute to more efficient operations and ensure oversight is given to all home management areas.

At the last inspection, an improvement plan was put in place, which stipulated that the Registered Manager must ensure that all recruitment files contain all the necessary information relating to safe recruitment checks, as set out in Appendix 4 of the Care Home Standards. Recruitment files were checked at the time of this inspection, and it is noted that while some improvements have been made to the checks in place when recruiting, this continues to need enhanced organisation and oversight. This remains an area for improvement.

The Regulation Officer considered the categories of care for which the home provides support and how this is wide-ranging. Given the various specialisms, such as supporting individuals with Autism and Drug and Alcohol difficulties, there needs to be additional training for staff in these areas to ensure they have the skills necessary to help care receivers. This is an area for improvement.

This inspection also highlighted some of the challenges the home has faced this year and considered the impact this has had upon all staff working within the Highlands Care Home. The complex nature of caring for individuals with wide-ranging needs was recognised and discussed; all staff would benefit from resilience and bereavement support as part of their training and well-being offer from Highlands Care Home.

Staffing levels were noted to meet the requirements of the Care Home Standards, with sufficient staffing available on each shift. The staff consulted as part of this inspection reported being happy in their place of work, and the staff felt well

supported by both the Registered Manager and Deputy Manager. Staff had received an induction and mandatory training; recommendations were made to the Registered Manager about delegating tasks, such as supervision, to ensure all staff receive regular supervision.

Supervision records were examined at this inspection; the supervision provided to staff is of a good standard, with evidence of training, development, role progression, and areas for growth and well-being. However, the frequency of supervision and Annual appraisals needs to meet the standards; this is an area for improvement.

Care and support

The Standards outline that people in receipt of care and support should experience compassion, dignity and respect. Care receivers, where appropriate should be involved in all decisions relating to their care and support in a way that respects their rights, individuality and beliefs.

The Registered Manager has a straightforward ethos for home management and commented, "*The residents come first as long as they are happy and looked after. That is the most important thing*". When gaining feedback from residents, staff and relatives, there was an overall feeling that this was a true reflection of the care and support received within the home.

Relatives of care receivers commented that transitions into the home had been handled very well and that both the care receiver and family members had felt supported throughout this process.

There was evidence of comprehensive assessments and care planning, including risk assessments and promoting positive risk-taking. The home's information technology system supports monitoring and checks to ensure these documents are updated regularly. Where possible, care planning is led by the care receiver, providing them with choice and autonomy over how they wish to live.

During the inspection staff were observed supporting care receivers, they showed compassion, respect and warmth in how care was delivered. The exchanges

between care staff and care receivers were unhurried, with consideration given to dignity and privacy. Care and support were carried out with a cheerful demeanour.

The home employs a full-time activities coordinator who provides several activities for care receivers; due to the vastly varying needs of care receivers, activities tend to be planned on a small group or individual basis.

The environmental arrangement of the residence ensures that each care-receiver has a flat, fostering independence and providing opportunities for convenient visits from relatives.

Care receivers and their family members were consulted as part of this inspection. Their feedback was consistently positive, with a few comments detailed below:

“I didn’t really want to come here at first, but it has got better as I’ve got used to it”

“The Registered Manager is lovely she always checks in, whenever she goes by”

“The home has made a difficult transition much easier, our relative visits us at home but is always eager to get back to Highlands which is so reassuring to us”

“The Manager has helped every step of the way in taking in our relative, we are very happy with the care”

“The Registered Manager deeply cares for the residents”

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 care home uses person-centred assessments and care planning to ensure care receivers are listened to and supported in a way that is important to them. Staff

supporting care receivers can access individual care plans through a handheld device, allowing easy access to information as required.

Staff acknowledge and respect that when working in Highlands Care Home, they operate within the personal residence of care receivers. In this setting, care receivers retain the autonomy to decide their daily activities, including the choice of waking times, meal preferences and daily activities. The home offers four meal options during designated mealtimes, and care receivers can request choices. Additionally, care receivers can prepare their own meals in their own flats, further promoting independence and personalised decision-making.

Staff obtain consent from care receivers when providing support. When concerns arise about an individual's capacity to provide consent, adherence to the Capacity and Self-Determination Law of 2016 is followed. This legal framework is followed to ensure that care can be delivered in the best interest of the care receiver, taking into account their well-being and individual circumstances.

Risk assessments are conducted when required, focusing on endorsing positive risk-taking. This approach enhances care receivers' agency and control over how they prefer to lead their lives; this is a good practice area.

The Registered Manager has demonstrated adherence to procedures in addressing safeguarding concerns and managing complaints about the service. Effective plans have been implemented, and actions taken to mitigate identified risks for the future. During interactions with staff, there is an understanding of the criteria defining a safeguarding concern, and the staff members were able to suggest strategies for addressing these concerns.

IMPROVEMENT PLAN

There were three areas 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 3.1</p> <p>To be completed by: With immediate effect</p>	<p>The Registered Manager must ensure that all recruitment files contain all the necessary information relating to safe recruitment checks, as set out in appendix 4 of the Care Home Standards.</p> <hr/> <p>Response of Registered Provider:</p> <p>This issue was rectified on the day of the inspection and the appropriate form was printed and filed.</p> <p>All staff files are audited at least monthly, in addition to this staff files are reviewed by Regional Manger on her compliance visits.</p> <p>DBS applications are completed electronically, Head office and Regional manager have access to this site to monitor progress.</p>
<p>Area for Improvement 2</p> <p>Ref: Standard 3.11</p> <p>To be completed by: 4 months from date of inspection (5 May 2024)</p>	<p>The registered person will ensure that all care/support workers complete and remain up to date with statutory and mandatory training requirements.</p> <p>Additional training in the following areas is required:</p> <ul style="list-style-type: none"> Autism Drug and Alcohol support Resilience Bereavement <hr/> <p>Response of Registered Provider:</p> <p>All mandatory training has been completed and this is stored electronically on our on line training portal. Additional training has been sourced as</p>

	<p>requested and this will be provided by Hospice Jersey for bereavement. Training for drug and alcohol support, we are looking for a training provior that will support with this. All additional training has been added to staff induction.</p>
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<p>Area for Improvement 3</p> <p>Ref: Standard 3.14</p> <p>To be completed by: 3 months from the date of inspection (5 April 2024).</p>	<p>The registered person will ensure that all care/support workers are given regular opportunities to discuss their role and identify any issues through formal supervisions and appraisal, at least four times a year.</p>
	<p>Response of Registered Provider:</p> <p>As per St Philips care policy staff are allocated a supervisor who will ensure they are provided with the opportunity to sit and discuss their roles and responsibilities and to provide an opportunity for feedback. The home manager has allocated all senior staff to complete supervisions with care staff, the Deputy manager will complete supervisions with heads of department, and the home manager will complete the supervisions for the Deputy manager, head house keeper will continue to complete for all domestic and laundry staff, head chef will continue to complete for all kitchen staff. In addition to this the supervision tracker is updated and sent to the Regional Manager to monitor compliance.</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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