



Jersey Care
Commission

INSPECTION REPORT

17/18 Le Grand Clos

Care Home Service

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

6 and 8 March 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 17/18 Le Grand Clos care home. The care home is located in St Helier parish within a large housing estate housing estate. It comprises two interconnected homes: one featuring three bedrooms and the other two bedrooms, alongside an additional sleep-in room designated for staff. Both homes are equipped with a communal bathroom, living room, kitchen, and toilets on the ground floor. The properties have private back gardens and front parking spaces for vehicles. The home has access to a vehicle to support the social and appointment needs of care receivers.

A bus stop situated on the main road offers convenient transportation options into the heart of St Helier. Additionally, the proximity of a local shop and retail park enhances the living experience by ensuring essentials and more are within easy reach.

17/18 Le Grand Clos is part of the Les Amis network, which operates a total of 11 care home services.

Regulated Activity	Care Home Service
Mandatory Conditions of Registration	Type of care: Personal care / Personal Support Category of Care: Learning disability, autism Maximum number of Care Receivers: 5 Age Range: 18+ Maximum number of people in the following rooms: Bedroom 1-5 - one person
Discretionary Condition of Registration	Registered Manager of 17/18 Le Grand Clos must complete a Level 5 Diploma in Leadership in Health and Social Care by 31 July 2026 or by that time to have demonstrated an equivalent qualification.

Dates of Inspection	6 and 8 March 2024
Times of Inspection	09:00-11:30 and 09:15-11:30
Type of Inspection	Announced
Number of areas for improvement	None
Number of care receivers using the service on the day of the inspection	4

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

The discretionary condition on the service's registration was discussed with the Registered Manager, and it was reassuring to know that measures to address this condition are being effectively pursued and are on schedule.

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.

Family feedback highlighted satisfaction with the service, emphasising its effectiveness, particularly in creating a warm, homely environment that meets care needs and promotes well-being. Additionally, the service's commitment to excellent communication, transparency, and regular updates was praised, helping build trust and keep relatives informed .

The Regulation Officer could evidence effective collaboration with external health and social care professionals. This collaboration ensures that individuals receiving care have prompt access to specialised health advice whenever necessary, enhancing the overall quality and responsiveness of the care provided.

The service demonstrates effective practices in management and governance within the care home. These aspects include robust leadership, clear policies and procedures, effective communication, and a strong commitment to continuous improvement.

The service successfully adheres to the staffing level standards for the current number of individuals receiving care. Achieving these standards is crucial for regulatory compliance and fulfilling the fundamental care needs of the care receivers.

An activities programme is a noteworthy strength. The dedicated activities are instrumental in creating a varied and stimulating activity schedule that meets individual wishes and preferences and enriches their quality of life.

There are no areas for improvement resulting from this inspection.

INSPECTION PROCESS

This inspection was announced and notice of the inspection visit was given to the Registered Manager one week before the visit. The Regulation Officer visited on 6 and 8 March 2024.

A separate meeting was held with the Head of Human Resources and the Learning and Development Manager on 21 March 2024 as part of the inspection process; this was undertaken in conjunction with another Regulation Officer.

The Care Home Standards were referenced throughout the inspection.¹

This inspection focussed on the following lines of enquiry:

- **Is the service safe**
- **Is the service effective and responsive**
- **Is the service caring**
- **Is the service well-led**

Prior to the inspection, all the information held by the Commission about this service was reviewed, including the previous inspection report. The Regulation Officer gathered feedback from care receivers and their representatives. They also had discussions with the service's management and other staff. Additionally, feedback was provided by professionals external to the service.

As part of the inspection process, records, including policies, care records and incidents, were examined.

At the conclusion of the inspection, the Regulation Officer provided feedback to the service management. This report sets out our findings and includes areas of good practice identified during the inspection.

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

INSPECTION FINDINGS

At the last inspection, no areas for improvement were identified.

Is the Service Safe

Emphasising the importance of creating a safe environment so care receivers are protected from avoidable harm, with a focus on policies and procedures.

The Regulation Officer reviewed risk assessment practices within the home and observed that they were relevant, proportionate and periodically updated, combining feedback from healthcare professionals, care receivers, and their representatives. This showed that risk assessments for care receivers play a fundamental role in safeguarding their health, well-being, and safety.

During the inspection, the Regulation Officer reviewed the duty rotas, which demonstrated that there were always adequate numbers of skilled support workers available to fulfil the care and support requirements of the individuals in care.

During the inspection process, staff recruitment was also reviewed. The Regulation Officer could find evidence that there was a comprehensive recruitment process in place, which contained essential stages, including background checks, qualifications, reference checks, and interviews. This inspection showed that the recruitment practices in place were robust and fully compliant with the required standards. This not only demonstrates a commitment to supporting high levels of safety and care but also reflects the organisation's commitment to creating a secure environment for both care receivers and the staff who support them.

The Regulation Officer reviewed the medication management processes within the care home. This evidenced that the management of medicines aligns with legislation and best practice guidelines. The care home had implemented measures aimed at reducing the risks linked to medication errors and enhancing the effective administration of medicines. These measures included conducting medication assessments with role-play and regular medication audits in a classroom environment. Documentation provided during the inspection demonstrated staff competency in medication assessment, with all pertinent information being appropriately revised and updated as necessary.

Is the Service Effective and Responsive

Assessing the organisation of the service so that care receiver's needs are respected and met.
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The Regulation Officer reviewed an updated statement of purpose submitted by the care provider, which detailed the provider's aims, objectives, and various services offered. The Regulation Officer noted that the care provider conducts its processes in a manner that not only meets regulatory standards but also corresponds with the provider's registered values and mission statement.

The inspection revealed evidence of this collaborative work, such as the involvement of professionals in the well-being assessments of the care receivers. There was evidence of regular meetings where the care receivers' needs were evaluated and measured by external professionals in conjunction with the service to determine if the care provided needed any readjustments. This highlights its importance in maintaining continuity of care, minimising risks, and improving the care experience for individuals. Furthermore, the feedback received by the professionals corroborated this evidence: “*The communication with this team has always been great. The house is responsive*”.

During the inspection, the Regulation Officer observed and found evidence that the service delivers care that respects the care receivers' lifestyle, wishes, and preferences within the context of capacity and liberty legislation, which is fundamental to providing person-centred care.

During the inspection, the Regulation Officer examined care receivers' care plans, observing that the care provider consistently supports these plans with any recommendations from health or social care professionals. The care plans are organised into five main sections: profile, medical information, communications, care plan (which includes charts and assessments), and care visits. Within the care plan section, the information is further categorised into six subsections: community and inclusion, finances, health and medical information, independent living skills, keeping safe, prospects, dreams, and goals.

During a discussion about handling sensitive issues like end of life, it was noted that the organisation has recently introduced a new feature to the online care planning system known as the 'end-of-life passport'. This feature is in its early stages of development. It is encouraging to see the service actively exploring enhancements in this area, demonstrating its commitment to facilitating respectful and transparent conversations on end-of-life matters. Furthermore, the Registered Manager said that Les Amis is initiating participation in a bespoke workshop hosted by a hospice about the end of life. This workshop is attended by care receivers with support worker assistance and aims to provide a deeper understanding of life's final stage and help the organisation better comprehend the needs of care receivers. This was corroborated by the Learning and Development Manager, where further clarifications were provided, as two staff members from Les Amis will undertake train the trainer in May for this specific training.

Is the Service Caring

Evidencing fundamental aspects of care and support are provided to care receivers by appropriately trained and competent staff.

In evaluating care practices, the Regulation Officer observed a comprehensive approach to care that incorporates the care receivers' physical, emotional, and social needs and spiritual well-being. The review of care plans by the Regulation Officer revealed a detailed understanding and consideration of the unique preferences, histories, and needs of each care receiver. During the inspection of the care home, it was evident that the personalised care plans reflected an environment where the care receivers were heard and valued.

Observations of care receivers in their daily environments and interactions with staff further emphasised the service's dedication to creating a supportive and empathetic atmosphere. Furthermore, the Regulation Officer's efforts to gather feedback directly from their families provided invaluable insights into the lived experiences of those at the heart of the service.

“We have found everyone involved to be exceptionally caring, helpful and completely focused on providing the safest and most comfortable environment for Xxx. I have been extremely impressed with the service and care provided by everyone I have had contact with so far.”

“Xxx has a very good relationship with the excellent and caring staff that regularly support them. All aspects of their health are regularly reviewed.”

During the course of the inspection, feedback was sought from care receivers. Care receivers consistently expressed a profound sense of belonging and described the care home as being their home. Feedback about staff included not only their professionalism and kindness but also their efforts in involving care receivers in decision-making processes, which was supported by the care receivers: *“They help me when we go shopping and choose what to buy, and I enjoy it very much when we go out on the bus”*.

Formal supervision and performance appraisal systems were evident. The structured frameworks in place demonstrated that support workers are supported to openly discuss their responsibilities, address encountered challenges, and receive valuable feedback.

Upon assessing workforce wellbeing within the service, the Regulation Officer found evidence of effective systems in place that promote the professional growth of the team members. The implementation of these systems not only enhances overall job satisfaction but also promotes the mental wellbeing of support workers by ensuring their concerns are acknowledged and addressed promptly, which was confirmed by the team upon feedback received.

Is the Service Well-Led

Evaluating the effectiveness of the service leadership and management.
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During the inspection, the Regulation Officer identified that the service had established systems designed to capture and address feedback effectively. This includes mechanisms for reporting concerns, a transparent process for handling complaints, and communications between care receivers, their families, and staff. The effectiveness of these systems was further validated through positive feedback received by the professionals, indicating that concerns are not only heard but are acted upon in a manner that reflects a commitment to the well-being and dignity of all involved.

“I have a good relationship with the staff and would not hesitate to raise any concerns should they arise.”

These processes highlighted the organisation's commitment to maintaining high standards of care and responsiveness to the needs of the care receivers. Feedback obtained from staff members further supported and reinforced this perspective. Staff comments included a commitment to deliver person-centred care and emphasised their involvement in decision-making processes that empower care receivers.

"I've been part of the Les Amis team for six years now, and I consider myself truly fortunate. The sense of community and familial bond we share here is remarkable."

"My manager is always available for us, creating an environment where I feel comfortable discussing any matter, confident in receiving unwavering support."

"I've found the perfect equilibrium between my work commitments and personal life."

"The training provided is comprehensive and thorough, yet there's ample time allocated to complete it."

"I'm new here, but I already feel very welcomed and supported by the team, especially during my induction process."

There was evidence that the service supports diversity. This was observed in the way the service organises and participates in various cultural celebrations, which helps the diverse backgrounds of care receivers and staff and enhances the lives of everyone involved. Additionally, the service's efforts to incorporate personalised decorations were observed during the inspection process. Rooms were personalised to each care receiver's preferences, a space that felt welcoming and familiar to everyone.

The organisation displays a robust organisational and governance framework, as evidenced by defined policies and procedures governing daily operations and care practices within the service. The Regulation Officer observed that these policies and procedures undergo regular review and updates to align with changes in legislation and best practices.

In discussions with the Registered Manager, it was outlined that the service prioritises staff knowledge, competency, and support through a "policy of the month" initiative. This approach involves team discussions on selected policies and procedures, with additions or changes incorporated as needed. Additionally, staff members have continuous access to all policies and procedures through the online system, ensuring easy reference and adherence to established guidelines.

The Registered Manager evidenced to the Regulation Officer their commitment to promote a culture of continuous learning and improvement across all levels. This includes the provision of initial training with regular updates and refreshers. Evidence was also provided by the Learning and Development Manager, who is actively involved in training initiatives.

IMPROVEMENT PLAN

There were no areas for improvement identified during this inspection and an Improvement Plan is not required.

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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