



**Jersey Care  
Commission**

## **INSPECTION REPORT**

**43 Clubley Estate**

**Care Home Service**

**Les Amis Head Office,  
La Grande Route de St Martin  
St Saviour, JE2 7JA**

**15 May 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 43 Clubley Estate Care Home.

The service is located in a residential area of St Helier. It is a domestic property, where each care receiver has their own bedroom situated on the first floor, alongside two communal bathrooms and a staff sleepover room. The ground floor comprises a lounge, dining room, and kitchen, with outdoor space available at the rear of the home. Additionally, three parking spaces are provided at the front of the property.

Regulated Activity	Care Home Service
Mandatory Conditions of Registration	<p><u>Mandatory</u></p> <p>Type of care: personal care, personal support</p> <p>Category of care: learning disability, autism</p> <p>Maximum number of care receivers: five</p> <p>Maximum number in receipt of personal care / support: five</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: bedrooms 1-5, one person</p>
Discretionary Condition of Registration	None
Date of Inspection	15 May 2024
Time of Inspection	09:00 – 11:00
Type of Inspection	Announced
Number of areas for improvement	0
Number of care receivers using the service on the day of the inspection	4

The Care Home service is operated by Les Amis Ltd, and there is a Registered Manager in place.

## **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.

Care receivers and their families praised the service for its welcoming and family-like environment that meets care needs and enhances overall well-being. They also appreciated the service's commitment to open communication, transparency, and regular updates, which helped build trust and kept the care receivers and relatives informed.

The Regulation Officer was able to see effective collaboration with external health and social care professionals.

The home demonstrates effective management and governance practices. This includes effective leadership, clear policies and procedures, active communication, and a commitment to continuous improvement.

The service meets staffing level standards, which is crucial for regulatory compliance and ensuring the fundamental care needs of all care receivers are adequately met.

The service's activities programme shows strength, as evidenced by its contribution to meeting the care receivers' preferences and enriching their quality of life.

The service has enhanced its staff training programme by transitioning to more face-to-face training sessions, which represents a positive improvement in staff development efforts.

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 a week before the visit.

The Care Home Standards were referenced throughout the inspection.<sup>1</sup>

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 our inspection, all of the information held by the Commission about this service, including the previous inspection reports, was reviewed.

The Regulation Officer sought feedback from four care receivers and three of their representatives. They also had discussions with the service's management and other staff present on the day of the inspection. Additionally, feedback was sought by three 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 Registered Manager.

This report outlines our findings and includes areas of good practice identified during the inspection.

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<sup>1</sup> 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 assessed the organisation's safety procedures and had access to risk assessments. It was observed that risk assessments were developed and regularly reviewed. The service utilises a record keeping system known as 'Zuri'. Feedback received demonstrated evidence of the involvement of care receiver representatives: *"I am aware of Xxx having a risk assessment, with the details changing from time to time as required"*.

During the inspection process, the Regulation Officer had access to the duty rotas, which evidenced that there were always sufficient competent and experienced support workers to meet the care and support needs of individuals receiving care. Some feedback received by the workforce corroborated this.

*"We try to consider everyone's needs, and special occasions, taking in consideration staff's culture and personal needs."*

Staff recruitment was reviewed during a previous visit to the head office in March 2024, and upon examination of the staff folders, it was found that the recruitment process met the Care Home Standards. All essential documents for staff members were in place before their employment commenced. Additionally, staff received an induction consistent with the Standards, and records indicated that probationary reviews were conducted, and their performance monitored and assessed.

The Regulation Officer analysed the medication management protocols implemented by the service. This assessment revealed that various measures to mitigate risks associated with medication errors promoted care receivers' safety.

The service demonstrated adherence to best practices in medication administration, evidenced by comprehensive policies and procedures, regular medication assessments, and routine medication reviews.

The service demonstrated effective Health and Safety procedures. Staff regularly conducted safety checks, such as water temperature recording and fire safety checks, which were evident in the monthly reports. These practices underline the service's dedication to maintaining a safe environment for care receivers, aligning with regulatory standards for health and safety in care facilities.

Additionally, infection control measures were consistently observed during the inspection. Cleaning schedules were followed, with the active participation of the care receivers. In the kitchen, all food items were appropriately labelled and stored. The overall cleanliness and tidiness of the home was visibly maintained. Care receiver's representatives also confirmed this via feedback received.

*"When I recently went to make Xxx some toast and took the butter from the fridge, I noticed that all food was labelled and dated in accordance with the usual food hygiene standards."*

### **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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During the inspection, the Regulation Officer assessed the service's compliance with its mandatory conditions. This involved examining the care receivers' needs and evaluating how the service met these requirements. In discussion with the Registered Manager, it was determined that the service adhered to these provisions by exclusively providing personal care and support to the care receivers.

Delegated tasks were reviewed, and staff were undertaking relevant and up-to-date stoma training, as evidenced by the training information provided. This indicates that the service has established a system where staff members are assigned specific responsibilities to meet the care receiver's needs.

The Regulation Officer noted evident collaboration and communication within the service, as demonstrated in the care plans and observed practices. Documentation revealed regular visits by the General Practitioner (GP), chiropodist appointments, eye tests, and dentist appointments, indicating a proactive approach to addressing the care receivers' healthcare needs. This was corroborated through feedback received from healthcare professionals.

*“The Chiropodist commented that Xxx's toenails and feet are in very good condition.”*

*“Nurse commented that skin looks better, which they were pleased about.”*

During the inspection, evidence showed the service's commitment to person-centred care. Documentation and practices demonstrated clear recognition and implementation of this principle. The service showed a robust process for involving care receivers in planning and adjusting their care plans, ensuring their voices are heard and respected. This included regular reviews of care plans with the participation of care receivers, where their preferences and changes in needs were discussed and promptly acted upon.

Furthermore, staff training highlighted an emphasis on respecting individual choices, understanding the legal aspects of consent and capacity, and strategies for enhancing communication with care receivers to better ascertain their wishes. The commitment to these principles was evident not only in the care practices observed but also in the positive feedback received from care receivers and their relatives, further affirming the effectiveness of the service's approach to care.

*“They are deeply caring for the residents – genuinely seeking to help the residents enjoy life and reach their potential.”*

*“I really like seeing how they relate to the individuals, with respect and warmth, respecting their wishes.”*



During the inspection, the Regulation Officer thoroughly examined the care plans for all care receivers. It was evident that the service creates personalised care plans, and actively involving health and social care professionals. Additionally, discussions with the Registered Manager clarified how the service handles sensitive topics such as Do Not Attempt Cardiopulmonary Resuscitation (DNACPR).

End-of-life considerations were addressed in care plans as part of a holistic approach to individual care. The service displayed notable efforts in this regard, evident through various arts and crafts used to enhance care receivers' understanding of the topic. The Registered Manager has recently undertaken specialised training off Island and combined with the collaborative efforts of the staff team and care receivers, exemplifies a comprehensive approach to meeting the needs of care receivers and supporting decision-making when this time arises.

### **Is the Service Caring**

Evidencing fundamental aspects of care and support are provided to care receivers by appropriately trained and competent staff.
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In reviewing the care plans, it was clear that the service closely monitors the well-being of care receivers and actively seeks their feedback. The care plans are organised into five main sections: profile, medical information, communications, care plan (which includes charts and assessments), and care visits. The information in the care plan section is further categorised into six subsections: community and inclusion, finances, health and medical information, independent living skills, keeping safe, prospects, dreams and goals.

There is evidence in the care plans of ongoing development and input from the care receivers. It was also encouraging to see that staff members record daily notes reflecting the care provided in each care plan. After analysing the care plans, the Regulation Officer sought feedback from the staff team and care receivers. It was positive to note that the care provided mirrors the feedback received by the care receivers.

*“They are my mates; they always do what I want.”*

*“If I say no, I know that they listen to me.”*

*“I always have fun with them.”*

Furthermore, feedback received by the care receiver’s representatives also highlights this evidence.

*“I am hugely grateful for the care that Xxx receives at Clubley and within the wider Les Amis organisation. They thrive under their care.”*

*“The staff is so lovely and caring, Xxx is very well looked after.”*

The staff were able to demonstrate awareness of the care plans and their involvement on a day-to-day basis.

*“I have been here six months, and I feel confident that I am able to fully support the care receivers.”*

During the inspection, it was evident to the Regulation Officer that the service has implemented a structured approach to engage support workers in ongoing discussions about their responsibilities. Formal supervision and appraisals are undertaken, in line with the Standards, which aim to identify and address any challenges the staff team encounter in their role.

This approach highlights the service's commitment to continuous improvement and also promotes overall well-being, which was noted by feedback received by staff feedback.

*“I feel supported and very well in here.”*

*“I would like to think that we can all be open and count on each other.”*

## Is the Service Well-Led

Evaluating the effectiveness of the service leadership and management.

During the inspection, the Regulation Officer noted that the service had implemented systems aimed at capturing and addressing feedback effectively. These systems encompass mechanisms for reporting concerns, a transparent process for handling complaints, and open communication channels among care receivers, their families, and staff. The service embraces the feedback received, and this is taken seriously and acted upon as needed. Positive feedback from care receivers' representatives indicates a culture of openness and responsiveness within the service.

*“The issue that I raised with the Registered Manager was dealt with promptly and thoroughly. If I email the house about anything, I always get a prompt reply, and the telephone is always answered.”*

*“I know the Registered Manager for a while, and I know she will liaise with me every time when needed.”*

The service demonstrated its commitment to diversity by actively engaging in cultural celebrations and personalising living spaces. Throughout this inspection, it was evident that the service organises and takes part in various cultural events, catering to the diverse backgrounds of both care receivers and staff members. Personalised decorations in the rooms, coupled with daily updated whiteboards, provided care receivers with a clear understanding of their daily activities and options, nurturing a welcoming and familiar atmosphere.

Feedback from the care receivers further emphasises that these efforts contribute to a more enriching environment, highlighting the care provider's dedication to diversity and inclusion.

*“They always make special decorations, on Valentine’s day, Christmas day... we all help, and we love to see the house with different things.”*

The service provided evidence of comprehensive training for the workforce, including sessions on 'maybo' (develops people's ability to influence a positive and safer outcome in situations where behaviours of concern present risk), manual handling, first aid, understanding autism, food hygiene, fire safety, health and safety, and end-of-life care. This training demonstrates adherence to Care Home Standards, enhancing the quality of care provided.

The Regulation Officer observed the workforce's confidence during interactions with care receivers, which was also noted in feedback. The comprehensive and bespoke training promotes a secure environment for both staff and care receivers, a point corroborated by additional feedback received. Representatives of care receivers noted that this training has positively impacted the service as well.

*“When I get to know newer members of staff, they tell me about the training they are receiving, and those more longstanding members are usually continuing in their personal, professional development, taking their care qualifications to a higher level.”*

## **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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