



**Jersey Care  
Commission**

# **INSPECTION REPORT**

**Westley Lodge and Cottage**

**Care Home Service**

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

**Inspection date:  
7 November 2024**

**Published:  
14 January 2025**

## 1. 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 to monitor compliance with the Law and Regulations, to review and evaluate the effectiveness of the regulated activity and to encourage improvement.

## 2. ABOUT THE SERVICE

This is a report of the inspection of Westley Cottage and Lodge and there is a registered manager in place.

Registration Details	Detail
Regulated Activity	Care Home
Mandatory Conditions of Registration	
Type of care	Personal care, personal support
Categories of care	Learning disability, autism
Maximum number of care receivers	Four
Maximum number in receipt of personal care/personal support	Four
Age range of care receivers	18 years and above
Maximum number of care receivers that can be accommodated in each room	Room 1 – 4, one person

## Discretionary Conditions of Registration

The Registered Manager must complete a Level 5 Diploma in Leadership in Health and Social Care by 31 July 2026 or by that time demonstrated an equivalent qualification.

Additional information:

The Commission received an updated Statement of Purpose in January 2024

## 3. ABOUT THE INSPECTION

### 3.1 Inspection Details

This inspection was announced and notice of the inspection visit was given to the Registered Manager seven days notice prior to the visit. This was to ensure that the Registered Manager would be available during the visit.

Inspection information	Detail
Dates and times of this inspection	7 November 2024 09:00 – 14:45
Number of areas for development from this inspection	None
Number of care receivers accommodated on day of the inspection	Four
Date of previous inspection:	4 and 12 October 2023
Areas for development noted in 2023	None
Link to previous inspection report	<a href="#">Westley Cottage and Lodge, 2023 Report</a>

### **3.2 Focus for this inspection**

This inspection focused on the following areas of enquiry:

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

## **4. SUMMARY OF INSPECTION FINDINGS**

### **4.1 Progress against areas for development identified at the last inspection**

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

### **4.2 Observations and overall findings from this inspection**

Since the last inspection, there have been no changes within the staff team. However, three of the team had only worked within the care home for a short while and were completing a comprehensive induction during the previous inspection period. Having new care support workers commencing in quick succession put extra responsibility on the Registered Manager and the existing team, whose priority was ensuring the new staff had the appropriate skills and knowledge in the safe provision of care, whilst developing professional relationships with the care receivers. The investment in the new staff was evident during this inspection.

Westley Lodge and Cottage is situated in St Helier within easy walking distance to shops, cafes and parks. The main part of the care home, the Lodge, accommodates three care receivers, each of whom has their own bedroom. The cottage provides a homely environment for one care receiver and is tailored to their needs. The cottage can be accessed by staff through interconnecting doors, allowing for flexibility in the allocation and support for the staff.

At the time of this inspection, the communal areas of the Lodge were undergoing internal maintenance and redecoration. The work was being carried out by one of the Les Amis maintenance team. The Regulation Officer was pleased to note the maintenance worker knew the care receivers and clearly carried out his work being mindful of their needs. The care receivers plan activities with their key worker. During the inspection, three of the care receivers were enjoying activities away from home, either with staff support or independently. The Regulation Officer met with three of the four care receivers, who gave positive feedback about their home and the staff who support them.

Prior to and during the inspection, the Registered Manager and staff team fully engaged with the process, provided all requested documents, gave detailed information regarding the running of the home, and willingly answered questions regarding their roles. The staff rota was analysed and demonstrated appropriate cover for the service.

Policies are accessed via the electronic record system, and the Regulation Officer viewed a number. Those viewed were relevant and up to date. The staff team clearly knew how to access the policies, and there was evidence, held by the Registered Manager, that they had signed to state that they had read and understood the policies.

## 5. INSPECTION PROCESS

### 5.1 How the inspection was undertaken

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

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection report from 4 and 12 October 2023, reviews of the Statement of Purpose, variation requests and notification of incidents.

The Regulation Officer gathered feedback from three care receivers and two of their representatives. They also had discussions with the service's management and other staff. Additionally, feedback was provided by two 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 sets out our findings and includes areas of good practice identified during the inspection.

### 5.2 Sources of evidence

The sources of evidence reviewed as part of this inspection are listed in Appendix 1.

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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/>

## 6. INSPECTION FINDINGS

### 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.

An area of focus for the Regulation Officer during this inspection concerned the maintenance of the home and the quality of facilities. On arrival at Westley Lodge and Cottage internal maintenance had commenced in the lounge. Other communal areas, including the kitchen and bathroom, would also be redecorated as part of this phased work. The attached cottage had been fully redecorated during the summer. The work is undertaken by the organisation's maintenance team, who completed a detailed risk assessment before commencing the work. In discussion with the maintenance worker, it was clear that he knew, and was known, by the care receivers and was cognisant of their needs when carrying out the work.

Feedback from a professional who visits the home:

*"On each occasion I visited Westley Lodge the environment was clean and clutter free but still felt homely."*

The Regulation Officer was informed that the property's landlords, Andium Homes, are due to complete the exterior maintenance and redecoration once the interior has been completed. They are working closely with the Registered Manager and Les Amis' Maintenance Manager to oversee the process safely and with limited disturbance to the home's running or to the care receivers.

The home has been fully staffed for the past fourteen months. Three new staff commenced in close succession to each other. Following their commencement at Westley Lodge and Cottage they undertook a detailed induction programme covering all the appropriate mandatory and statutory training along with the key training required by the organisation. The induction also included a comprehensive six-week shadowing schedule, working with experienced staff. This ensured the new staff had the opportunity to build trusting and supportive relationships with the care receivers.

The Registered Manager and established care team members stated there was a significant increase in workload during the induction process. However, since the beginning of this year, when the new staff were all fully inducted, the benefits to the care receivers in the relationships they had built with the new staff and the payback for the staff team made it a most valuable process.

The Regulation Officer reviewed the fire safety log and noted that all regular checks, such as fire alarm tests, extinguishers and fire drills, were dated and signed as completed. There was an up-to-date fire evacuation plan that had been developed in July 2024. In discussion with care staff, all were able to describe the actions to take in the event of a fire alarm or evacuation of the building, and their fire safety training was complete and current. The Regulation Officer also spoke to three care receivers during the inspection and asked them what action they would take if the fire alarms went off. Each of them could describe where they would exit the property and where the muster point was located. One of the care receivers informed me they regularly practice fire drills.

Policies are accessible to staff in a central Les Amis electronic policy folder. Care staff are informed of amendments to policies and are responsible for reading and confirming they understand them well. The Registered Manager can check which policies have been read and signed by the care staff and follow up on any that have not been confirmed as being read or that need to be prioritised.

The Regulation Officer was provided with an up-to-date health and safety risk assessment covering hazards, including slips, trips, and falls, manual handling, electricity, control of substances hazardous to health (COSHH), storage, fire, and infection control. The severity and likelihood of each risk were rated, and, where appropriate, actions were documented.

Two regulation officers attended the organisation's head office to review the safe recruitment processes for the whole organisation, which includes Westley Lodge and Cottage. Staff files were examined, and a transparent recruitment process was demonstrated, which included references, confirmation of staff identification, and up-to-date Disclosure and Barring (DBS) checks.



## Is the service effective and responsive?

Assessing the organisation of the service so that care receiver's needs are respected and met.

The care receivers have lived together for several years and have good interpersonal relationships. The cottage is interconnected with the lodge, and both parts of the home have been designed to meet the specific needs of the care receivers.

The Regulation Officer reviewed the care records, which are managed on an electronic record system, and was pleased to note that they are person-centred and capture the strengths and abilities of the care receivers. The care plans and risk assessments are regularly reviewed with the care receiver to ensure that changing needs and preferences are catered for, and any new risks are mitigated.

Feedback from a care receiver:

*"I get on well with all the staff, they are helpful and cheerful. The food is good, and I help to choose what we have."*

There was evidence of effective monitoring of daily, weekly, and monthly tasks required to ensure the home's compliance and comfort. The monitoring includes, for example, cleaning schedules, household tasks, and safety checks. Staff allocated to complete the tasks are regularly changed to ensure everyone knows how to complete all tasks, and no one person is relied on for specific duties. Staff were able to articulate and demonstrate how they worked with the care receivers to understand their wishes regarding the management of the home, such as meal planning and preparation, choice of their bedroom décor and preferred activities.

Care receivers have personal weekly plans that include activities such as employment, meeting with friends and family, adult education, including cooking skills, managing finances, and attending social events. Three care receivers happily gave feedback to the Regulation Officer about living at Westley Lodge and Cottage; the feedback was overwhelmingly positive. One of the care receivers stated they liked living at Wesley Lodge and Cottage and enjoy going out with staff who are "good, nice, they look after me".

## Is the service caring?

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

During the inspection, the Regulation Officer discussed the notifications that had been submitted to the Commission with the Registered Manager. The notifications were appropriate and demonstrated transparency from the service.

There was evidence that the needs of the care receivers were changing as they age. The care team has recognised these changes, and appropriate referrals have been made to specialist services such as speech and language therapy, occupational therapy, and family nursing and home care. Following input from the specialist services, care plans were reviewed and updated with the care receiver, and a number of new initiatives were implemented to reduce risk and maintain independence.

Feedback from professionals who input Westley Lodge and Cottage was positive, and they described it as a caring service. When asked if the service is caring, one responder stated, *“I have observed that staff have a positive relationship with clients they are supportive - elements of trust, good rapport, and understanding of their client’s needs and wishes were observed on all occasions”*.

Staff demonstrated a good working knowledge of the Capacity and Self-Determination (Jersey) 2016 Law principles. There were examples of care receivers being supported with the appropriate information to make decisions for themselves. The appropriate safeguards for care receivers’ finances were in place.

Feedback from a relative of a care receiver:

*“We have nothing but praise for all the staff who look after Xxxx. They are all incredibly kind and caring.”*

Care staff have regular supervision as well as an annual appraisal. One of the team stated that they found the supervision beneficial and went on to say that the Registered Manager is very supportive and can

be approached at any time for advice and support by members of the team.

The Regulation Officer was pleased to observe the service effectively supporting the care receivers in maintaining their independence, providing compassionate care, and fostering a sense of dignity and well-being.

### **Is the service well led?**

Evaluating the effectiveness of the service leadership and management.

The Registered Manager introduced the Regulation Officer to the care staff, and care receivers. They explained that although internal redecoration work was being completed within the home, they didn't want to delay the inspection and felt it was important to see the home during a time of upheaval, as it was during such times that the cohesiveness of the staff and care receivers could be best observed.

The Registered Manager is undertaking the Regulated Qualification Framework (RQF) level five diploma in health and social care management, which should be completed by May 2025. All care staff have either completed or are working towards an RQF level three health and social care certificate. The training matrix also confirms that staff have completed the relevant statutory and mandatory training along with additional appropriate training for the service, such as positive behavioural support.

Recently, three-monthly Team Leader meetings have been introduced across the organisation. These are described as providing peer support and an opportunity to learn from other services and implement good practices.

Feedback from a member of the care staff:

*"I feel supported by the Registered Manager and I trust the leadership within Les Amis."*

One of the care workers, who joined the team recently, said they have found the organisation to be well structured at every level, from senior management to the leadership with the home. The care worker described the positive support they received from their colleagues during the induction period and how they completed the appropriate training to help them perform their roles appropriately. During conversation with the Regulation Officer the care worker was able to describe key policies and where they can be accessed. They also stated that once policies have been read, the staff sign to confirm they have understood them and that the Registered Manager can audit the process.

The Regulation Officer was informed that Les Amis had introduced employment engagement meetings, which are led by the Chief Executive Officer and the Head of Human Resources. These meetings periodically visit all services to engage with teams and staff. The Registered Manager explained that the senior management team actively reaches out to their staff to let them know they are available to provide support as and when required.

During the inspection, the Regulation Officer had conversations with three care receivers and three care staff as well as receiving feedback from two professionals who work with the service and three family members of care receivers; without exception, they praised the leadership skills of the Registered Manager, with comments such as:

*“I have been very impressed by Xxx leadership since taking their post at Les Amis as Registered Manager.”*

*“Xxx has excellent leadership skills,”*

*“I can honestly say in all of Xxx time with Les Amis; they are by far the best manager I have come across.”*

*“Xxx is an excellent leader of the team.”*

*“The Registered Manager is very approachable; I can go to them whenever I need to.”*

During the inspection, the Regulation Officer reviewed three of the monthly reports. These reports stated there had been no complaints about the service and no safeguarding concerns. They monitor the staff training and health and safety requirements. Staffing numbers have been appropriate to provide the cover required to meet the care receivers assessed needs.

The Regulation Officer was of the opinion that Westley Lodge and Cottage is well-led. One of the care staff stated that the service culture is to provide excellent care to the care receivers and support for each other, which was evident during the inspection process.

## **DEVELOPMENT PLAN**

There were no areas for development identified during this inspection and a development plan is not required.

## **Appendix 1 – Sources of Evidence**

<b>Follow up on previous areas for development</b>	
<b>Focus</b>	<b>Evidence Reviewed</b>
<b>No previous areas of development.</b>	Not applicable
<b>New key lines of enquiry</b>	
<b>Focus</b>	<b>Evidence Reviewed</b>
<b>Is the service safe</b>	<ul style="list-style-type: none"> <li>• Policies and procedures</li> <li>• Training</li> <li>• Fire safety</li> <li>• Feedback</li> <li>• Staff recruitment</li> <li>• Monthly provider reports: health and safety</li> <li>• Care plans &amp; Risk assessments</li> <li>• Infection control measurements</li> </ul>
<b>Is the service effective and responsive</b>	<ul style="list-style-type: none"> <li>• Mandatory conditions</li> <li>• Duty rotas</li> <li>• Training</li> <li>• Feedback</li> <li>• Evidence of collaborative work</li> <li>• Care plans</li> </ul>
<b>Is the service caring</b>	<ul style="list-style-type: none"> <li>• Supervision and appraisals log</li> <li>• Feedback</li> <li>• Care plan</li> </ul>

**Is the service well-led**

- Policies and procedures
- Training
- Monthly provider reports
- Feedback



It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for development 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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