



**Jersey Care
Commission**

Summary Report

Les Charrieres Care Home

St Peter

JE3 7ZQ

Care Home Service

5, 26 May and 1 June 2022

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.

An unannounced routine medication inspection undertaken by the Senior Community Pharmacist, with the Regulation Officer in attendance provided initial opportunity for review of the home environment and staffing levels that were in place. It was noted on the first two days of inspection that the home was operating a locked door policy, to manage visiting with reference to guidelines advised for best practice during high infection rates for Covid-19. Observations made by the Regulation Officer of what appeared unwarranted and unacceptable protracted restrictions on liberty and freedom of entry and access to all care receivers (plus any visitors) was noted and this policy was revised before the completion of inspection visits.

Whilst during the inspection there was a calm atmosphere, it was also apparent staffing levels to support a wide range of needs were strained. From observation and discussion with members of the care team this appeared directly attributable to high dependency needs and low staffing levels.

Of particular concern was review of duty roster, staff recruitment and retention issues that evidenced a high volume of staff leaving.

With attention given to themes of safety to provide care and support, the staffing levels have not been consistent to meet minimum staffing numbers as defined in the Standards. It was highlighted to the Registered Manager with their full acknowledgement and understanding that minimum numbers must be considered aligned with the actual care needs identified. An area for improvement to address the staffing levels was identified.

Other areas relating to safe practice were noted to include the apparent risk to care receivers (some with cognitive impairment) and visitors (that may include children) to freely access the large flat roof and where there are no safety railings in position. This was highlighted for urgent attention and revision to policy and as an area for improvement. Attention was also given to the outdoor areas and lack of handrails for steps to the large terrace from the main car park, which may be considered both hazardous and inconvenient to those frail or with poor mobility.

With reference to the very peaceful and rural location which has many benefits, the limitations nonetheless on care receivers to utilise a mini-bus or alternative mode of transport for trips away from the home was highlighted. The current situation where one mini-bus is shared with three other associate homes operated by the Provider requires some attention and is an area for improvement.

From a care needs analysis of presentations and diagnosis of dementia it was noted the high prevalence of this condition by number of care receivers in the home. This indicates enhanced training for dementia care as being an area for improvement.

It was noted the Providers investment and positive approach to mandatory training as recorded and supported in practice by key trainers. Overall, the feedback from care receivers, relatives and some healthcare professionals was indicative of consistent and good care being provided by a professional and hardworking staff team.

The beds as occupied during the course of the inspection fell outside of the parameters of registration. Eleven care receivers were being supported under the registration for personal care, the maximum should be 10. While it was acknowledged this breach of conditions occurred during the Registered Managers absence, their having a clear understanding of the principles that should be followed and no negative impact on care, nonetheless the requirements under the law were reiterated.

The Registered Manager was advised to request a retrospective variation of conditions to their registration to address this.

Highlighted was the apparent rationale for this admission related to “SPOT beds” (contracted beds with Government of Jersey) and an admission processed under these terms, however any contractual arrangement with Provider and government agencies should not breach the registration of the home. The Registered Manager was advised this matter would be subject to further review and monitoring outside of this inspection process.

IMPROVEMENT PLAN

There were five 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 3.9 Appendix 5 (Care Home Standards)</p> <p>To be completed by: with immediate effect</p>	<p>The Provider must ensure that the home is staffed at all times at or above the minimum level specified in the Statement of Purpose and in accordance with the minimum staffing levels. Analysis is also indicated for the noted issue of poor retention of staff</p> <p>Response by registered provider:</p> <p>Analysis through exit interviews is being undertaken and being discussed at Board Level as part of the overall group staff attraction and retention strategy. Employee survey will also be undertaken in July and results acted upon.</p> <p>LV Group has already implemented retention initiatives such as: Pension Scheme, Free Health Cash Plan Scheme, Employee of the Year, Employee of the Quarter, Staff Meals, Staff Transport, Staff Discounts with local suppliers, Discretionary Bonus Scheme, free staff events, free training up to RQF Level 5.</p> <p>Regular benchmarking of salaries takes place to ensure that LV Group is comparative to its competitors using external benchmarking experts such as PayData to advise. With a further benchmark review to take place in September 2022.</p> <p>Currently there are circa 12 individuals in screening specifically allocated for Les Charrieres Residential and Nursing Home, commencing from week of the 18th July through to end of August.</p> <p>The home is also being supported by surplus staff from the Home Care team and other homes</p>
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<p>Area for Improvement 2</p> <p>Ref: Standard 3.11, 6.3</p> <p>To be completed by: within two months of inspection date.</p>	<p>Training provision for supporting care receivers living with dementia should be enhanced to promote the best understanding and skill-based approach to these specific care needs</p>
	<p>Response by registered provider:</p> <p>Dementia face to face training has been arranged with Care College and will be undertaken in September 2022 (availability dates provided by Care College). This training will enhance and promote the best understanding and skill-based approach towards our residents.</p>

<p>Area for Improvement 3</p> <p>Ref: Standard 9.1, 9.2, 9.3,</p> <p>To be completed by: within two months of inspection date</p>	<p>Review of transportation options and additional resources to promote greater choice and opportunity for care receivers to access the community and social activities</p>
	<p>Response by registered provider:</p> <p>LV Group has a number of company cars, vans & minibuses with drivers which are accessible to our residents to access the community.</p> <p>One of the minibuses is assigned to the Home on a number of occasions during the week for resident outings and for some appointments.</p> <p>Les Charrieres also has an open account with a local taxi firm as a back up to allow both staff and residents transport whenever they need.</p>

<p>Area for Improvement 4</p> <p>Ref: Standard 4.6, 4.7, 4.9</p> <p>To be completed by: with immediate effect</p>	<p>Review of health and safety policy and procedures to ensure relevant checks of the environment are adequate and with attention specifically to restricting access to hazardous areas of the home</p>
	<p>Response by registered provider:</p> <p>The roof area on the first floor has been already addressed. A fence has been built and a gate has been put in place to block this area.</p>

Area for Improvement 5	Attention to the stepped access from the main car park to ground floor lounge and patio to incorporate hand railings and/or a graded slope in support of all users
Ref: Standard 4.6, 4.7	
To be completed by: within three months of inspection date.	Response by registered provider: Registered manager is in discussion with the directors of the appropriate action to take. Maintenance is willing to incorporate a handrail if deemed appropriate by the Directors and their construction advisers.

The full report can be accessed from [here](#).