



**Jersey Care
Commission**

INSPECTION REPORT

Les Hoûmets Care Home

Care Home Service

**Gorey Village
Grouville
JE3 9EP**

26 August 2022

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 32 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.

ABOUT THE SERVICE

This is a report of the inspection of Les Hoûmets Care Home. The service is in the heart of Gorey village, surrounded by residential houses, shops, restaurants and is near to the beach. There is a communal dining room, two lounges and a conservatory sitting area located on the ground floor and pleasant gardens for care receivers to enjoy. The care home has the benefit of a minibus which is used for trips when this is possible.

Regulated Activity	Care home
Conditions of Registration	<u>Mandatory</u> Type of care: Personal care/personal support Category of care: Adult 60+ Maximum number of care receivers Maximum number of care receivers in receipt of personal care / personal support: 29 Age range of care receivers: 60 years and above Maximum number of care receivers that can be accommodated in the following rooms: Rooms 1-12A, Rooms 14-28: one person Room 15: Two people

	<p><u>Discretionary</u></p> <ol style="list-style-type: none"> 1 Suitable alterations in line with identified standards for such provision should be made to the existing rooms on the ground floor to provide one extra bathroom/shower facility (Room 2 to be decommissioned to facilitate this). 2 Alterations should also include decommission of Room 20 (9.6sqm) which by limited dimensions does not meet the minimum Standard of 12 sqm) (Rooms 19 and 20 to be amalgamated into one premium en-suite room to facilitate this) <p>The above conditions should be met by 31 December 2022.</p>
Date of Inspection	26 August 2022
Time of Inspection	10.30am – 3.00pm
Type of Inspection	Announced
Number of areas for improvement	None
Number of care receivers accommodated on the day of the inspection	27

Les Hoûmets is operated by Les Hoûmets Care Home Limited and the Registered Manager is Monica Le Miere.

On 9 August 2022, the Commission received correspondence from the Provider requesting an extension to the discretionary condition regarding work needed to ensure that all rooms meet the requirements of the Standards for Care Homes. The Provider cited several factors including the period of the pandemic. The Commission have requested further information including plans and timescales before a decision is made on this request.

There have been no changes to the Statement of Purpose since it was last received in February 2021.

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.

Two areas for improvement identified at the last inspection in 2021 had been resolved. There was evidence that safe recruitment checks are completed for all staff and that key policies have been updated and are available to all staff.

There was evidence that the Registered Manager includes both staff and care receivers in decision making at this home. While ensuring safety for all, a risk assessment had been completed and masks are now only worn by staff when completing personal care tasks.

Medications are stored and administered safely. All staff have appropriate medications training. Fire policy and training are updated regularly.

The needs of care receivers are assessed before admission and appropriate support is requested from external agencies when necessary.

There are a variety of activities organised both for groups and individuals at this home. Care receivers all gave positive feedback about the quality of care given by staff members. Relatives were also contacted and provided positive feedback about the care given to their loved ones.

There was evidence of a robust induction and training programme for all staff. Staff gave positive feedback about the support provided at this home and it was positive to note that there were long-standing members of staff employed here.

The Registered Manager is aware of their responsibilities to make notifications of incidents to the Commission. They also had a good understanding of the need for authorisations for Significant Restrictions on Liberty (SRoL) and made appropriate requests when necessary. All staff had completed training in Capacity and Self-Determination Law.

Staff receive regular supervision and annual appraisals which highlight areas for training and development. Staff are encouraged to complete qualifications in Health and Social Care, and it was noted that staff who have been employed here for a number of years have developed skills and received promotions.

There were no areas for improvement identified during this inspection and an Improvement Plan has not been issued.

INSPECTION PROCESS

This inspection was announced and was completed on 26 August 2022. Notice of the inspection visit was given to the Registered Manager on the day before the visit. This was to ensure that the Registered Manager would be available during the visit and to confirm the home's infection prevention and control arrangements.

The Care Home Standards were referenced throughout the inspection.¹

This inspection focussed on the following lines of enquiry:

- **Safety**
- **Care and support**
- **Training**

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

Prior to our inspection visit, the information held by the Commission about this service was reviewed, including the previous inspection reports.

The Regulation Officer sought the views of the people who use the service, and / or their representatives, and spoke with managerial and other staff.

One professional provided feedback as part of the inspection process.

During the inspection, records including policies, care records, incidents and complaints were examined. This inspection included a tour of the premises.

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.

INSPECTION FINDINGS

At the last inspection, two areas for improvement were 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 positive to note that all of the improvements had been made. This means that there was evidence that safe recruitment checks are completed and that key policies were in place and accessible to all staff.

Safety

The Standards outline the Provider's responsibility to ensure that people will feel safe and are kept safe. Care receivers will have the right to live safely and free from harm.

Following a period of exceptionally hot weather and requests from care receivers, the Registered Manager reviewed the measures currently in place for the pandemic. Staff continue to take a daily lateral flow test and have a monthly PCR test. It was positive to note care receivers were consulted when considering the most appropriate measures to be in place at this home. Care receivers had reported to the Registered Manager that they found it difficult to continually receive support from staff who were wearing masks. The Registered Manager consulted with the Infection Control Team and completed a risk assessment prior to making any changes. Staff now only wear masks when carrying out personal care tasks. Both staff and care receivers reported that this has improved their experience at this home. Everyone is aware that if the situation regarding the pandemic deteriorates, the guidelines at this home will be reviewed.

The Regulation Officer reviewed policies including safeguarding, handling of personal finances and receipt of gifts and found these to be in order. There was evidence that staff are asked to sign that they have reviewed any updates to policies.

The records of two new staff members were reviewed and the Regulation Officer found that safe recruitment practices had been followed. It was positive to note that safe recruitment checks had also been followed for the recruitment of a volunteer at this care home.

There have been no formal complaints raised with either the Registered Manager or with the Commission.

Notifications are made appropriately to the Commission. Where there have been complex issues, the Registered Manager or Senior Manager have telephoned the Commission for advice or to ensure that they are aware, in addition to making the online notification.

There is a medication policy in place. The Registered Manager undertakes an annual competency review with all staff members. The Regulation Officer reviewed the medication storage arrangements and a sample of Medication Administration Records (MAR) and found these to be appropriately completed.

There is a weekly fire drill, and all staff receive fire training. All care receivers have a personal emergency evacuation plan, with a copy of these in one file, for easy access by staff. The Registered Manager stated that during weekly fire drills, they use the opportunity for informal updates on fire training. This is an example of good practice.

Transport procedures are in place. There are a variety of transport options for care receivers who may not wish to travel in a group minibus, particularly during the period of the pandemic.

All staff complete training in Capacity and Self-Determination Law (2016). The Registered Manager has a good understanding of the requirements of this law and has sought authorisation for Significant Restrictions on Liberty (SRoL) when necessary. There have been no new SRoL authorisations since the last inspection.

There was evidence of positive multi-agency working and that the Registered Manager sought support from external agencies, such as Family Nursing & Home Care (FNHC) when necessary. The Registered Manager also demonstrated that they had identified when a care receiver's needs were above those ordinarily provided by this home and had sought an assessment from the Adult Social Care Team.

Monthly reports are completed by the Senior Manager. The Regulation Officer reviewed reports from the last four months and found these to be robust and useful in informing the Registered Manager and Provider of any actions needed.

Care and support

<p>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.</p>

There was a positive, homely atmosphere in this care home. At the time of the inspection, the Activities Co-ordinator was making arrangements to take some care receivers out in the minibus for lunch. Before this excursion, a small group of care receivers were discussing the day's news with the Activity Co-ordinator in one of the two lounges. In the second lounge, there was quiet time, with some care receivers taking a nap and others watching television.

All care receivers are now provided with a welcome pack which details the services and activities that can be provided, and details of how to raise a concern when necessary.

The Regulation Officer reviewed a sample of four care plans and found that all included an assessment of need before admission to this home. The Registered Manager confirmed that they receive a social work assessment but do not admit any care receiver unless they have completed their own assessment to ensure that this home is able to meet the needs of the care receiver. Additionally, the Registered Manager will undertake a review of the needs of a care receiver when they have had a hospital stay.

It was positive to note that care receivers' records included information regarding their history, relationships and preferences. Care plans are reviewed and updated when there is a change of circumstance. One professional reported that the Registered Manager is proactive in seeking support when required, and that, in their experience, care plans and daily logs are completed by staff.

There was evidence that all staff have a good understanding of the needs of care receivers and are alert to their wishes and preferences. One care receiver had highlighted that they found it difficult to remember the choices for breakfast. As a result, there is now a menu of options in the bedroom of every care receiver.

The involvement of care receivers in decision making was a positive feature of this care home.

The Regulation Officer spoke with the Chef and reviewed the menu plan. The Chef explained how choices are available outside of the menu plan if this is required by a care receiver. There is a hot meal available twice a day. All care receivers consulted were happy with the choices and standard of meals provided at this home.

There is a rich programme of activities at this home, led by an Activities Co-ordinator. This includes activities in the home such as bowling, bingo and gardening, as well as regular trips outside the home for lunch, afternoon tea, to the pub or a drive. The Activities Co-ordinator provides an update of activities undertaken each week to the Registered Manager and a plan for the forthcoming week. All care receivers reported how much they enjoyed the activities at this home. One relative described the activities as “fun and interesting” and reported how much their loved one enjoyed them.

The Regulation Officer spoke with four care receivers at this home who were all positive about the care provided. One stated it was “always warm and clean” and another stated they were always offered “good food”. All care receivers were positive about the staff and of note was one comment from a care receiver who stated that “they broke the mould” when the Registered Manager was recruited. One care receiver stated that, although they would prefer to be in their own home, this was the best place they could be as they needed support.

Four relatives provided positive feedback by email. One stated that their loved one had “improved so much since xx has been there”. A second commented on the fact that the transition from home to a care home had been well supported by the Registered Manager and staff. All relatives reported that they were pleased with the care and that communication is good. Relatives are currently requested to book an appointment for visits, which the Registered Manager reported had been well received by care receivers who now felt able to plan other activities around the visits of relatives.

A sample of the comments made by relatives are:

“friendly, caring staff”

“how happy I am with the home and all the staff”

“staff are approachable and nothing is ever too much trouble”

“kept informed”

“facilities and events are very good”

“they have done an amazing job in a very difficult situation”

“The care she receives from the staff is excellent - xx always has a smile on their face, loves spending time in the garden and going on outings”

“the staff to be genuinely caring, engaging with xx in a lovely manner... The staff are very proactive and responsive with medical needs....[the move] has been very reassuring and we can't praise them enough.”

Training

<p>The Standards outline that at all times there should be competent and skilled staff available. Staff should be provided with a range of relevant training and development opportunities.</p>

The Registered Manager has just recruited new members of staff, and when these care workers start employment, the home will be fully staffed. At the beginning of the pandemic, following consultation with staff, the rota moved to working long days, which means that staff have more days off between shifts. There are a separate group of staff who work overnight. Although this care home is now fully staffed, they stated that remaining fully staffed during the period of the pandemic had been difficult at times.

Four staff members were spoken to during the inspection visit, and one further staff member provided email feedback. All staff members reported that they enjoyed working at this care home. Of the staff members consulted, one had worked for the service for 14 years, and one for 16 years. A consistent staff team is a positive feature of this service.

All new staff undertake a period of induction which includes shadowing a more experienced colleague who also provides mentoring. Staff complete a workbook to ensure they have adequate understanding of the practical and ethical aspects of the role. There is an induction checklist, and this has to be signed off by a senior member of staff before induction is completed.

There is a programme in place to ensure all staff are kept up to date with statutory training. Additionally, staff also receive dementia, tissue viability and falls awareness training.

Only two staff at this care home do not currently have the Level 2 RQF (Regulated Qualification Framework) in Health and Social Care but are due to start studying in September 2022. Three members of staff have a Level 3 qualification, and another is awaiting a certificate for this qualification. It was positive to note that the kitchen staff all study Level 3 RQF qualification in Food Safety.

Staff reported that they felt well supported to complete training. In some cases, staff reported that the Registered Manager had spent time in helping members of staff to complete modules, particularly where English is not their first language.

This care home follows the Gold Standard Framework for positive end of life care. There is currently one lead person and two further delegates trained in the provision of this care framework.

The Registered Manager is aware of their responsibilities for authorisation of Significant Restrictions on Liberty (SRoL) and all staff have had training in Capacity and Self-Determination Law and its application.

Manual handling and First Aid training are classroom based. All other training is completed online. It was positive to note that the Registered Manager discusses training completed with staff during supervision sessions. This helps to ensure that the staff member has a good understanding of the subject.

Staff receive supervision at least quarterly from a senior member of staff. Appraisals are completed annually and identify areas for training and development.

Comments from staff provided evidence that staff feel well supported and there are opportunities for development within the staff team. A sample of comments were:

“best decision (to work here)... had a good induction... feel well supported”

“We get any resources we need to support the care receivers....good training”

“really enjoy working here and feel well supported”

There was evidence that staff are valued here and that this was reflected in decisions on pay. Staff all felt included in decision making and were positive about the shift pattern.

IMPROVEMENT PLAN

There were no areas for improvement identified during this inspection and an Improvement Plan has not been issued.

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.



Jersey Care Commission
1st Floor, Capital House
8 Church Street
Jersey JE2 3NN

Tel: 01534 445801

Website: www.carecommission.je

Enquiries: enquiries@carecommission.je