

## **Summary Report**

L'Hermitage Care Home

**Care Home Service** 

La Route de Beaumont St Peter JE3 7HH

29 January 2023

## 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.

The Regulation Officers noted that the home still showed signs of wear and tear, and it was difficult to see which areas had been refurbished since the previous inspection. The Provider's response to the last inspection report indicated that there was a schedule of works for painting and decorating, replacement of carpets. However, at the time of the inspection, no progress had been made. Therefore, this remains an area for improvement. In addition to this, the Regulation Officers noted several maintenance issues during the inspection. These are listed further under the heading of 'management of the service.'

The first floor lift had recently been non-operational for at least one month, leaving nineteen care receivers unable to use any of the communal areas on the ground floor or have access to the external areas of the home or wider community / activities. This is the second time within eight to nine months that the lift has been broken. The Registered Manager had indicated in email correspondence with the Commission on 3 January 2023 that a stair lift was being considered. It is an area for improvement that an alternative provision for access to the first floor is installed to meet Standard 7 (Appendix 10, 9).

The Regional Manager undertakes a monthly quality assurance report on behalf of the Provider, the Regulation Officer was provided with copies of the report for October, December 2022, and January 2023. The matter of the hot water supply problem was identified in the December 2022 monthly report, and the author commented that there might be complaints from relatives concerning this. However, there was no mention of any urgent actions and or risk assessments or the other maintenance issues within the home. It was evidenced by feedback from care receivers at inspection as to the impact that the fluctuating hot water supply was having on the comfort and their quality of life. Furthermore, that an alternative solution or second opinion to the hot water supply problems should have been sought earlier from either the Registered Manager and / or the Provider. Therefore, the management and oversight of the service is an area of improvement (Standard 12). A lack of a consistent hot water supply within the home (for all care receivers) is also an area for improvement with immediate effect. Following the inspection, the Commission imposed a discretionary condition to suspend admissions to the home until this was resolved.

Feedback from care receivers regarding the care they received was generally good and most care receivers spoke highly of the care staff. However, most care receivers and staff commented on staffing shortages within the home. Staff commented how this was at times affecting care delivery especially in relation to care receivers who required two members of staff for settling / repositioning. Staffing is an area for improvement and is highlighted further under the heading of 'choice and safety'.

At the time of the inspection, it was apparent that the ability of care receivers to have all their personal care needs met consistently within the home was being compromised on account of the inconsistent access to hot water. The communal bathroom downstairs, which might otherwise have been used to meet such needs, was not accessible as it was full of equipment and was being used as a storage room. The service was advised to reinstate the bathroom with immediate effect. This is an area for improvement.

As highlighted under the heading of inspection findings, an up to date Statement of Purpose is also an area for improvement.

## **IMPROVEMENT PLAN**

There were seven areas for improvement identified during this inspection. The table below is the Registered Provider's response to the inspection findings.

Area for Improvement 1 Ref: Standard 7 Appendix 10 (32) (Care Home Standards)	The Registered Provider must ensure that care receivers have access to assisted toilet and washing facilities. The ground floor assisted bathroom (which was being used as a storage area), must be reinstated immediately.
To be completed by: with immediate effect	Response of Registered Provider:
	The assisted toilet and washing facilities on the ground floor were brought back into commission by 10 February 2023 and remain in use and accessible.

Area for Improvement 2	The Registered Provider must ensure that care receivers have adequate access to a hot water
<b>Ref:</b> Regulation 18, (3), (e)	supply in their own rooms.
To be completed by: with immediate effect	The Commission will keep a resolution of the hot water supply problems under review, with weekly updates from the provider.
	Response of Registered Provider:
	Aria Care was assured that our hot water supply had been restored on the 10 <sup>th</sup> March 2023 to all bedrooms. On the 16 <sup>th</sup> March 2023, after running the system without incident for a week, Aria Care informed the JCC of our confidence that the hot water supply concern had been permanently addressed, however, we continue to monitor daily at present to ensure un-interrupt hot water is available in all bedrooms.
	Many issues regarding water supply related to a misdiagnosis of issues by the previous operator's plumbing and heating contractor. A different contractor is now supporting the home.

Area for Improvement 3	The Registered Provider must ensure that the accommodation is well maintained and decorated.
Ref: Standard 7.1	Specific attention needs to be given to the refurbishment of the home and any outstanding
To be completed by: within six months of	general maintenance issues.
inspection date.	<ul> <li>A schedule of works to be submitted to the Commission immediately after inspection.</li> </ul>
	Response by registered provider:
	Aria Healthcare has operated the home since 1 December 2022 and it is our intention to invest in the home. A refurbishment plan was shared with the Commission on 17 February 2023. It is expected that all works will be completed no later than 31 May 2023.

Area for Improvement 4 Ref: Standard 3.9, Appendix 5 (Care Home Standards)	The Registered Provider must ensure that the home is staffed at all times in accordance with minimum staffing levels detailed in the Standards and in accordance with the care needs / dependency levels of care receivers.
To be completed by: with	
immediate effect.	Response by registered provider:
	<ul> <li>99.3% of all rostered nursing and care shifts were worked in February, 389/392 rostered shifts. Shifts not worked were due to very late notice sickness. At 21 March, the home is fully compliant re care staffing in March 2023.</li> <li>All care home operators in Jersey face staffing challenges. However, we continue to take a proactive stance to support compliance.</li> <li>Care assistant pay will increase by 9.1% on 1 April 2023 and we have secured the exclusive services of three full time agency Care Assistants.</li> </ul>

Area for Improvement 5 Ref: Standard 1	The Statement of Purpose must be regularly reviewed and updated.
	The Commission must be provided with an updated copy.

To be completed by: within 3 months from the	Response by registered provider:
date of inspection (29 April 2023).	The Statement of Purpose was updated and sent to the Commission on 13 March 2023.

Area for Improvement 6	In the event that the lift is non-operational, the
	Registered Provider must ensure that there is
<b>Ref:</b> Appendix 10 (9) Care	provision in place to prevent care receivers' liberty
Home Standards	from being in any way restricted or compromised.
	Response by registered provider:
To be completed by:	
within 6 months from the date of inspection (29 July 2023).	We are in the process of purchasing a stair climbing machine which will support care receivers in the event of any lift malfunction.
	We have also obtained, what we believe to be, essential spare parts from KONE, the lift
	manufacturer. These should support more timely repairs in future.

Area for Improvement 7 Ref: Regulation 5 (2)	The Registered Manager must lead and manage the regulated activity in a way that is consistent with the Statement of Purpose.
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To be completed by: with immediate effect.	Response by registered provider:
	Aria Care and the Registered Manager accept that some recent performance, within the home were not fully aligned with the role specific commitment set out within the Statement of Purpose.
	In a meeting with the JCC the reasons for some of the failings in producing records of activities were explained, but included significant factors like the focus on recruitment & retention of colleagues working in Jersey, the management of the and the environmental challenge, caused by the hot water challenge.
	We have committed to improving this aspect of our approach and delivery of services/management in accordance with our statement of purpose commitments.

The full report can be accessed from here.