

# **INSPECTION REPORT**

## L'Hermitage

**Care Home Service** 

La Route de Beaumont St Peter JE3 7HH

10 May 2023

### **INSPECTION FINDINGS**

Two regulation officers undertook an unannounced inspection of two care homes operated by the same provider, on 10 May 2023.

This is the report for L'Hermitage. A separate summary report has been written for both homes. On the day of the inspection, there were 29 care receivers, of whom 17 were in receipt of nursing care and 12 in receipt of residential care. The two regulation officers met with the Registered Manager on arrival on site and at the end of the inspection to provide feedback.

The inspection focussed on specific areas where previous areas of improvements have been identified. These include 1) ongoing issues associated with the hot water supply and 2) the refurbishment of the home, which, although underway, will be completed after the anticipated deadline of the end of May 2023.

#### **Refurbishment**

In response to an area of improvement concerning the home's refurbishment in the last inspection report (29 January 2023), the Provider assured the Commission that the work would be completed by 31 May 2023. The Commission had not been advised of any anticipated delay prior to the inspection visit.

The two regulation officers observed that the refurbishment had commenced, but that there appeared to have been minimal progress. There was evidence of walls within the home having been stripped and carpets covered with a protective covering. The Registered Manager advised that the refurbishment should be completed by the end of June. In addition, the Registered Manager informed the regulation officers that two containers of furniture were due to arrive at the homes the next day and that the furniture would need to be stored in one of the home's lounges and the vacant rooms.

The Registered Manager discussed with the Regulation Officers that it was the 'supply chain for materials holding up the refurbishment.' An example of this was a ten-week wait for fire retardant wallpaper. The home is now considering lining paper

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and painting the walls instead. The refurbishment of the home and maintenance issues (these issues are highlighted under the heading below), will remain an area for improvement and will be kept under review by the Commission.

#### Maintenance Issues

The regulation officers identified inadequate standards of cleanliness and a number of outstanding maintenance issues during the walk around of the home that were of concern. There was evidence of a toilet seat raiser/commode in one room with silver duct tape on the arm, which is an infection control risk and puts the care receiver at a potential risk of skin damage. The en-suite bathrooms in the rooms inspected by the regulation officers, while visibly clean, were noted to need a deep clean around the shower fixtures and fittings. There was also a stained toilet seat raiser/commode in one of the rooms. The Registered Manager was unaware of these issues when feedback was provided at the end of the inspection and reiterated that staff are reminded every couple of days regarding the system in place for reporting maintenance concerns. A book to report maintenance concerns is kept at reception. However, it was previously agreed that the Registered Manager would undertake a daily walk round of the home to ensure such issues are picked up and addressed.

#### Hot Water Supply

The Commission has previously identified that the home has experienced problems associated with its hot water supply and has made this an area for improvement. A discretionary condition on registration had been imposed which had suspended new admissions to the home.

Following this, the Commission was advised in a letter from the Registered Manager on 11 April 2023 that all issues with the hot water supply within the home were resolved. It was agreed with the Registered Manager and the Provider to remove the discretionary condition. This took place on 12 April 2023. It is evident that the problems have recurred. However, the Commission had not been notified of this.

The Registered Manager confirmed that the water supply had been inconsistent over a two-week period prior to the inspection. The problem is mainly affecting the majority of rooms in one corridor of the home on the ground floor. These rooms are all currently occupied, but the Registered Manager advised that care receivers are offered a shower in either one of the vacant rooms or the communal bathroom.

The Registered Manager advised a facilities company had been on site and concluded that the issue was associated with loose debris. The facilities company was due to return during the week following the inspection.

It is a disappointing fact that care receivers have lived with this situation for approximately five months. This fails to meet a previous area for improvement and, therefore, will be kept under close review by the Commission with a view to taking more formal action<sup>1</sup> in line with the Commission's Escalation, Enforcement and Review Policy. At the time of writing this report, a further discretionary condition has been applied to suspend admissions to the home.

It was discussed and agreed with the Registered Manager that the regulation officers would undertake a tour of the rooms on the affected corridor and other rooms within the home; that they could check the temperature of the water and gain feedback from care receivers and staff. The regulation officers found the absence of an adequate hot water supply on the ground floor in three rooms and in the downstairs bathroom (the shower, bath, and sink taps were all running cold, and the toilet was blocked / out of use. The toilet had been sealed with tape). The water temperature in the sluice on the ground floor was also cold to lukewarm. The Regulation Officer sought advice from community infection control as to whether the temperature of the water would be sufficient for adequate disinfection/disposal of waste products.

<sup>&</sup>lt;sup>1</sup> The Escalation, Enforcement and Review Policy can be accessed on the Commission's website and can be accessed at <a href="https://carecommission.je/policies-and-legislation/">https://carecommission.je/policies-and-legislation/</a>

Upstairs in the home, three rooms and the upstairs bathroom were satisfactory. However, one upstairs room's water supply was cold to lukewarm. A care receiver in one of the upstairs rooms informed the regulation officers that they had needed to have a wash in cold to lukewarm water that morning, and that they had been unable to have their hair washed when they requested support with this (being asked to wait until the next day). One care receiver confirmed that they had used a shower in another room on one occasion but had been told that the communal bathroom was unavailable. Another care receiver on the top floor confirmed that there had been intermittent problems associated with the availability of hot water.

Feedback from three staff members was more positive. They each advised that they had not experienced any difficulties associated with the hot water supply. It is important to note that two of these staff members were only working in the upstairs section of the home, and that another was a relatively new staff member. The staff advised that they continued to check the water supply on a daily basis, in accordance with care receivers' care plans.

Immediately after the inspection, the Regulation Officer sought advice from the environmental health team and the infection control nurse specialist. The environmental health team subsequently visited the home on 19 May 2023 and reviewed the home's water sampling and maintenance paperwork. A suggestion was also made for a referral to the Health and Safety Executive to check the water systems. At the time of writing this report, this has now been completed, and the provider has agreed to forward a copy of the report to the Commission. The infection control team suggested that samples of pseudomonas be included in this review. This was communicated to environmental health. The environmental health team also sought to ensure adequate water temperatures in the kitchen. The infection control team gave reassurance regarding the proper disinfection of equipment in the sluice as the water was chlorinated.

#### **Communication**

The Care Home Standards state that 'registered persons must notify the Jersey Care Commission of such incidents, accidents or other events that have posed or may

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pose a risk of harm as specified by the Jersey Care Commission'. A list of notifiable incidents is provided in Appendix 8 of the Standards. The Commission had not been informed of the recent difficulties associated with the hot water supply or of the delay to the refurbishment plans, and the furniture storage problems, prior to the inspection.

At a meeting with both the Provider and the Registered Manager with the Commission on 7 March 2023, as assurance was provided to the Commission that such communication would improve. The purpose of notifications is to enable the Commission to receive intelligence and to be able to identify and respond to any patterns, which indicate that there are risks. The Commission must have the ability to do this to perform its regulatory function. Therefore, this is an additional area for improvement with immediate effect.

## **IMPROVEMENT PLAN**

There were three areas for improvement identified during this inspection. The Provider had failed to meet the area for improvement one (below) from the previous inspection and had been unable to meet the deadline for completing the area for improvement two (below), as outlined in the Provider's response to the last inspection report. The table below is the Registered Provider's response to these inspection findings.

Area for Improvement 1	The Registered Provider must ensure that care
<b>Ref:</b> Regulation 18, (3), (e)	receivers have consistent access to a hot water supply in their own rooms.
	Response of Registered Provider:
immediate effect	Hot water issues in the home were resolved on 31 May 2023. All residents now have consistent access to hot water. Staff and the acting manager continue to check to ensure constant provision.

Area for Improvement 2	The Registered Provider must ensure that the
Area for improvement 2	
	accommodation is well maintained and decorated.
Ref: Standard 7.1	An updated timeframe for the refurbishment of the
	home must be submitted to the Commission.
To be completed by:	Specific attention needs to be given to general
within one month of	cleaning and maintenance issues within the home.
inspection date.	Response of Registered Provider:
	A programme of refurbishment continues in the
	home. We anticipate that this will be completed by 31
	July 2023.

[ ]	There is a series of cleaning audits which are
	overseen by the acting manager.

Area for Improvement 3	The Registered Provider must ensure that the
	Commission receives notification of notifiable
Ref: Standard 4, 4.3	incidents/ events promptly. Specifically, a notification
(Appendix 8)	should be issued no later than 48 hours after an
	incident has occurred.
To be completed by: with	Response of Registered Provider:
immediate effect.	The Regional Director and acting manager
	discuss any incidents in the home, on a daily basis.
	They will ensure that notifications are
	issued within 48 hours of a notifiable occurrence.

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 1<sup>st</sup> Floor, Capital House 8 Church Street Jersey JE2 3NN

Tel: 01534 445801

Website: www.carecommission.je

Enquiries: enquiries@carecommission.je