



Jersey Care
Commission

INSPECTION REPORT

Les Hoûmets Care Home

Care Home Service

**Les Hoûmets Care Home Ltd
Gorey Village
Grouville
JE3 9EP**

**Date of inspection
15 August 2024**

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 (as amended) 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 situated in a residential area in the parish of Grouville and is within walking distance to several cafes, pubs, restaurants and hairdressers. There is access to a beach across the road and a regular bus service into St Helier. The home has an enclosed garden for care receivers to enjoy and the means to grow their own fruit and vegetables in raised planters.

Regulated Activity	Care Home Service
Mandatory Conditions of Registration	Type of care: Personal care, personal support Category of care: Adult 60+ Maximum number of care receivers in receipt of combined personal care and personal support: 28 Age range of care receivers: 60 and above Maximum number of care receivers that can be accommodated in the rooms: 1-12A, 14-28 one person, Room 15 two people
Discretionary Condition of Registration	None
Date of Inspection	15 August 2024
Time of Inspection	9:00 – 16:40
Type of Inspection	Announced
Number of areas for improvement	none
Number of care receivers using the service on the day of the inspection	26

Les Hoûmets Care Home Ltd operates the Care Home service, and there is a Registered Manager in place.

Since the last inspection on 27 July 2023, the discretionary condition on the service's registration has been met. This means that suitable alterations were made on the ground floor to meet the standards. One room was decommissioned to increase the size of two rooms and an extra bathroom/shower facility was installed on the ground floor. The discretionary condition was removed on 20 December 2023, and the Commission received an updated copy of the service's Statement of Purpose to reflect this.

Since the last inspection on 27 July 2023, the Commission received and approved an application for an additional partner. This was completed on 24 April 2024.

Plans are underway to convert the double bedroom into two single rooms with en-suite toilets. The work is due to start later in the year. However, the Commission has been advised that this will not affect the running of the home and will have no impact on the care receivers, according to management.

SUMMARY OF INSPECTION FINDINGS

The following is a summary of what we found during this inspection. The main body of this report contains further information about our findings.

This care home provides residential and respite care to twenty-eight care receivers.

An experienced staff team deliver individualised personal care and support. The company recently presented long service awards to 14 staff with more than ten years of service.

There is an emphasis on ensuring health and safety requirements are met, and risk assessments are in place to mitigate potential risks in the care home.

Staff training is pivotal, with most mandatory training either completed or booked.

Care plans are thoughtful and personalised and meet the needs and wishes of each care receiver.

The policies are relevant to Jersey legislation, easy to follow, updated on a rolling programme, and easily accessible to all staff.

An activities coordinator plans various activities every morning and afternoon with care receivers who wish to participate, ranging from arts and crafts to gardening, baking and outings.

There is a clear staff team structure, with a Care Manager who oversees care delivery daily. Team leaders, acting team leaders, and care assistants follow care plans to meet individual care needs.

Staff appraisals and supervisions take place at regular intervals and follow a structured agenda.

This care home is proactive in investigating why certain events happen and trying to mitigate the risk moving forward.

The staff positively spoke of how the new director has brought about new ideas and initiatives to enhance the well-being of staff and care delivery in this home.

This was a positive inspection with no areas for improvement, and the management team were very receptive to the inspection process.

INSPECTION PROCESS

This inspection was announced and was completed on 15 August 2024. Notice of this inspection was given to the Registered Manager six days before the visit. This was to ensure the Registered Manager could facilitate the inspection visit.

The Care Home Standards were referenced throughout the inspection.¹

This inspection focussed on the following lines of enquiry:

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

Before our inspection, all the information held by the Commission about this service was reviewed, including the previous inspection reports.

The Regulation Officer gathered feedback from five care receivers and three of their representatives. They also had discussions with the service's management and other members of the staff team. Additionally, feedback was requested from three professionals external to the service.

Policies, care records, duty rotas, training matrix, notifications, and monthly quality reports were examined as part of the inspection process.

After the inspection, the Regulation Officer provided feedback to the Registered Manager verbally and then later by email.

This report outlines our findings and includes areas of good practice identified during the inspection.

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

INSPECTION FINDINGS

At the last inspection, one area for improvement was 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 the improvement had been made. This means that there was evidence of compliance with safe recruitment.

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.

A comprehensive health and safety folder is available for all staff to access in the home and contains essential information on all aspects of health and safety. Risk assessments are in place, updated regularly and cover both the environment and care receivers.

A planned programme to complete audits was available to view during the inspection. These include:

- Infection prevention and control
- health and safety
- Waterlow scores (a tool used to stratify the risk of developing a pressure sore)
- falls prevention
- medication administration
- continence
- care plans
- staff training

Earlier this year, an audit of the 'Waterlow scores' in care receivers' care plans highlighted that some of them were not up to date. An action plan to correct this was put in place. This action was completed, and all the scores were up to date during the inspection.

The care home has recently had an environmental health inspection and a fire inspection by external organisations. These were satisfactory, with minor recommendations made by the Fire Inspector.

Personal emergency evacuation plans (PEEPs) were viewed, and it was noted that the most recent admission to the home did not have a PEEP in place. This was rectified before the end of the inspection.

The fire logbook evidenced that all necessary checks are being carried out and drills occur.

The Regulation Officer viewed three months of duty rotas for all staff. These meet the minimum standards, and at least fifty per cent of the staff on each shift has a Regulated Qualification Framework (RQF) level 2 or level 3 qualification.

The care home management team has implemented an initiative called Staff Development Pathway. This is part of a structured training programme for care assistants to become team leaders. This initiative also encourages staff to progress and stay with the care home long-term.

Since the last inspection, two staff members have been employed to work in the care home. Both recruitment files were inspected to ensure that all the appropriate safety checks had been completed, including disclosure and barring service (DBS) checks, two references, interview notes, offer of employment, and job descriptions, amongst other documentation. These were in order and met the standards.

This care home is open and transparent regarding reporting incidents to the Commission. Notifications were discussed with both the senior managers and it was positive to hear that following an increase in falls one month an internal investigation was carried out and further measures were implemented as a result of this including moving night staff to different areas of the building, improving night care plans, updating all the falls risk assessments, completing an environmental audit to check for defects in the flooring and obstacles, and bed rails risk assessments. All these measures collectively have resulted in a reduction in falls.

A review of medication management took place during the inspection. The Regulation Officer went through the controlled drugs book and cupboard, the contents of the trolley, and Medication Administration Record (MAR) sheets with the assistant team leader. The Regulation Officer was impressed with the staff members' knowledge of the care receivers and their medications. All the photos on the MAR sheets were recent, and medications were managed according to the care home policy.

Is the Service Effective and Responsive

Assessing the organisation of the service so that care receiver's needs are respected and met.
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This care home complies with their mandatory registration conditions. This is stipulated in their Statement of Purpose and was discussed during the inspection.

A range of services, including but not limited to GPs, Family Nursing and Home Care (FNHC), chiropodists, and hairdressers, visit on a regular basis, along with other health and community professionals when required. Many care receivers are allocated a Social worker who will visit as needed.

Capacity and liberty assessment referrals are requested through the GP and take place in the home. At the time of inspection, two significant restrictions on liberty (SRoL) were in place, which were discussed with the Registered Manager. All staff have completed training in this field.

There have not been any complaints since the last inspection. However, care receivers and their families have copies of the complaints policy in the welcome pack should the need arise. The policy has a straightforward escalation process.

One safeguarding concern earlier in the year resulted in staff learning, and consequently, the care team completed pressure area care training. All staff have completed safeguarding training and know how to raise a concern.

Feedback from one professional who has worked with the care home managers and staff for several years positively praised the Registered Managers' ability to lead their team and provide excellent care delivery, *“The manager has always encouraged staff to develop within the team and attain their RQF qualifications”*.

Is the Service Caring

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

The care home Statement of Purpose aims to *“create a home from home in which residents can enjoy a high quality of life with good food, friendship, support and above all, excellent, empathetic and nurturing professional care”*. This was observed throughout the inspection.

Interactions between the staff and care receivers was caring, thoughtful, funny (depending on the situation) and friendly. The Regulation Officer noted that the staff employed in this care home had great knowledge of the care receivers, their families, and visitors.

Before admission to the care home, a comprehensive assessment of care is completed with the potential care receiver. This looks at their care needs, along with various other needs and any equipment that may be required. The Statement of Purpose specifies that *“the needs of the other care receivers are taken into account, thus ensuring the environment and settlement into the home dynamics is appropriate and balanced”*.

On admission to the home care, receivers are provided with a resident guide and welcome pack, along with a contract detailing financial and associated information. A resident's handbook is currently being updated.

Emergency admissions are rare and generally not accepted until the managers are assured they can meet the care receiver's needs.

Six care plans were viewed as part of the inspection using the home's online system called 'person-centred software'. These evidenced an individualised approach based on the specific care needs of care receivers and are updated monthly by the Care Manager. All care receivers have an updated photo every six months, any advanced wishes, including Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) and significant restriction on liberty (SRoL) information are recorded on their home page. A care plan for death and dying is discussed with care receivers on admission and only completed or updated at the care receivers' request. Interests, likes, dislikes and hobbies are captured in the care plans. This assists the staff in encouraging the care receivers to continue activities they enjoy. Positive risk-taking was included in one care plan involving the care receiver and their family.

Friends and family visits are encouraged all year round, especially around celebrations such as birthdays, Liberation Day, Easter, Halloween, and Christmas. Visits can be in the home or out and about. This was evidenced during the inspection, when a wedding anniversary was celebrated with family members and confirmed when talking to care receivers. One care receiver spoke of visits from her children most days, and another spoke of going out with friends regularly.

In line with the Statement of Purpose, communication is key to getting to know the care receivers. Therefore, glasses are kept clean, hearing aid batteries are checked daily, and other communication methods, such as pictures, objects, and writing, are used. This was evidenced in the care plans.

The activities coordinator plans a range of activities each week. These are displayed on a whiteboard in the corridor, and the care receivers can choose which ones they wish to participate in. On speaking to care receivers and their families, they were highly complementary of the activities coordinator and the activities offered. One staff member suggested that more one-to-one activities would benefit some care receivers who did not wish to participate in groups. The Registered Manager stated that the care receivers enjoy growing their fruit and vegetables, including jersey royals, tomatoes, butternut squash, cucumbers, pears and strawberries. The planters are at heights suitable for the care receivers. Armchair exercises, cake and cabaret outings to local parish halls, arts and crafts, beach mobility, and visits from organisations are popular.

The consensus amongst the care receivers is that the food is nutritious, there is plenty of choice, portions are appropriate for each person, and it is tasty. On the day of the inspection, there was chicken stroganoff or sea bass for lunch. The chefs cater to different needs, including allergens, diabetics, vegetarians, and vegans.

Feedback from care receivers and relatives included:

“I would recommend this place to anyone. I really didn't want to move into a care home, but the staff have made it easier, and everyone does their best.”

“I like the food here, especially the steak. Everything is perfect here, and the staff are nice.”

“It's friendly here, everyone chats, and I have made many friends.”

“The only suggestion would be for allocated space for activities as it can get crowded in the lounge.”

“When the staff open the door, they are friendly, smiling, and have a warm welcome for me. There is nothing to improve, as it's a small home, which makes a difference.”

Is the Service Well-Led

Evaluating the effectiveness of the service leadership and management.
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The Regulation Officer viewed the organisation structure chart, which shows clear lines of management. Feedback from the care receivers and staff highlighted how approachable and proactive the management are. Additionally, one relative stated that *“if I send Xxx (Registered Manager) an email, I will get a response the same day, which is great.”*

The Regulation Officer viewed a range of policies. These are updated as part of a rolling programme, and the staff have access to them at any time to refer to. The policies are relevant to the care home and in line with Jersey legislation.

The staff training matrix was viewed at inspection, and all the care staff have completed mandatory training along with some training specific to the needs of care receivers, including wound care, end-of-life, and dysphagia. The management team has recognised that whilst training courses suit most of the staff, there are some communication needs for a small number of staff whose first language is not English. Therefore, training is being sought through an external company to cover this.

Staff supervisions take place every three months and follow an agenda. This gives structure to the meeting and allows the staff member to talk about their progress and well-being. The Regulation Officer viewed a supervision template and four documented supervisions, which was seen as beneficial when speaking with staff. Appraisals are completed annually.

The home likes to celebrate success and recently hosted an award ceremony where 14 staff members received long service awards. They also have two staff Christmas parties to ensure all staff are included and they celebrate special occasions like Easter, Liberation Day

Staff feedback was mostly positive:

“Nice place to work, communication and support is good. Xxx (Registered Manager) is good at making sure we get all the training we need.”

“We have supervisions every three months. We have a great team, and we are all very supportive of each other.”

“I would like to have more responsibilities in my role; sometimes, I feel I cannot progress any further as it's a small home.”

“We are like a big family.”

IMPROVEMENT PLAN

There were no areas for improvement identified during this inspection and an Improvement Plan is not required.

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