



**Jersey Care
Commission**

Summary Report

17/18 Le Grand Clos

Care Home Service

**St Johns Road
St Helier
Jersey
JE2 3BB**

23 and 24 May 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.

Overall, the findings of this inspection were positive. The Registered Manager engaged fully in the inspection process and ensured that all requests for information and records were fully met. In addition, care receivers were happy to provide feedback on the home which was consistently positive.

Training for staff was examined in detail and cross referenced with the service's Statement of Purpose and categories of care provided. Training offered is generally consistent with the requirements set out within the Care Home Standards. One area in relation to medication competencies was discussed with the Register Manager and the requirement for some minor adjustments to competency reviews acknowledged.

There have been significant staffing pressures in recent months due to staff vacancies. This has also impacted upon the roles of the Registered Manager and Team Leader. A solution has now been found and there is a consistent staff team in place. The team were found to be knowledgeable, positive in attitude and demonstrated a good understanding of care receivers' needs.

A review of care plans was conducted by the Regulation Officer. Plans were found to be reflective of the needs of care receivers whilst respecting their wishes, preferences and communication styles.

There were several examples of safe systems of working practices within the home which included medication administration, maintenance / repairs, cleaning schedules and positive risk taking. The Registered Manager demonstrated a good understanding of risk assessment and management processes.

The Regulation Officer undertook a review of the organisational policies and procedures in place. These were found to be reflective of the requirements of the Care Home Standards. Discussions with the Human Resources (HR) and Learning and Development teams identified areas where some future amendments may be required.

IMPROVEMENT PLAN

There was one area 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 4</p> <p>To be completed by: 2 months from the date of inspection (24 July 2022).</p>	<p>The Registered Manager must ensure that appropriate risk assessments are in place in relation to fire safety, in order to identify any risks associated with evacuation of multiple residents who may have additional needs. Such a risk assessment should aim to satisfy the organisation that the level of staffing in place (over the 24 hour period) is sufficient to manage safe evacuation. There also needs to be evidence of regular fire drills in place for staff as per the requirements of the fire logbook and a fire evacuation plan which clearly identifies the responsibilities for staff in the event of a fire.</p>
	<p>Response by registered provider:</p> <p>Fire risk assessments and plans are being reviewed to ensure that we are meeting the safe needs of the Residents in the home in the event of a fire. It has been identified that more regular fire drills are required in the home which has been arranged since the inspection.</p> <p>Recent deployment into the home of an experienced fire marshal has supported with a more robust system in the home meeting the requirements of the fire logbook.</p>

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