

Summary Report

Sanctuary House

Care Home Service

La Rue du Croquet St Brelade JE3 8BZ

24 August 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.

The service had addressed all six areas for improvement, which were identified at the time of the 2021 inspection.

There are now a range of policies and procedures in place which continue to be updated.

The service has a staff team which matches the Statement of Purpose and safe recruitment practices have been followed for new staff members since the last inspection.

There is a robust training programme in place which will ensure that staff are trained to a Level 3 standard in a qualification which has been specifically devised to meet the needs of the staff working at this home. Mandatory training is also available, and the Registered Manager was aware of the need to ensure that staff complete this in a timely manner.

Staff have quarterly supervision with the Registered Manager or Deputy Manager. In addition, they are also offered monthly clinical supervision with an independent counsellor, which has been increased when necessary. This is an area of good practice.

The complaints policy has been updated and is available to all care receivers. It was noted that positive feedback was received from all care receivers.

There is now a Health and Safety representative employed who is currently reviewing any issues with the building. There are regular fire checks and evidence of recent decoration.

There has been improvement in the monthly quality reports. The Registered Manager acknowledged that this process now supports them in their role and the outcomes promote actions and are shared with the team at weekly meetings.

Care planning is person-centred and now uses a toolkit and reviews are held three monthly. All care receivers who provided feedback stated that they are well supported and that the team of staff have made a difference to their lives. Care receivers at this home are independent but there is a culture of support and provision of a variety of activities. This was an area of good practice.

IMPROVEMENT PLAN

| Th | ere were no | areas f | or improve | ement | identified | during | this | inspection | and | an |
|----|-------------|----------|------------|--------|------------|--------|------|------------|-----|----|
| lm | provement | Plan has | s not been | issued | d. | | | | | |

The full report can be accessed from here.