



**Jersey Care
Commission**

Summary Report

Westley Lodge and Cottage

Care Home Service

**Westley Lodge and Cottage
La Rue De La Masurier
St Helier
JE2 7ZZ**

10 and 11 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.

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.

The Regulation Officer had the opportunity to spend time with care receivers, who were happy to provide feedback. They all expressed satisfaction with living at Westley Lodge and Cottage and clearly considered it their home. They also took the opportunity to speak of the friendships that they have built within their local community.

Interactions observed between staff and care receivers were noted to be friendly, humorous and respectful. Care receivers spoke positively of the team and the support they provided.

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.

There were several examples of robust safe systems of working practices within the home. However, some work is required to improve processes in place for the delegation of clinical tasks. This is an area for improvement.

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.

A review of care plans demonstrated a good understanding of care receivers needs and were reflective of individual wishes and preferences. Recognising individual

strengths and promoting independence was noted to be a key feature of the support provided.

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 6.4</p> <p>To be completed by: with immediate effect</p>	<p>The Registered Manager must ensure that any clinical tasks, such as blood sugar monitoring are identified as delegated tasks. Staff must receive the appropriate training to undertake the task and there must be an appropriate care plan in place which provides clear guidance from the professional responsible for delegating the task.</p>
	<p>Response by registered provider:</p> <p>Amendments to the care plan illustrating the Care Receiver manages this task independently with minimal prompts from the support team were made immediately and shared with the Regulation officer on their return to the home on their 2nd inspection visit.</p> <p>Discussions have also taken place around training with the health department who would provide the training required to address this improvement, unfortunately there is no capacity to offer this at the present time.</p> <p>There is an agreement in place that we should continue to support with prompts as required until the health department are able to assist Les Amis with the formal training required to fully meet the individuals needs in this area.</p>

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