

Summary Report

Fig Tree House

Care Home Service

14 – 16 Parade Road St Helier JE2 3PL

17 and 22 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 home's aims and objectives relating to care receiver independence, leading their lives as normal as possible and the provision of a homely environment was clearly demonstrated during the inspection. Care receivers were observed coming and going from the home as they chose, and others were spending time following their interests and activities in the various communal areas in the home. They were complimentary of the staff team, the environment, and the freedom to come and go as they preferred.

There was evidence of safe recruitment practices in place and ongoing access to training, supervision, and appraisals. Staff commented that there are development opportunities provided for them also. The staffing levels are adequate to meet care receivers' levels of dependency and support needs.

Provision is made for care receivers to receive support from health and social care professionals and, when absolutely necessary, care receivers are transferred to services that can provide more specialist support when the home can no longer meet their needs. Feedback from one health and social care professional was very complimentary of the home's ethos, the approach taken by staff in supporting care receivers and their relationship with the mental health team.

There are four areas for improvement resulting from this inspection, which includes updating the Statement of Purpose, so that it accurately reflects the range of care needs supported. Where staff are required in exceptional circumstances, to transcribe medication, the records need to be clear and in line with best practice guidance. Risk management plans must be in place where care receivers are prescribed certain high-risk medications setting out potential side effects. The final area relates to the use of closed-circuit television cameras in the home and the need to justify its use.

IMPROVEMENT PLAN

There were four areas for improvement identified during this inspection. The table below is the registered provider's response to the inspection findings.

Area for Improvement 1 Ref: Standard 6.7	Where medicines are transcribed by staff in the home in exceptional circumstances, best practice guidance must be followed and clear records maintained.
To be completed by: with immediate effect	Response by registered provider: This was rectified with immediate effect while The Jersey Care Commission were present in the building
Area for Improvement 2 Ref: Standard 2.7	Where high risk medications are administered, a detailed risk management plan must be devised and implemented.
To be completed by: with immediate effect	Response by registered provider: A risk assessment was completed and placed in the Residents Plan of Care and Medication file with immediate effect

Area for Improvement 3

Ref: Standard 4.9

To be completed by: within 1 month from the date of inspection (22 September 2022).

The use of CCTV must be reviewed and its rationale for use in the home made explicit. It is advised that legal advice surrounding its use, be sought. Should its continued use be deemed legitimate and necessary, appropriate measures must be taken to inform care receivers and visitors to the home of its use.

Response by registered provider:

For the added safety and security of our Residents and Staff the camera at the entrance to the Home will remain in situ.

The cameras in the corridors have now been disconnected.

Area for Improvement 4 Ref: Standard 1.1	The Registered Provider must revise the Statement of Purpose and provide a copy to the Commission.
To be completed by: within 1 month from the date of inspection (22 September 2022).	Response by registered provider: This has been revised and a copy sent to the Jersey Care Commission

The full report can be accessed from here.