



**Jersey Care  
Commission**

## **Summary Report**

**HCS 105**

**Care Home Service**

**Government of Jersey  
Health and Community Services  
19-21 Broad Street  
St Helier  
JE2 3RR**

**14 October 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 individual living in this home is supported to live their life as they choose and receives support that focuses on their needs. They are encouraged and supported to make choices and decisions about how they spend their time, their rights are upheld, and their safety promoted. Their relative confirmed that they were happy with the service provided, and that they always felt welcomed to the home and were assured that their relative was safe and well supported.

Care plans were in place to address the individual's full range of needs and there was evidence that appropriate health professionals were involved in addressing and reviewing health issues where necessary. However, further work is required to develop care plans to reflect and address the individual's goals and ambitions and this is an area for improvement.

Staff said they felt supported by their managers, and they had access to regular team meetings, training and supervision. They said they felt confident to approach the management team with issues, trusting that their concerns would be addressed. There are a wide range of quality assurance processes in place to ensure adequate oversight of the home, which includes a Provider representative assessing that acceptable Standards are being met.

The staffing provision in the home is centred on the individual and the staff team had a good understanding of their needs. One relative felt that there were good relationships between the staff team and, the individual, and they felt that their relative received safe and consistent support.

There are improvements required to ensure notifiable events are submitted to the Commission and fire safety training is provided and recorded to include fire drills.

## IMPROVEMENT PLAN

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

<p><b>Area for Improvement 1</b></p> <p><b>Ref:</b> Standard 4.3</p> <p><b>To be completed by:</b> with immediate effect</p>	<p>The Registered Provider must ensure that all notifiable events are reported to the Commission.</p> <hr/> <p><b>Response by registered provider:</b></p> <p>All notifiable events will be reported to the Jersey Care Commission in line with the Jersey Care Commission Standards for Care Homes (Adults) 2019 Appendix 8.</p>
<p><b>Area for Improvement 2</b></p> <p><b>Ref:</b> Standard 4.2</p> <p><b>To be completed by:</b> with immediate effect</p>	<p>All staff must be provided with fire safety drills and safety checks completed that meet the requirements set by the Fire and Rescue Service.</p> <hr/> <p><b>Response by registered provider:</b></p> <p>The Government of Jersey Engineers test the Fire alarm each Wednesday and sign the log book on completion. Registered Manager has informed the Engineers they must sign all documentation required within the Fire log book including the 3 month testing of the self – closing fire doors. This will be reviewed on a quarterly basis to ensure compliance by The Registered Manager.</p> <p>Fire safety drills are carried out monthly within the Care home by fire safety officer. The Fire drills are actioned at each monthly team meeting.</p>
<p><b>Area for Improvement 3</b></p> <p><b>Ref:</b> Standard 2.4 and 2.5</p> <p><b>To be completed by:</b> 2 months of the date of this inspection (14 December 2022 )</p>	<p>Care planning processes must be enhanced to identify the care receiver's personal goals, aims and outcomes.</p> <hr/> <p><b>Response by registered provider:</b></p> <p>Personalised goals and outcomes continue to be developed with the full support of the service user, staff and family where appropriate. This will be included in their personal documentation and reflected within their annual review.</p>

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