



**Jersey Care
Commission**

Summary Report

Mourant Lodge

Care Home Service

**La Rue Asplet
Trinity
Jersey
JE3 5JF**

21 November and 9 December 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 and staff team engaged fully in the inspection process and ensured that all requests for information and records were met. Furthermore, care receivers and family members were happy to provide feedback which was consistently positive in relation to the quality of the care provided.

All feedback received highlighted that the provision of the service is not consistent which has resulted in reduced access. A lack of permanent staffing impacts upon the respite options available to care receivers and their families. This is an area for improvement.

There were several examples of robust safe systems of working practices within the home. This includes accident and incident reporting, risk management and recruitment practices. A review of medication practices highlighted that standards were being met; however, it was noted that some improvement was required to meet the transcribing guidance requirements. This is an area for improvement.

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.

A review of care plans demonstrated a good understanding of care receivers needs. They were personalised and respected individual wishes and preferences.

Training provided to staff was found to be in line 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.

IMPROVEMENT PLAN

There were two areas 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 6.8</p> <p>To be completed by: 1 month from the date of inspection (9 January 2023)</p>	<p>Medicines will be managed in compliance with legislative requirements, professional standards and best practice guidelines.</p>
	<p>Response by registered provider:</p> <p>Recommendation made by the inspecting officer around transcribing have been carried out and are now in place.</p>
<p>Area for Improvement 2</p> <p>Ref: Standard 1.3</p> <p>To be completed by: 3 months from the date of inspection (9 March 2022).</p>	<p>The Registered Provider must ensure that they are aware of and have capacity to meet the assessed needs of care receivers. The provision of respite services must be clearly identified in the Statement of Purpose as the main focus of the service and be reflective of current best practice / specialist guidance.</p>
	<p>Response by registered provider:</p> <p>The Statement of Purpose has been amended to reflect best practice and also been sent to the inspecting officer to confirm that the alterations made meet with the requirements in this area of improvement.</p>

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