



**Jersey Care  
Commission**

## **Summary Report**

**HCS 102**

**Care Home Service**

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

**14 December 2022 and 13 January 2023**

## **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 Interim Manager and staff team engaged fully in the inspection process and ensured that all requests for information and records were fully met.

The staff team are a blend of experienced and new staff. This is beneficial to both the care receiver and staff members as time is needed to build trusting relationships and develop an understanding of needs and routines. Interactions observed were positive and responsive, with staff striving to ensure that a person-centred approach is provided.

The environment is designed to meet individual needs and maximise independence and privacy, whilst ensuring that a safe environment is maintained at all times.

There were positive examples of robust safe systems of working practices within the home. However, some work is required to improve maintenance, fire drills for staff and organisational policies.

Care plans were found to be reflective of the needs of the care receiver, were well maintained and reviewed regularly. However, there was a lack of consideration given to personal goals, aims and outcomes.

There is a robust training and development plan for staff which takes account of the mandatory requirements, as well as recognising the specialist training needed to ensure that specific needs are met.

There are five areas for improvement as a result of this inspection.

## IMPROVEMENT PLAN

There were five 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 3.14</p> <p><b>To be completed by:</b> 3 months from the date of inspection (14 March 2023)</p>	<p>A schedule for the provision of annual appraisals for staff must be in place which meets the requirements of the Care Home Standards.</p> <p><b>Response by registered provider:</b></p> <p>Supervisions are booked in with staff between 5-6 weeks apart and all staff now have access to Connect system to set objectives and track goals and annual targets.</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>Regular fire evacuation drills must be undertaken as stipulated within the home's fire logbook.</p> <p><b>Response by registered provider:</b></p> <p>New in house fire warden has been appointed as a point of contact and the Health and Safety Training and Compliance Officer is to attend and support staff with training/scenarios for staff to carry out. Monthly fire drills will then be carried out at the team meetings and recorded in the in-house fire drill logbook.</p>
<p><b>Area for Improvement 3</b></p> <p><b>Ref:</b> Standard 1.6</p> <p><b>To be completed by:</b> 3 months from the date of inspection (14 March 2023).</p>	<p>All policies and procedures utilised by the home must be in date and updated within the stated review dates.</p> <p><b>Response by registered provider:</b></p> <p>The Government of Jersey are currently revising Government-wide employee-related policies that will be in place on Gov.je to allow transparency. These policies are more user friendly than in the past, and Toolkits have been created and embedded within the policies to give staff more detailed guidance and support. Specific information regarding the roles involved in each policy and their responsibilities have been outlined, along with a useful glossary of terms and an emphasis on effective communication and employee wellbeing. Until a policy has been revised and launched onto Gov.je, it will remain accessible on the staff intranet and policies will be reviewed and revised often. Care home specific policies will be updated and ratified within the Adult Social Care</p>

	group and sent to HCS Policies and Procedures Ratification Group for information.
<p><b>Area for Improvement 4</b></p> <p><b>Ref:</b> Standard 4.6</p> <p><b>To be completed by:</b> with immediate effect</p>	<p>Maintenance schedules and logs must be available at all times within the home in order that the Registered Manager / person in charge receives the relevant information to fulfil their health and safety responsibilities.</p> <p><b>Response by registered provider:</b></p> <p>Maintenance schedules will be printed and available on the system for all staff to populate when work is carried out. Speaking with Estates Building Manager about the Planned Property Maintenance schedule being put in place and adhered to.</p>
<p><b>Area for Improvement 5</b></p> <p><b>Ref:</b> Standard 2.4 and 2.5</p> <p><b>To be completed by:</b> 2 months from the date of inspection (14 February 2023).</p>	<p>Care planning processes must be enhanced to reflect the day to day support being provided which is based upon the care receiver's personal goals and ambitions.</p> <p><b>Response by registered provider:</b></p> <p>Personalised goals and outcomes continue to be developed with 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. Date set to review care plans with case coordinators.</p>

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