



Jersey Care  
Commission

## **Summary Report**

**St Ewold's**

**Care Home Service**

**Balmoral Drive**

**La Route de la Trinite**

**St Helier JE2 4NJ**

**27 February and**

**3 March 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.

Two regulation officers carried out the inspection on 27 February 2023, with one returning to complete the inspection on 3 March 2023.

At the time of this inspection, there were 63 care receivers in this service receiving personal care and support. The registration conditions of this service are for 61 residential beds and five nursing beds. However, at the time of the inspection, six care receivers received nursing care. The Registered Manager confirmed that they were actively seeking a solution but reported that there was considerable pressure in the care sector as a whole, which was creating challenges in sourcing nursing provision.

The regulation officers appreciated the challenges and were assured by the Registered Manager that the service was meeting the needs of these six care receivers, as their care needs were well known to the care staff providing their care. The Registered Manager reported that they were monitoring the situation. If the needs of any care receiver receiving nursing care were to deteriorate, they would need to consider other options.

The last inspection in August 2022 identified six areas for improvement in this service. The regulation officers were satisfied that five of the six areas for improvement had been addressed by this service. The area for improvement that still needed to be successfully addressed was regarding fire drills and record keeping associated with them. The Registered Manager assured the regulation officers they had taken place in line with fire precaution recommendations. This remains an area for improvement.

The staff team had remained stable since the last inspection in August 2022, with only one staff member leaving and two additional care staff joining the service.

The service has also recruited a receptionist, which has reduced front-of-house responsibilities for the staff team. The regulation officers evidenced safe recruitment procedures for these new staff members, which is an area of good practice.

The Registered Manager was open and transparent regarding their self-evaluation of this service and shared their perceptions regarding the strengths and deficits of this service with the regulation officers. The Registered Manager had identified two areas where the service needed to make improvements. These were Health and Safety and the adoption of some new or revised policies by the staff team. These areas were identified as areas for improvement by the regulation officers.

The quality of the personnel files in this service could have been better. Some key documents were missing, such as Criminal Record Checks (Disclosure and Barring Service checks), probation reports, and induction checklists. This service is in the process of transferring all personnel records onto a specialist electronic portal. This is an area for improvement.

An external Infection Control Audit was completed in January 2023 for this service and recorded a 93.7% compliance with recommended infection control measures. The Registered Manager has actioned the recommendations from this audit, with one of them to identify a designated Infection Control lead. This is an area of good practice.

This service continues to provide care to a range of care receivers, many of whom have extensive personal care needs. While staffing does meet the ratio set out in the Care Home Standards, feedback from care receivers, their relatives, staff, and the observations of the regulation officers evidences a challenging working environment. This was acknowledged by both the Registered Manager and the Registered Provider, who advised they were exploring the possibility of increasing staff numbers and considering changes to rotas that would result in higher staffing levels at critical times. The regulation officers welcomed this development.

The feedback provided to the regulation officers as part of this inspection by care receivers and their relatives was largely positive, with care receivers and their relatives genuinely appreciative of the care they are provided with. The regulation officers observed positive interactions between staff and care receivers where they witnessed warmth and positive regard. This is an area of good practice.

During this inspection, an open and transparent discussion occurred between one of the regulation officers, the Registered Provider, and the Registered Manager. The Regulation Officer felt assured that the Registered Provider and Registered Manager were fully aware of the deficits in this service, that there was a business plan to address these, and that they had a clear vision of what they wanted to achieve.

Despite this inspection identifying four areas for improvement, this service has demonstrated a desire to improve continually, especially in the area of governance. Overall, the regulation officers were assured that care receivers were being provided with the care and support to meet their needs.

## 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.

<p><b>Area for Improvement 1</b></p> <p><b>Ref:</b> Standard 4</p> <p><b>To be completed by:</b> Immediate</p>	<p>The Registered Provider must ensure that this Service undertakes testing and maintenance of fire protection equipment in line with the recommendations in the Jersey Fire and Rescue fire precautions logbook, which is a requirement of the Fire Precautions (Jersey) Law 1977.</p>
	<p><b>Response of Registered Provider:</b></p> <p>All senior staff have undertaken fire training recently. All documentation such as fire drills and testing of equipment is being recorded in the Jersey Fire and Rescue precautions logbook.</p>

<p><b>Area for Improvement 2</b></p> <p><b>Ref:</b> Standard 4</p> <p><b>To be completed by:</b> 4 months from the date of inspection (3 July 2023).</p>	<p>The Registered Provider must ensure that there is a dedicated Health and Safety lead for this service with the necessary skills, experience, and qualifications for this role. In addition, the revised Health and Safety policy needs to be launched within the service.</p>
	<p><b>Response of Registered Provider:</b></p> <p>Contact has been made with a Health and Safety advisor to enable us to manage the service safely. This will enable us to examine risks and manage these effectively. We aim to launch our Health and Safety Policy by June 12<sup>th</sup> 2023.</p>

<p><b>Area for Improvement 3</b></p> <p><b>Ref:</b> Standard 1</p> <p><b>To be completed by:</b> 3 months from the date of inspection (3 June 2023).</p>	<p>The Registered Provider must ensure that the newly revised suite of policies for this service is launched with staff and that they are provided with any additional training that these policies require.</p>
	<p><b>Response of Registered Provider:</b></p> <p>We are moving forward with launching our suite of policies and they will be complete and published by 12<sup>th</sup> May 2023.</p>

<p><b>Area for Improvement 4</b></p> <p><b>Ref:</b> Standard 3</p> <p><b>To be completed by:</b> 3 months from the date of inspection (3 June 2023).</p>	<p>The Registered Provider must keep employee personnel files updated and contain all the necessary documents. The Commission understands that this service is currently transferring employee documentation to an electronic portal.</p>
	<p><b>Response of Registered Provider:</b></p> <p>We continue to move information from paper to our digital HR platform. This will be complete by 12<sup>th</sup> May 2023.</p>

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