



**Jersey Care  
Commission**

## **Summary Report**

**La Haule**

**Care Home Service**

**La Route De L'Isle  
St Brelade  
JE3 8BF**

**24, 30 March and 3 April 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.

Relatives described the home provided a homely, warm atmosphere and that they had built positive relationships with the staff team. Families said the communication on behalf of the home was excellent, and that made them feel well-informed, reassured, and confident about the care of their loved ones. Family members spoke confidently of the recently appointed Manager and felt confident in her abilities and of the home's level of transparency.

Care receivers' health and well-being needs were met, and the home worked effectively with external health and social care professionals to make timely access to advice and treatment evident. Personal plans were kept current and included a comprehensive level of detail about individual needs and preferences.

The Provider's management team were able to demonstrate that they have an appropriate degree of overview of the service, and that adequate governance arrangements were in place. Staff and families were confident that any concerns would be handled appropriately and escalated where necessary. The home has notified relevant agencies concerning safeguarding concerns that had been identified.

The staffing levels meet the minimum Standards according to the number of care receivers living in the home. Staff recruitment remains ongoing and is an area of focus for the home. The activity programme is also to be strengthened as the home has recognised the shortfalls in providing activities of late due to staffing challenges. A new activities coordinator has recently been appointed. The dementia training programme is also being developed and enhanced from May to include face-to-face training for staff.

There is one area for improvement resulting from this inspection, referring to the details of safeguarding training provide

## IMPROVEMENT PLAN

There was one area for improvement identified during this inspection. The table below is the Registered Provider's response to the inspection findings.

<b>Area for Improvement 1</b>  <b>Ref:</b> Standard 4.1  <b>To be completed by:</b> 2 months from the date of inspection (3 June 2023).	The Registered Provider must ensure that the home's policy and staff training on safeguarding is in line with the Jersey Safeguarding Partnership Board Multi-Agency Procedures.  <b>Response of Registered Provider:</b>  While the Company has a comprehensive Safeguarding of vulnerable adults training programme we do accept that this is not completely tailored to the requirements of Jersey policies and procedures. The RM on receipt of the draft Inspection report has contacted the Safe Guard Partnership Board to arrange training for the home to support the teams in the understanding of local legislation.
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The full report can be accessed from [here](#).