



**Jersey Care
Commission**

INSPECTION REPORT

Rosemary Cottage Care Home

Care Home Service

**La Rue De La Vallee
St Mary
JE3 3DL**

19 May 2023

THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014, all services carrying out any regulated activity must be registered with the Jersey Care Commission ('the Commission').

This inspection was carried out in accordance with Regulation 80 of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 (as amended) to monitor compliance with the Law and Regulations, to review and evaluate the effectiveness of the regulated activity and to encourage improvement.

ABOUT THE SERVICE

This is a report of the inspection of Rosemary Cottage Care Home. The service is situated in a semi-rural location in St Mary. The home has seven bedrooms, some equipped with en suite facilities, two communal lounge areas, a house bathroom, and a kitchen. Residents can benefit from outdoor courtyard areas, and a car is also provided, which is used by staff to support residents as and when necessary.

The home provides individualised care and support to individuals who require support in their daily lives to develop, regain and maintain independence. According to the Statement of Purpose, the aims and objectives of the service are to 'provide quality, person-centred care for the residents and treat all individuals with the utmost dignity and respect and promote and encourage independence. It further aims to 'offer freedom of choice inclusively, and safeguard the well-being of all residents'.

While the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 (as amended) refer to 'care receivers' to describe people in receipt of care, the home's Statement of Purpose refers to 'residents'. Therefore, the same terminology will be used for this inspection report to describe people residing in the home.

Regulated Activity	Care home
Conditions of Registration	<p><u>Mandatory</u></p> <p>Type of care: personal care, personal support</p> <p>Category of care: Mental health, substance misuse (drug and/ or alcohol)</p> <p>Maximum number of care receivers: 7</p> <p>Age range of care receivers: 40 years and above</p> <p>Maximum number of care receivers that can be accommodated in the following rooms: 1 – 7 one person</p> <p><u>Discretionary</u></p> <p>A condition of registration is that the registered manager of Rosemary Cottage Care Home must complete a Level 5 Diploma in Leadership in Health and Social Care to be completed by 30th November 2023.</p>
Date of Inspection	19 May 2023
Time of Inspection	2.45pm – 5.45pm
Type of Inspection	Announced
Number of areas for improvement	None
Number of care receivers accommodated on the day of the inspection	7

LV Care Group operates the Care Home, and there is a Registered Manager in place.

The discretionary condition on the service's registration was discussed, and the Registered Manager advised that he was nearing completion of the Level 5 award and expected to complete it within the expected timeframe.

Since the last inspection, completed on February 24, 2022, the Commission has received contact periodically from the Registered Manager about issues as and when they have occurred. Relevant information has also been submitted to the

Commission through the notifications process as is required by the Regulations and Standards.

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.

Residents communicated that they liked living in Rosemary Cottage and felt that they received a good service. They described the home as being homely and expressed happiness and a sense of belonging in their home. The environment is domestic, homely and welcoming and residents were seen using the internal and external areas and were observed socialising with each other. Residents were enthusiastic about the home and were complimentary about the management and staff team.

The home management emphasises a culture where residents are placed at the heart of the service and aims to capture positive outcomes for them. The home is well thought of by external health professionals who expressed confidence in the home's ethos and operation and gave examples of residents' progress and their positive outcomes. Residents are encouraged to become more autonomous, and on some occasions, residents have moved out of the home to independent living.

Care staff appeared motivated, demonstrated a sound knowledge of the residents they supported, and had an in-depth understanding of the challenges they faced.

Appropriate referrals are made to health professionals promptly to ensure well-being outcomes are met. Personal plans are developed, and residents are fully involved in setting and reviewing their objectives. The records showed that residents are supported to do things that matter to them and meet their preferences.

There is adequate oversight of the service and quality of support provided. Robust governance processes include monthly visits from registered health professionals employed within the organisation to ensure the home meets Standards.

There are no areas for improvement made from this inspection.

INSPECTION PROCESS

This inspection was announced and completed on May 19, 2023. The Regulation Officer announced the visit to ensure that the Registered Manager would be available and allow the residents to participate in the inspection process if they wished. The Care Home Standards were referenced throughout the inspection.¹

This inspection focussed on the following lines of enquiry:

- **Management of the service**
- **Care and support**
- **Choice and safety**

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection report.

The Regulation Officer sought the views of six residents at home during the visit and spoke with the Registered Manager and two care staff members. The views of two external health and social care professionals were also obtained as part of the inspection process.

Care records, medication administration records, quality monitoring reports, health and safety and fire safety records were examined during the inspection. This inspection included a walk through the home; one resident showed the Regulation Officer their bedroom.

¹ The Care Home and all other Care Standards can be accessed on the Commission's website at <https://carecommission.je/Standards/>

At the conclusion of the inspection, the Regulation Officer provided feedback to the Registered Manager. This report sets out our findings and includes areas of good practice identified during the inspection.

INSPECTION FINDINGS

At the last inspection, no areas for improvement were identified that required any follow up on this visit.

Management of the service

The Standards outline the Provider's responsibility to ensure that where people stay is right for them and safe. There will be a management structure in place, with an integrated organisational and governance framework, which is appropriate to the needs, size and complexity of the service.

Feedback from the residents, staff, and external health professionals led the Regulation Officer to determine that the home is well run and managed in accordance with the Statement of Purpose. The aims and objectives of the home are evident in setting out what the service aims to deliver. It confirms that residents will be treated with dignity and respect, their independence will be promoted, and they will be involved in all decisions surrounding their care. These objectives are firmly embedded in the home culture, as evidenced by various sources of information.

Residents described the home as warm, welcoming, and supportive, and they spoke of the excellent working relationships with the Registered Manager and the rest of the staff team. The manager is committed to providing a quality service and works closely with the staff team and external health professionals to ensure residents reach their maximum potential. Staff that were spoken with were actively involved in supporting residents throughout the day, which varied according to individual needs.

Testimony from two external health professionals confirmed that the manager and staff team were passionate about the residents they support and were committed to providing a safe environment. Staff that were spoken with reported good morale in

the home and felt well supported by the Registered Manager. Residents told the Regulation Officer that they felt included in all aspects of living in the home. Resident meetings were held and well attended by residents, and their voices, opinions, and views were clearly expressed.

There are comprehensive governance processes in place. Monthly visits are completed by registered nurses who are employed within the organisation; these visits result in a monthly report. Samples of reports were examined, which showed that the home's performance against the Standards is assessed and Health and Safety matters are reviewed and addressed. There is an out of hour's support system in place, and staff confirmed they felt confident to call for support when they were working alone.

Care receivers' health needs and risk management plans determined staffing rosters to some extent. The Registered Manager considers those occasions whereby additional staff presence may be indicated, but the staffing levels are constant. Some care staff have been employed in the home for several years, and no new staff have been recruited since the last inspection.

Care staff have completed vocational qualifications in health and social care, which included Levels 2 and 3. One staff member has recently completed a Level 3 award, one person is progressing through it, and another is nearing completion of Level 2. Some staff have also completed vocational training in medication administration, and there is a plan for all staff to achieve this. For staff needing this qualification, in-house medication training is provided, and their competency is assessed.

Training in conflict resolution is provided for staff, and other training relevant to the resident group, including substance misuse training. The Registered Manager ensures staff are appropriately trained and competent in their roles and monitors this routinely during supervision discussions.

All staff, including the Registered Manager, benefit from supervision and annual appraisals. The manager explained the framework used to frame supervision discussions that can lead to performance action plans. Staff told the Regulation

Officer they benefitted from supervision and gave examples of bringing issues to the manager's attention.

Care and support

The Standards outline that people in receipt of care and support should experience compassion, dignity and respect. Care receivers, where appropriate should be involved in all decisions relating to their care and support in a way that respects their rights, individuality and beliefs.

The Registered Manager provided an overview of all residents' needs and described how pre-admission and personal plans are assessed and developed. Introducing anyone new to the home and opportunities for visits and trial periods are well managed. Samples of care records were reviewed, these demonstrated co-production, showing that residents were fully involved in planning how their care and support needs are met. The documentation was well organised and captured historical and recent information, enabling staff to understand the residents well.

The records evidenced that residents are valued and supported in how they choose to live their lives and their wishes are fully respected. Individual risk assessments were in place, and examples of promoting independence and positive risk-taking were in place. The records emphasised the home culture, which encourages residents to achieve the best possible outcomes and reach their potential.

The home has good working relationships and links with other professionals and agencies involved in the care and support of residents. Feedback from two external health professionals was optimistic about the home's ethos and ways of working and described some situations whereby the home had made vast differences in residents' lives.

A discussion with the Registered Manager confirmed an awareness of the home's limitations in providing care to residents that consider the home's registration conditions and the skills and competencies of the staff team. The manager has advised the Commission of rare instances where the home has had to discharge some residents due to an exacerbation in their health, requiring a more intense level of care.

Examples were also provided whereby some residents had spent time in the home, improved their abilities to self-care, and moved out into more independent living environments. One resident told the Regulation Officer of their plans to move out of the home and expressed nothing but praise for the staff team and their support. They said that their time in the home had allowed them to develop their confidence and life skills, allowing them to move out into the community.

The environment was very homely, welcoming, and well-maintained. The residents described it positively and said it provided a sense of community. Some residents were observed sitting outdoors in the patio areas, and the Regulation Officer noted residents using the range of communal areas and were seen socialising with each other and staff. They were complimentary of the home and described the pleasant, relaxed atmosphere and freedom to do as they wished.

One resident showed their highly personalized bedroom and referred to the home's cat sleeping in their bedroom, which the residents adore and said gives a sense of homeliness.

Six residents were at home during the inspection and were happy to speak with the Regulation Officer and made comments such as: "they've honestly saved my life", "I feel so calm and safe here", "I love coming home back home", "they're helping me build my confidence and I'm much better now", "the place has saved my sanity and I've got lots to look forward to". One resident also said "the staff are so patient, they always talk and they're there if you need but if not, you can just sit and enjoy the peace".

Two health and social care professionals had nothing but praise for the whole staff team, and the support they provided. They told the Regulation Officer that they felt confident residents were being well supported and described the team as passionate and committed to helping residents' lives improve for the better. Their comments included; "they are a very supportive, responsive and inclusive service and they help clients to re-engage and develop interests that matter to them" and "the communication and approach from the management is really welcoming and the

staff have an understanding of substance misuse and mental health issues and don't make any judgments".

Choice and safety

The Standards outline the Provider's responsibility to ensure that people will feel safe and are kept safe. People will be supported, enabled and empowered to be as independent and autonomous as practicable. People's rights will be supported and protected.

Samples of care records showed that individual risk assessments were in place, safeguarding residents from risk without being overly protective. The risk plans were transparent, had specific measures to minimise risks, and had been developed in consultation with each resident. They were well-documented and reviewed regularly. It was evident that residents are supported to make choices that are important to them.

Residents knew how to raise concerns and told the Regulation Officer that the staff team valued their views and opinions. Resident meetings are held, and staff said residents' input into the home's running was considered a priority. The home's complaints process is displayed in each resident's bedroom for reference. Residents said they would be confident to speak to the staff team if needed and consistently said they had no issues or concerns to raise.

Health and safety matters are consistently and routinely checked. The maintenance records showed safety checks relating to fridge temperatures, cleaning schedules, water checks, sharps storage, and the storage of hazardous substances. The fire safety records confirmed that all reviews are carried out as required; the Fire and Rescue Service conducted a fire safety inspection in May 2023. Fire safety drills were regularly conducted and included the residents.

Notifiable events are reported to the Commission as and when they occur. Samples of medication administration records were reviewed during the inspection, which showed they were clear and accurate in their recording of evidence of medication administration. The home routinely audits medication practices as part of its quality assurance process.

IMPROVEMENT PLAN

There were no areas for improvement identified during this inspection and an Improvement Plan has not been issued.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of the Care Commission during the course of this inspection. The findings contained within this report do not exempt the service from their responsibility for maintaining compliance with legislation, Standards and best practice.



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