

Summary Report

Sandybrook Nursing Home

Care Home Service

Les Grupieaux St Peter JE3 7ZZ

20, 24 & 25 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.

This inspection has shown that while some areas for improvement remain, the home has progressed with the areas identified on the last inspection. A permanent manager has been appointed, working hard to provide leadership and direction to the staff team. The staffing levels have increased and consistently meet the minimum Standards, and new staff are subject to safe recruitment processes.

Care receivers and their families confirmed they were generally happy with the care provided. They complimented the kindness and commitment of the staff team but wished for more opportunities for social activities and additional food options. There were positive interactions between care receivers and staff seen during the inspection. Medication practices in the home are safe. Communication around care planning arrangements has improved since the last inspection.

The governance arrangements required strengthening as there is no system in place to ensure the effective delivery of a safe and consistently monitored service as the Regulations and Standards require. This inspection found that some notifiable events had yet to be notified to the Commission as set out in the Standards. This breach has been identified previously and will be monitored closely by the Commission.

Eight areas for improvement were made due to this inspection, which is detailed throughout the report. These areas include but are not limited to: the need for newly employed staff to go through a structured induction programme and be provided with supervision. Social activities and food choices should be further reviewed to ensure they are based on care receivers' preferences.

There was a well-trained staff team working in the home who understood care receivers' needs very well.

IMPROVEMENT PLAN

There were eight areas for improvement identified during this inspection. The table below is the Registered Provider's response to the inspection findings.

Area for Improvement 1	The Provider must ensure the Commission is made
	aware of all notifiable incidents, accidents or other
Ref: Regulation 21	events that have posed or may pose a risk of harm to
Standard 4.3	care receivers.
	Response of Registered Provider:
To be completed by: with	
immediate effect	The Registered Manager recognises areas of
	improvement were required to embed this process
	within the team. Since April's Inspection visits a
	laminated list of notifiable events is displayed for staff
	to refer to and in addition, a further prompt has been
	produced to ensure Datix's reporting is linked to
	Notifiable Events. A quick reference Action Card has
	been issued to all staff with all Notifiable Event also
	being printed and held in a folder as evidence.
Area for Improvement 2	The Provider must ensure that quality assurance
	processes are implemented which includes monthly
Ref: Regulation 19	reporting on the quality of care and support provided
Standard 12.2	and to evidence compliance with the Regulations and
To be completed by with	Standards.
To be completed by: with immediate effect	Response of Registered Provider:
	Since April regular monthly reviews have been
	commenced by The Registered Manager of Clairvale
	Recovery Unit for Sandybrook. This reciprocal
	arrangement had not been carried out by the
	Registered Manager from Sandybrook, which has
	now been addressed with immediate effect. Review
	dates are now diarised on an ongoing basis.
Area for Improvement 3	The Provider must ensure that all newly employed
	staff complete a structured induction programme

Ref: Standard 3.10 Appendix 6	staff complete a structured induction programme which will assess their competence.
	Response of Registered Provider:
To be completed by: with immediate effect	The Registered Manager is working with the Health & Community Services Practice Development Sister to develop a revised Induction Pack, which is currently in draft form. This will provide a structured induction programme and review of the probation period at weeks 8, 12 &18 weeks (when the employee will

	meet with the Registered Manager or Deputy). In addition, a supportive document is being prepared to provide all new employees with information in relation to working at Sandybrook Nursing Home.
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Area for Improvement 4 Ref: Standard 3.14	The Provider must ensure that staff are provided with regular opportunities to discuss their role through formal supervision processes.
To be completed by: with immediate effect	Response of Registered Provider: The new Connect People platform provides an objective-based appraisal framework, in conjunction with formal supervision by the Registered Manager or their deputy. Objectives are set yearly and quarterly review meetings are held. This will provide an opportunity for personal development, communication and capability concerns to be supported. Staff will receive supervision in line with the HCS procedure.
Area for Improvement 5	The Provider should review the budget allocated to
Ref: Standard 9.1, 9.2, 9.3	support the programme of activities currently on offer and must ensure activities are meaningful to care receivers.
To be completed by:	Response of Registered Provider:
within two months from the	
date of inspection (25 June 2023).	It is recognised the current Activities budget is insufficient. Sandybrook has recently moved into a new Care Group structure (Intermediate Care) and the General Manager is reviewing this as a matter of urgency. A revised budget will aim to provide care receivers with meaningful activities supporting their social, physical, and psychological well-being.
Area for Improvement 6	The Dravider should ansure that are reasivers are
Area for Improvement 6 Ref: Standard 8.1	The Provider should ensure that care receivers are provided with varied meals which are based on their preferences and requirements and should include therapeutic diet options.
To be completed by:	Response of Registered Provider:
within two months from the	
date of inspection (25 June 2023).	A survey is currently being completed by the Registered Manager to gain care receivers' feedback. The Registered Manager is linking in with the Catering Manager and Head Nutritionist & Dietetics within HCS, to review therapeutic diets/feeds and provision of snacks for Sandybrook. In addition, the option of having a hot

	meal/sandwiches & soup available at lunchtime and evenings is currently under review along with a cooked breakfast option. Menu's will be displayed on the dining room tables to enable care receivers to see the meal options available.	
Area for Improvement 7 The Provider should formally review the communal		
Ref: Standard 7.1	call bell alarm system to determine the impact it has upon care receiver's comfort, privacy and dignity.	
Appendix 10		
	Response of Registered Provider:	
To be completed by: within three months from the date of inspection (25 July 2023).	Options appraisal of various call bell systems is being undertaken. This will include looking at Technology Enabled Care options, review of other care homes provision on island, and the involvement of our Estate Management team to reviewing options available.	
Area for Improvement 8	The Provider must redecorate the wall in the ground	

Area for Improvement 8	The Provider must redecorate the wall in the ground floor lounge.
Ref: Standard 7.1	
To be completed by:	Response of Registered Provider:
within three months from the date of inspection (25 July 2023).	Maintenance work has been commissioned and will be completed in several areas of the home including the ground floor lounge by the end of June.

The full report can be accessed from here.