

Summary Report

Clifton Care Home

Care Home Service

Bagatelle Lane St Saviour JE2 7TD

16 and 20 June 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.

Clifton Care Home provides nursing support to care receivers with complex health and medical needs. The home strives to provide a person-centred approach to care, which allows individuals to lead the lives that they aspire to whilst managing their nursing care needs.

Care receivers and their relatives spoke of the professionalism of the staff team.

Carers were described as friendly and always willing to help. Positive interactions were witnessed by the regulation officers, which included humour and mutual respect. This was echoed by professionals who spoke positively of their experiences when visiting the home and their interactions with the Registered Manager.

Examining the organisational structure and staffing levels within the home identified the need to review the ancillary support for the Registered Manager, including human resources and administration. It was further noted that minimum staffing levels did not meet the minimum requirements, as detailed in Standard 3.9 of the Care Home Standards.

The environment of the home continues to present challenges; however, it was positive to note that planning permission has now been granted for a proposed refurbishment which will achieve compliance with Regulation 18 of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018.

Several measures were found to be in place to ensure the health and safety of care receivers and audit practices to ensure the safe and effective delivery of care. Examples of good practice included a range of audits, staff training, open communication, and competency updates for staff.

It was noted that some repairs to flooring within the home were needed and that compliance with the storage of substances hazardous to health required improvement.

Three areas for improvement have been identified as a result of this inspection.

IMPROVEMENT PLAN

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

Area for Improvement 1	Staffing levels within the home must be reviewed to
	ensure that they are meeting the minimum
Ref: Standard 3.9	requirements as set out in the Care Home Standards,
	scope and size of the home and must reflect the level
To be completed by: 4	of need of care receivers living in the home.
months from the date of	Response of Registered Provider:
inspection (20 October	
2023).	The Care Home has employed several care staff in
	the past few months and some staff have left
	employment. All efforts are made not only to achieve
	the minimum staffing levels but also to have enough
	staff to deliver care in a calm and happy
	environment. Rooms are kept unoccupied when
	staffing levels are low.
Area for Improvement 2	Immediate attention people to be siven to the
Area for Improvement 2	Immediate attention needs to be given to the
Pot : Dogulation 19	maintenance of the shower room and staff office, which will require the replacement of the flooring in
Ref: Regulation 18	both areas.
To be completed by: with	Response of Registered Provider:
immediate effect.	Response of Registered Flovider.
miniodiate oneot.	New floorings have been installed to the areas
	mentioned below:
	Shower Room Flooring – Work in progress
	Staff Office Flooring: Completed 18-08-2023
	Lift Flooring: Completed 24-08-2023
	g. completed _ r oc _coc
Area for Improvement 3	Immediate action is to be taken to ensure that all
	substances which are hazardous to health are stored
Ref: Standard 4.6	in line with the home's policy and legislative
	requirements when not in use.
To be completed by: with immediate effect.	Response of Registered Provider:
	The Housekeeping staff are ensuring that the
	cleaning trolley is not left unattended whilst they are
	working. The trolleys to be locked away in a
	designated area when not in use.

The full report can be accessed from here.