



**Jersey Care
Commission**

Summary Report

Mourant Lodge

Care Home Service

**Les Amis Limited
Five Oaks
St Saviour
JE2 7GS**

12 and 21 September 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.

The Registered Manager also manages another service carried on by the same provider. This service is adjacent to Mourant Lodge. The Registered Manager discussed that managing two homes is challenging but described good support from the management team and other registered managers.

There was evidence of safe recruitment practices within the service and appropriate supervision and appraisal processes for staff. The core staff team was increased from the last inspection to three full-time staff members and the Registered Manager, but still required one additional full-time staff member to be at full complement.

Staff training was blended and comprehensive, with staff being provided with regular mandatory and statutory training but also equipped with further specialist training in autism and epilepsy.

Feedback from care receivers, health professionals, and relatives concerning the care within the home was good. There was evidence of respecting care receivers' preferences and routines and that the service provided the opportunity for care receivers to spend time with friends and choose meaningful activities. The Regulation Officer observed positive interactions between staff and a care receiver, and staff expressed job satisfaction in their roles.

It was positive to note a real emphasis on person-centred care and promoting independence by the Registered Manager and the staff team. This was evidenced in feedback from the inspection and the care plans. This is a real strength of this team and an area of good practice. Care plans were detailed and easy to follow, and information given to care receivers was in an easy-to-read format.

There was appropriate medication management within the home, and the area for improvement concerning transcribing medication from the last inspection had been

met. There will be an area for improvement from this inspection for a best-interest discussion concerning covert medication. This is highlighted further under the heading of 'choice and safety.'

There is one additional area for improvement regarding notification to the Commission of Authorisations of Significant Restriction on Liberty (SRoL). The Registered Manager needed to be made aware of this requirement as per Appendix 8 of the Standards. This is an area for improvement with immediate effect.

IMPROVEMENT PLAN

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

<p>Area for Improvement 1</p> <p>Ref: Standard 4.3, Appendix 8</p>	<p>The Registered Provider must notify the Commission of such incidents, accidents or other events that have posed or may pose a risk of harm. This includes Authorisation of Significant Restriction of Liberty.</p>
<p>To be completed by: with immediate effect.</p>	<p>Response of Registered Provider:</p> <p>All SROs have now been sent to the Care Commission so they are now in possession of the relevant documentation.</p>

<p>Area for Improvement 2</p> <p>Ref: Standard 6.6, 6.7, Appendix 9, number 17.</p>	<p>The act of administering medication in disguised or covert form should not occur, unless there has been a formal best interest decision made. This must be recorded in the care receiver's personal plan.</p>
<p>To be completed by: with immediate effect.</p>	<p>Response of Registered Provider:</p> <p>Relevant alterations have now been made to address this issue which is clearly documented in individuals care plans with respect to administering medication.</p>

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