

## **Summary Report**

Pinewood

**Care Home Service** 

Le Mont Millais St Helier JE2 4RW

Dates of inspection 30 June, 4 July and 6 July 2023

## SUMMARY OF INSPECTION FINDINGS

The following is a summary of what was found during this inspection. Further information about our findings is contained in the main body of this report.

The service has a clear governance structure supported and enabled by MMCG. A comprehensive range of policies and procedures which are used dynamically. Staff training was 100% achievement in the vast majority of statutory and mandatory topics.

Feedback from care receivers was consistently positive, speaking highly of the approach of care staff. Care receivers complimented the plethora of activities the Lifestyle Coordinator arranged for them, and this was noted as an area of good practice.

Care records were clear, and the language was non-judgemental. Records are reviewed and updated proactively and in response to changes in health and or incidents.

Care staff spoke respectfully regarding care receivers and their families and described their commitment to teamwork. There was evidence of the Registered Manager proactively seeking the opinions of care receivers.

There were positive areas of practice to maintain safety including a weekly clinical governance meeting.

There are two areas for improvement. These are regarding staff supervision and notifications to the Commission.

## **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.

| Area for Improvement 1                               | The Registered Provider must ensure staff<br>supervision is carried out at least four times a year  |
|--|---|
| Ref: Standard 3:14                                   | and records of supervision retained within personnel files.   |
| <b>To be completed by:</b> 6 months from the date of | Response of Registered Provider:  |
| inspection (30 December 2023).                       | A staff supervision timetable is now in place which<br>also includes appraisals. The timetable includes the<br>name of the supervisor and the date of the next<br>scheduled supervision for each staff member.<br>All supervisions will be held on the individual's |
|  | personnel file once completed.  |

| Area for Improvement 2<br>Ref: Regulation 21 and<br>Appendix 8 of the Care | Requires that a registered person must notify the<br>Jersey Care Commission of such accidents or other<br>events that have posed or may pose a risk of harm to<br>care receivers. |
|--|---|
| Home Standards   | Response of Registered Provider:  |
| To be completed by: with immediate effect.                                 | Notifications are being submitted when required and within the correct timeframe to ensure the regulation is met.   |

The full report can be accessed from here.

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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