



**Jersey Care
Commission**

Summary Report

STRATHMORE

**Care Home Service
(Supported Accommodation)**

**Strathmore
80 Marks Road
St Saviour
JE2**

**5 and 22 September
and 4 October 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.

Recruitment and retention challenges of staff have contributed to changes in staff shift rotas; however, the Regulation Officer was satisfied that this was not detrimental to the personal support provided to residents.

Policy and Procedures were reviewed, and it was noted that an adequate whistleblowing policy had yet to be developed. This was rectified during the inspection period. Policies and procedures were easily accessible and reviewed regularly.

Complaints, incidents, accidents, and notifiable events were reviewed. These had been managed appropriately and where necessary there was evidence that learning had been implemented.

Training in this service is comprehensive and is ably supported by a dedicated training officer who is proactive in providing supplementary e-learning opportunities.

The frequency of supervision for care staff did not meet the required Standard of four times per year. The context was provided to the Regulation Officer; however, it is an area for improvement.

Referral processes for access to this service and initial needs-led assessments are thorough. Support planning is provided through the 'Outcomes Star' tool, which is regularly reviewed to track the progress of residents' journey to independent living. This is an area of good practice.

Residents who access this service are independent and are treated with dignity and respect. There are processes and procedures to address individual risks of residents, and these are person-centred.

Safe recruitment practice for new care staff was examined and noted to be compliant; however, criminal record checks for several existing staff had not been updated in line with best practice. This was addressed during the inspection period.

Feedback from residents who accessed this service was positive and showed they felt supported and safe. In addition, one professional consulted provided comprehensive positive feedback regarding their experience of this service.

IMPROVEMENT PLAN

There was one area for improvement identified during this inspection. The table below is the Registered Provider's response to the inspection findings.

Area for Improvement 1 Ref: Standard 3.14 To be completed during: 2024	The Registered Provider must ensure that formal supervision is provided to care staff at least four times per year.
	Response of Registered Provider: I can confirm that by the date of the JCC inspection, 22 nd September, two of the four scheduled supervisions had taken place.

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