



**Jersey Care
Commission**

Summary Report

Silver Springs

Care Home Service

**La Route des Genets
St Brelade
JE3 8DB**

22 and 25 August 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.

Overall, the findings from this inspection were positive. Staff recruitment is a challenge; however, it is recognised that this is a common difficulty across the care sector. Staffing levels were reviewed to establish that numbers were sufficient to meet the care delivery; it was positive to note that the minimum staffing requirements specified by the Care Home Standards were met.

The inspection included a tour of the home, which incorporated the communal areas, kitchen, laundry facilities and some of the care receiver's bedrooms that the Regulation Officer randomly chose. There has been a long-standing refurbishment plan for the home's interior and exterior; this was made an area of improvement in the last inspection on 9 and 14 September 2022.

It was recognised that the first-floor communal lounge had undergone a complete refurbishment including decoration and new furniture and soft furnishings. However, other areas within the home require maintenance and updating to give the home a cleaner and fresher look. Some care receivers' rooms appeared particularly outdated and there was evidence that they needed maintenance and refurbishment. This will continue to be an area of improvement.

There is a clear management structure, with appropriate governance arrangements allowing adequate oversight of the service. The Registered Manager has operational presence in the home; there are two Deputy Manager's and Head of Care to support the operational delivery of the home. Staff expressed that there is a culture of supportive teamwork.

Staff mandatory training is 98.9 % compliant, and the management team have clear oversight of the training, utilising an electronic matrix to evidence compliance. Protected time is provided for training completion.

There is a robust induction programme in place for new staff; this includes protected time to allow for shadowing and supervision by experienced staff members. A six-month probationary period is incorporated into the initial employment programme. This allows for a trial period of service to ensure that new workers are comfortable with the position and able to fulfil the specified functions and duties of the role. Mandatory training is completed during the induction period.

Staff members shared that there is a whistleblowing process and staff reported that they are able to raise workplace issues with the management team, however, the 'whistleblowing hotline' in place is helpful if they need to raise concerns that may involve the managers or more senior members of the team.

There were clear well organised care plans for each care receiver within the home. The Regulation Officer examined a selection of care records, there was evidence that care plans were reviewed and regularly updated.

Welcome packs are provided to new care receivers and their family members; they provide everything they need to know about living in the home.

There is a clear referral process which is followed by an admission procedure that incorporates a pre-admission assessment. The assessment includes all aspects of the care receiver's health and well-being and evaluates what care package will be required.

The home environment felt welcoming and homely; there are a choice of communal areas throughout the home, which are spacious and comfortable. The dining room is large with a selection of seating arrangements, giving the option to sit around a larger or smaller table. More comfy, supportive recliner seats are available on the dining room edge for residents that may find it uncomfortable to sit in dining chairs.

Refreshments stations are stocked and available throughout the day for residents who may wish to access snacks and drinks in between mealtimes. The refreshments are also available to relatives and friends when visiting.

There was evidence of appropriate medication processes, policies, and training for this area of practice. Monthly medication audits are completed, and an action plan is provided if areas of non-compliance are identified.

Staff are recruited safely, with safe recruitment checks in place before the commencement of employment of staff members.

There are procedures in place to reassure care receivers about Infection control practices in the home. These include a monthly infection control audit, which incorporates operational and residential areas of the home. A clear action plan is developed for highlighted areas of concern.

There is a comprehensive menu of food on offer throughout the day. Care receivers are provided with two different meal choices at lunch and dinner. Specialist diets are catered for, which include consideration of any identified food allergies.

There are no restrictions on visiting times for family and friends of the care receivers. They are encouraged to attend at any time and are welcome to join their loved ones when using the communal areas for mealtimes or relaxing in the lounges.

A review of staff members' human resource (HR) files demonstrated that safe recruitment practices were in place. A new system is being introduced that ensures that three yearly criminal records checks are completed for all staff members.

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 7 To be completed by: within 6 months from the date of inspection.	There are ongoing outstanding plans for refurbishing the home, both internally and externally. Residents' rooms require updating and essential maintenance to ensure a comfortable and inviting atmosphere. A project refurbishment plan to be submitted to the Commission.
	Response of Registered Provider: Refurbishment plan is in place and continues, regular updates will be provided to the JCC as discussed at Inspection. Next stage of the plan for Q1 2024 is underway and progress is being made to move this forward.

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