

Summary Report

Highlands Care Home

Care Home Service

La Rue de Froid Vent St Saviour JE2 7LJ

29 November 20235 January 2024

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.

St Phillips Care Limited oversees an extensive network of 34 care establishments, one in Jersey and the remaining across the UK these are managed by a structure of regional managers. The care homes employ quality assurance and governance procedures led by the Registered Manager and the Provider. The information technology system facilitates structured care assessments, planning, and record-keeping. Regular visits by the Regional Manager cover various aspects, such as maintenance, incidents, and complaints, with monthly audits, including compliance assessments.

The care home displays its insurance certificate, including a service user agreement in residents' welcome packs, and has received positive medication management feedback from a pharmacist inspector. Staffing levels are satisfactory, and employee's express contentment and support. The inspection notes that while the Registered Manager demonstrates genuine care, there is room for improvement in task delegation to enhance operational efficiency and oversight across all aspects of home management.

The Registered Manager prioritises resident well-being with a focus on happiness and effective care. Feedback from residents, staff, and relatives aligns with this ethos. Relatives praise the smooth transitions into the home and the ongoing support provided.

Comprehensive assessments, care planning, and positive risk-taking strategies are evident, facilitated by an efficient information technology system, for both record keeping and overall governance. Care planning emphasises the autonomy of care receivers. During the inspection, staff demonstrated compassionate and respectful support, prioritising dignity and privacy. The home employs a full-time activities coordinator who tailors activities to the diverse needs of care receivers, typically planned on an individual or small group basis.

The care home prioritises person-centred care through thorough assessments and planning, ensuring that care receivers' needs and preferences are heard and supported. Staff, equipped with handheld devices, have easy access to care plans. In Highlands Care Home, staff respect care receivers' autonomy in their residences, allowing them to decide daily activities, waking times, and meal preferences. The home offers meal options, and care receivers can request alternatives or cook in their flats, promoting independence.

Consent is diligently obtained from care receivers, with adherence to the Capacity and Self-Determination Law, when concerns arise about an individual's capacity. The focus on positive risk-taking in risk assessments enhances care receivers' control over their lives, reflecting good practice. The Registered Manager complies with safeguarding procedures, with practical plans and actions to address concerns. Staff understanding of safeguarding criteria and their ability to suggest strategies showcase a commitment to maintaining a safe and supportive environment.

Following the previous inspection, an improvement plan was initiated, emphasising the necessity for recruitment files to meet Care Home Standards. While some improvements have been made, further organisation and oversight are required.

The Regulation Officer recognised the home's broad support across various care categories, including specialities like Autism and Drug and Alcohol support. Staff, especially those providing direct support to these specialities, require additional training to enhance their skills.

This inspection acknowledged the challenges faced by the home in the past year, emphasising the impact on staff within the Highlands Care Home. Caring for individuals with diverse needs was acknowledged, suggesting that staff could benefit from resilience and bereavement support as part of their training and well-being program. While supervision records indicate good standards with evidence of training and development, there is a need to improve the frequency of supervision and annual appraisals to meet established standards.

There are three areas of improvement 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.

Aroa	for	Improvement 1
Area	101	imbrovement i

Ref: Standard 3.1

To be completed by:

With immediate effect

The Registered Manager must ensure that all recruitment files contain all the necessary information relating to safe recruitment checks, as set out in appendix 4 of the Care Home Standards.

Response of Registered Provider:

This issue was rectified on the day of the inspection and the appropriate form was printed and filed.

All staff files are audited at least monthly, in addition to this staff files are reviewed by Regional Manger on her compliance visits.

DBS applications are completed electronically, Head office and Regional manager have access to this site to monitor progress.

Area for Improvement 2

Ref: Standard 3.11

To be completed by: 4

months from date of inspection (5 May 2024)

The registered person will ensure that all care/support workers complete and remain up to date with statutory and mandatory training requirements.

Additional training in the following areas is required:

Autism

Drug and Alcohol support

Resilience

Bereavement

Response of Registered Provider:

All mandatory training has been completed and this is stored electroncaly on our on line training portal. Additional training has been sourced as

requested and this will be provided by Hospice
Jersey for bereavement. Training for drug and
alcohol support, we are looking for a training provior
that will support with this. All additional training has
been added to staff induction.

Area for Improvement 3

Ref: Standard 3.14

To be completed by: 3 months from the date of inspection (5 April 2024).

The registered person will ensure that all care/support workers are given regular opportunities to discuss their role and identify any issues through formal supervisions and appraisal, at least four times a year.

Response of Registered Provider:

As per St Philips care policy staff are allocated a supervisor who will ensure they are provided with the opportunity to sit and discuss their roles and responsibilities and to provide an opportunity for feedback. The home manager has allocated all senior staff to complete supervisions with care staff, the Deputy manager will complete supervisions with heads of department, and the home manager will complete the supervisions for the Deputy manager, head house keeper will continue to complete for all domestic and laundry staff, head chef will continue to complete for all kitchen staff. In addition to this the supervision tracker is updated and sent to the Regional Manager to monitor compliance.

The full report can be accessed from here.