



**Jersey Care  
Commission**

# **Summary Report**

**Silkworth Lodge**

**Care Home Service**

**6 Vauxhall Street  
St Helier  
JE2 4TJ**

**10 June, 12 June & 13 June 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.

There is a clear process for recruiting staff members, which includes safety checks to ensure their suitability. Once recruited, staff follow an induction program that includes demonstrating core competencies, which enhances the quality of the service delivery.

Risk plans are developed in collaboration with clients to ensure their safety while using the service. The needs of other clients are also considered during risk assessment discussions.

Additional processes are required for medication management to ensure the consistent and safe administration of medication within the facility. This is an area of improvement.

The service has an equitable referral process, allowing for recommendations from partner agencies, such as drug and alcohol services and self-referrals. All referrals are evaluated based on the admission criteria, determined through the initial assessment.

Each client undergoes a clinical assessment conducted by the therapeutic team upon admission to the facility.

The service can extend support beyond the Silkworth 12-week rehabilitation program through a step-down program. If deemed beneficial for the individual, suitable accommodation is available as part of this extended support.

Clients are provided with an individual treatment program, which includes a personalised care plan co-produced by the therapeutic team and the client.

Family support programs are available to family members who are often significantly impacted by a loved one's addiction. The service recognises that providing support and understanding to family members and significant others enhances the chances of recovery for everyone involved.

The therapeutic care provided by the in-house therapeutic team is intrinsic to the client's support during their rehabilitation journey. This includes group therapy, one-to-one counselling, and therapeutic assignments, all overseen by the therapeutic team.

The service has been updating some of its policies and procedures. This includes introducing a revised online handbook for staff members and a new operational manual.

Ongoing employment checks are being improved to ensure that staff remain suitable to work in the service, thereby ensuring the safety of those using the facility

## IMPROVEMENT PLAN

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

<p><b>Area for Improvement 1</b></p> <p><b>Ref:</b> Standard 6.6, 6.7, Appendix 9</p> <p><b>To be completed by:</b> December 2024, 6 months from the date of inspection.</p>	<p>There is a lack of processes for the safe storage and administration of controlled drugs (CD's). Guidance for administering medicines requires revision to incorporate infection control practices. Additionally, the staff team need annual medication competency assessments.</p> <p>Medication management requires review and the introduction of annual competency checks.</p>
	<p><b>Response of Registered Provider:</b></p> <p>A full review of the medication Administration Policy has been reviewed and re-written/ updated. The main change to this policy is the addition of a procedure around the storing and administration of 'controlled Drugs – In relation to this a new controlled drug recording book has been purchased and used for any controlled drugs that we have prescribed.</p> <p>All Annual refresher training for staff that administer meds have been booked with the Care College for Friday 15<sup>th</sup> November and Friday 6<sup>th</sup> December.</p> <p>We have now added an additional area within our Monthly Provider Report which is a specific focus on Medication practices and review. This will allow specific additional checks in this area of practice.</p>

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