



Jersey Care
Commission

INSPECTION REPORT

Stuart Court

Care Home Service

**La Rue de Haut
St Lawrence
JE3 1JQ**

Inspection dates:

18 September 2024 & 20 September 2024

Published:

29 October 2024

1. THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014, all services carrying out any regulated activity must be registered with the Jersey Care Commission ('the Commission').

This inspection was carried out in accordance with Regulation 80 of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 to monitor compliance with the Law and Regulations, to review and evaluate the effectiveness of the regulated activity and to encourage improvement.

2. ABOUT THE SERVICE

This is a report of the inspection of Stuart Court and there is a Registered Manager in place.

Registration Details	Detail
Regulated Activity	Care Home
Mandatory Conditions of Registration	
Type of care	Personal Care and Personal Support
Category of care	Adult 60+
Maximum number of care receivers	28
Maximum number in receipt of /personal care/personal support	28
Age range of care receivers	60 Years and above
Maximum number of care receivers that can be accommodated in each room	Rooms 1-26 One person Rooms 27 & 28 One Person Respite

Discretionary Conditions of Registration
None
Additional information
None

3. ABOUT THE INSPECTION

3.1 Inspection Details

This inspection was announced and notice of the inspection visit was given to the Registered Manager eight days before the visit. This was to ensure that the Registered Manager would be available during the visit.

Stuart Court Care Home refers to care receivers as residents, and I will use the same term in this report.

Inspection information	Detail
Dates and times of this inspection	18 and 20 September 2024
Number of areas for development from this inspection	None
Number of care receivers accommodated on day of the inspection	26
Date of previous inspection:	13 and 19 September 2023
Areas for development noted in 2023	None
Link to previous inspection report	IR-Stuart-Court-2023.09.13-complete-.pdf (carecommission.je)

3.2 Focus for this inspection

This inspection focused these specific new lines of enquiry:

- **Is the service safe**
- **Is the service effective and responsive**
- **Is the service caring**
- **Is the service well-led**

4. SUMMARY OF INSPECTION FINDINGS

4.1 Progress against areas for development identified at the last inspection

At the last inspection, no areas for improvement were identified. Areas for improvement will now be identified as areas for development.

4.2 Observations and overall findings from this inspection

Risk assessments are managed through the 'Fusion' electronic record keeping system, and personal evacuation plans are accessible during emergencies. Staffing levels are adequate, with compliant recruitment practices. Medication management is thorough, with audits, staff training, and policies in place. The inspection confirmed that the home's safety protocols, staff well-being initiatives, and medication practices align with relevant legislation, ensuring high standards of care.

Needs and risk assessments are managed through the 'Fusion' system and are regularly updated. Collaboration with external professionals, such as partnerships with Family Nursing and Homecare, speech and language therapy teams, and Hospice, enhances resident care. Do not attempt cardiopulmonary resuscitation (DNACPR) and end-of-life care preferences are respected, honouring cultural and personal needs. Planned activities promote inclusivity, fostering a community atmosphere among residents and staff.

The inspection highlighted Stuart Court's personalised care, offering residents autonomy in daily routines and room personalisation. There was evidence of a strengths-based approach encouraging independence, with staff collaborating closely with residents and families. Notable care, like providing a specialised bed for a resident's comfort, demonstrates individualised support. Staff well-being is ensured through regular supervision and appraisals, communication, and training needs are addressed, professional growth is encouraged, and high care standards are promoted.

The inspection also focused on staff's ability to raise concerns through multiple channels, including HR, the Registered Manager, or board members. There was evidence that the whistleblowing policy ensures that concerns are raised without fear of retaliation.

Workforce diversity is supported through individualised communication and assistance for staff where English is not their first language. Governance, policies, and training were thoroughly reviewed. Monthly reports and comprehensive training confirmed compliance with care standards and encouraging staff development.

5. INSPECTION PROCESS

5.1 How the inspection was undertaken

The Care Home Standards were referenced throughout the inspection.¹

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection report from 13 & 19 September 2023, the Statement of Purpose, variation requests and notification of incidents.

The Regulation Officer gathered feedback from five residents and two of their representatives. They also had discussions with the service's management and other staff. Additionally, feedback was provided by three professionals external to the service.

As part of the inspection process, records including policies, care records, incidents and complaints were examined.

At the conclusion of the inspection, the Regulation Officer provided feedback to the Registered Manager.

This report sets out our findings and identifies where standards have been met during the inspection.

5.2 Sources of evidence

The sources of evidence reviewed as part of this inspection are listed in Appendix 1.

¹ The Care Home Standards and all other Care Standards can be accessed on the Commission's website at <https://carecommission.ie/Standards/>

6. INSPECTION FINDINGS

Is the service safe?

Emphasising the importance of creating a safe environment so care receivers are protected from avoidable harm, with a focus on policies and procedures.

The inspection began with a focus on safety, particularly the processes for conducting risk assessments. The Registered Manager explained the home is using an IT platform called 'Fusion', which stores essential documents such as case notes, risk assessments, and needs assessments. Personal evacuation plans are stored on 'Fusion' and paper copies are also kept in the office for easy access during emergencies. An attendance register is also maintained and updated immediately with any changes, ensuring that fire crews have the latest information on residents in the building.

When a new resident is referred to Stuart Court, the Registered or Deputy Manager meets with them either in their home or at Stuart Court to ask risk-related questions. Both managers usually attend these meetings to jointly assess whether the home can meet the individual's needs, considering the current residents and the available staff capacity. The Registered Manager emphasised the importance of collaborating with other professionals to gather additional information for the risk assessments. Senior carers are responsible for monitoring care plans and updating risk assessments, which are managed through 'Fusion' which alerts staff when updates are needed.

A review of residents' risk assessments on the 'Fusion' platform demonstrated that comprehensive risk assessments covered all critical aspects of care. These assessments addressed various areas such as mobility, medication management, nutritional needs, skin integrity, and mental health. Each assessment was tailored to the individual's needs, ensuring potential risks were identified, monitored, and mitigated effectively. The 'Fusion' platform also enabled real-time updates, allowing staff to respond to changes in residents' conditions promptly and ensuring that care remained appropriate and safe at all times.

Staffing was reviewed, focusing on recruitment and retention. Stuart Court has 32 staff members, 90% holding a vocational qualification in health and social care. The Registered Manager reports that staffing levels are sufficient and that they are not actively recruiting.

Three staff members have left since the last inspection, and three new staff members have been recruited. A review of staff files confirmed compliance with safe recruitment practices, including references and Disclosure and Barring Service (DBS) checks before employment. Staff files also contained all necessary documents, including signed employment terms, job descriptions, and training certificates.

Stuart Court supports staff well-being through initiatives such as peer support, with plans for a staff well-being day pending board approval. Staff also receive Christmas bonuses and other rewards for completing vocational qualifications. Meals are provided during shifts, and supervisions include praise and recognition, celebrating staff achievements and special occasions.

The inspection also covered medication management. The Registered Manager noted that no residents currently require covert medication. Two residents self-administer their medication, while Family Nursing and Home Care provide support for those needing medications that Stuart Court staff cannot administer. Five staff members have completed diabetes medication training. Online and paper medication policies are accessible to staff, and the Registered Manager audits staff compliance with these policies monthly.

Staff must sign off on policies during their induction, and updates are communicated through staff meetings. Meeting minutes are shared with staff who are unable to attend.

The Regulation Officer reviewed the medication policies, including a list of staff trained in medication management and their competency assessment dates. The Registered Manager also maintains a separate audit file for monitoring medication practices, which includes checks on ordering, storage, disposal, and consent. Recent audits were found to be thorough, and a new Medication Administration Record (MAR) form was introduced in August 2024.

Stuart Court's medication policies, covering staff roles, consent, confidentiality, self-medication, and administration, were comprehensive and aligned with Jersey laws and regulations. Policies related to PRN (as required) medications, controlled drugs, and covert medication were also reviewed, with all due for renewal in June 2025.

Feedback from a professional:

"The safety of the residents is supreme. Each patient appears to be cared for on an extremely high level. Residents are comfortable and relaxed about the home."

Is the service effective and responsive?

Assessing the organisation of the service so that care receiver's needs are respected and met.
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The Regulation Officer focused on how the home assesses the needs of its residents. Senior staff complete needs assessments, while the manager and deputy manager handle the initial evaluation for new referrals. These assessments, which include a detailed life history, are continually updated as staff learn more about each individual.

The needs assessments are essential in determining whether the home can accommodate a potential referral, especially when the person's needs may exceed what the home is equipped to provide. The Registered Manager highlighted that Stuart Court is not registered to offer nursing support, sometimes requiring referrals to be made to other establishments. However, the Manager shared examples of how the home successfully accommodates end-of-life care, delivering a consistent and familiar environment during resident's final days.

The home's respite rooms were temporarily closed for renovations in July and August, but they are now available again. Some respite users later choose to be added to the waiting list for permanent residency if they decide to transition to full-time care.

On the second inspection day, the Regulation Officer reviewed the needs assessments and care plans and found them to be personalised and comprehensive. Each care plan reflected individual residents' unique preferences, characteristics, and requirements, ensuring that care delivery was tailored to meet their specific needs. The detailed assessments covered all relevant aspects of care, from daily routines to long-term goals, highlighting the home's commitment to providing individualised support.

The inspection explored collaborative working, and the Registered Manager provided several examples of successful partnerships with external professionals and services, highlighting how this collaboration benefits residents. The home also partners with the speech and language therapy team to support residents with swallowing difficulties or special dietary needs.

Another example involved collaborating with the Hospice, where Stuart Court staff received end-of-life care training, improving the care provided during residents' final days. The home also maintains strong relationships with local GP practices and has worked with the ambulance service to develop a protocol for managing falls. This led to introducing a checklist that staff use to assist in decision-making when a resident has fallen.

Additionally, the home collaborates with the charity 'EYECAN Jersey' to support visually impaired residents, who recently acquired a giant magnifying glass with a screen display to assist with daily tasks. The Registered Manager expressed satisfaction with all external partnerships and is proactive in gathering feedback from professionals who visit the home, incorporating this into monthly reports.

The inspection examined how consent to care is managed at Stuart Court. The Registered Manager confirmed that all staff had completed the Capacity and Self-Determination Law 2016 training within the last 12 months. While most residents have capacity, the home closely monitors those with cognitive impairments. Staff always seek verbal consent from residents during care tasks, which is documented in their case notes.

When the Regulation Officer reviewed the daily case notes recorded by care staff, they effectively documented the care provided and any instances where residents refused care. Additionally, the notes detailed the steps staff took in response to these refusals, demonstrating a thorough approach to ensuring residents' autonomy while addressing their needs respectfully and proactively.

The office maintains a list of residents with Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) and copies of the forms are readily available to accompany residents to the hospital if needed. The 'Fusion' system also highlights DNACPRs, and the office has a visible list for staff reference. Staff engage residents in conversations about end-of-life care when appropriate, ensuring their wishes are understood and respected.

Stuart Court honours cultural and personal preferences. The home offers tailored meals, such as unique Spanish dishes, and hosts events like Burns night for Scottish residents. Celebrating various cultural and personal milestones is integral to the home's inclusive environment.

Looking ahead, the home plans to introduce 'Sparkle Fridays' in November and

Feedback from a family member:
"My mum had an injury; I was contacted quickly the home was responsive the staff are really nice."

December, where both staff and residents can wear sparkly outfits to uplift spirits. Additionally, they are considering a 'Bake Off' competition involving residents from multiple care homes, with

support from Highlands College. The home funds all activities and outings to ensure inclusivity.

Is the service caring?

Evidencing fundamental aspects of care and support are provided to care receivers by appropriately trained and competent staff.

The inspection evaluated whether care at Stuart Court is personalised, reflecting residents' culture, characteristics, strengths, aspirations, and fundamental needs. The Registered Manager explained that upon moving to Stuart Court, residents are offered the choice of using the home's furnishings or bringing their own. For instance, one resident recently brought their bedspreads to create a more familiar space. Many residents personalise their rooms with pictures, furniture, and other items to make their environment feel like home.

Care at Stuart Court is highly individualised, allowing residents autonomy over their daily routines. They control their wake-up and bedtime; if they wake up at night, they can enjoy a cup of tea or a snack. The activities coordinator works closely with residents to plan weekly events. When the coordinator is on holiday, staff ensure residents still have access to entertainment, such as performances by guest entertainers.

The Registered Manager emphasised using a strengths-based approach in delivering care, helping residents maintain their independence as much as possible. This principle is communicated during initial assessments, where it is made clear that the goal is to encourage independence. Staff also engage with residents' families to gather preferences, mainly when a resident cannot communicate these directly.

Feedback from residents about their care was overwhelmingly positive, with many describing Stuart Court as comfortable and enjoyable, akin to living in their own homes.

One notable example of personalised care involved a resident receiving end-of-life support. A staff member went beyond expectations by researching innovative solutions to address the resident's needs, particularly concerning the challenge of turning in bed to maintain skin integrity. The carer identified a bed with automatic turning capabilities, which the resident's family ultimately purchased. This solution gave the resident a more comfortable and dignified experience, highlighting the home's commitment to individualised care.

The inspection also reviewed workforce well-being, supervision, and appraisals. The Registered Manager explained that all staff receive supervision on a quarterly basis, with an annual review conducted by the manager. Senior staff are responsible for supervising care workers, while the Registered Manager monitors the progress of these supervisions during training meetings to ensure they remain up to date.

A review of supervision records revealed that they cover several vital areas, including; job role alignment, workloads and absences, relationships and communication and practice concerns.

Supervision sessions also provide feedback on behaviour and conduct, training needs, policy updates, and other matters impacting staff duties. These sessions allow staff to raise concerns about resident welfare, safeguarding, care planning, and medication management. Furthermore, supervisions are strengths-based, focusing on staff well-being, performance reflection, and professional growth. An employee feedback form is used to evaluate the supervision sessions' effectiveness and identify areas for improvement.

Reviewing staff files confirmed that supervisions and appraisals are conducted regularly and meet the expected standards. Interviews with staff members further confirmed that these sessions are valuable for their professional development and well-being.

Feedback from a care receiver:

"It's brilliant here, staff are friendly and always want to help. I was provided with very good information when I moved in which helped me make the huge decision to give up my home and live here (Stuart Court)."

Is the service well led?

Evaluating the effectiveness of the service leadership and management.

Staff freedom to speak up, whistleblowing policies, and how staff raise concerns was explored. The Registered Manager explained that staff have multiple channels for raising issues, including directly approaching her, contacting HR, or contacting a board member. Open communication is actively promoted among the team, encouraging transparency and trust within the workforce.

An example of a whistleblowing incident was provided, which demonstrated the staff's commitment to lawful practices and adherence to company policies.

Residents at Stuart Court also receive induction packs that include information on how to raise concerns, further promoting a culture of openness. Additionally, a communication box at reception allows residents to submit anonymous suggestions, comments, or concerns. To maintain this open dialogue, Stuart Court also holds quarterly meetings with residents and their relatives, offering a formal setting for feedback.

The Regulation Officer reviewed the whistleblowing policy, which ensures that staff can raise genuine concerns about harm or malpractice without fear of retaliation. This policy aligns with relevant legislation and offers clear guidance on staff responsibilities for reporting concerns.

The inspection also explored workforce equality, diversity, and inclusion looking at the home's culture. The Registered Manager highlighted the importance of individual communication, especially for staff whose first language is not English. These staff members receive additional support through assistance from colleagues or by being provided with translated materials in their native language.

Stuart Court uses its Facebook page to celebrate staff achievements. The service also have events such as a Christmas party, if a staff member cannot attend an event, they receive the monetary equivalent. The Registered Manager noted that 20-25% of the staff come from non-English-speaking backgrounds, and these staff members are offered opportunities to shadow shifts with colleagues who speak their language, ensuring they feel supported in their roles.

The Regulation Officer examined the monthly reports of the home, which were prepared by a board member in collaboration with the Registered Manager. These reports address key operational areas, such as staffing levels to ensure compliance with required standards, recruitment and retention challenges, including issues related to staffing and sickness, and the review of previous actions, accidents, and incidents to confirm proper reporting to the Commission. Additionally, they include complaints and feedback from residents, relatives, staff, and professionals, as well as health and safety assessments, environmental quality assurance, spot checks, completed supervisions, and fire drills.

Each month, different care home standards are reviewed, with evidence provided to demonstrate how the home is meeting these standards. The reports were thorough, detailed, well-documented, with clear conclusions and action points.

The Regulation Officer also reviewed the training matrix, confirming that Stuart Court staff meet mandatory and statutory training standards. In addition, they have completed role-specific training, such as end-of-life care training. A review of staff files showed certificates documenting this training and up-to-date records of individual attendance. The inspection revealed that staff can access both online and face-to-face training sessions.

During interviews, staff expressed satisfaction with the return of face-to-face training, which had been unavailable during the COVID-19 pandemic. They noted that in-person sessions were more effective for interactive learning and retention of information.

Another professional who works with the service said:

Feedback from a professional who visits the home routinely:

“Stuart Court has an excellent manager who is approachable and easy to talk to. The staff are all friendly and appear to work well together as a team. I will say it is a very well organised happy home and nothing is ever a bother if I ask for help”

“Xxx (Registered Manager) is leading by example. I was so impressed!.”

DEVELOPMENT PLAN

There were no areas for development identified during this inspection and a development plan is not required.

Appendix 1 – Sources of Evidence

New key lines of enquiry	
Focus	Evidence Reviewed
<p>Is the service safe</p> <p>Review of Fusion System (Examples of Care Records)</p>	<p>Risk Assessments Risk Assessments: Identified risks for falls and nutrition. Likelihood categorised as possible with serious consequences if unmanaged.</p> <p>Care Plan: Comprehensive, covering medical conditions, mobility aids, daily living assistance, and social preferences. Includes detailed history and personal preferences such as food, social activities, and health management.</p> <p>Similar detailed care plans and risk assessments with regular updates and daily notes.</p> <p>Care Plan Inclusions:</p> <p>Likes/dislikes, medical history, social history, contact information, weight, blood sugar levels, Body Mass Index, body and pressure ulcer maps, PRN (as-needed) medication logs, and records of GP visits.</p> <p>Staff files</p> <p>Medication Trolley</p>
<p>Is the service effective and responsive</p>	<p>Needs Assessments</p> <p>Case Notes</p> <p>Observations</p>
<p>Is the service caring</p>	<p>Feedback</p> <p>Observations</p> <p>Case notes</p>
<p>Is the service well-led</p>	<p>Governance</p> <p>A significant number of policies were reviewed, most ratified in 2023 with future review dates set for 2024 and 2025. A folder containing the index and a sign-in sheet for the 2023 policies was observed.</p> <p>Key Policies:</p>

	<p>Access to Health and Community Services Policy (Ratified 26 May 2023): Under review, awaiting board ratification.</p> <p>Accident and Incident Reporting Policy (Ratified 26 May 2023): Follows the Regulation of Care law, medicines law, and Data Protection Law 2018. The procedure is clearly defined, with no incidents noted during this inspection.</p> <p>Clinical Waste Disposal Policy (Ratified 28 July 2023): Aligns with Health and Safety at Work and Waste Management laws.</p> <p>Advance Decisions Policy (Ratified 27 Jan 2023): Aligns with Human Rights and the Regulation of Care law.</p> <p>End of Life Care Planning Policy (Ratified 17 May 2024): Comprehensive, with a review date set for 2025.</p> <p>Infection Control Policy (Ratified 26 May 2023): Well-documented, aligning with the latest health and safety regulations.</p> <p>Falls Management Policy (Ratified 26 May 2023): Clear protocols, aligning with regulatory standards. Resident fall risks were consistently assessed, with adequate prevention measures in place.</p> <p>Policies Awaiting Review:</p> <p>Many policies are overdue for review, but the process is ongoing, delayed by staff absences. Some policies currently under review include:</p> <p>Referral Arrangements and Escalation Policy (awaiting ratification by the board, delayed due to absence of Provider).</p> <p>Staffing Levels Policy, Supervision Policy, Transport Policy, Volunteers Policy, Whistleblowing Policy.</p> <p>Training</p> <p>Feedback</p>
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It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for development 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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