



**Jersey Care  
Commission**

## **Summary Report**

**St Ewolds Residential Care Home**

**Care Home Service**

**Balmoral Drive  
La Route de la Trinite  
St Helier JE2 4NJ**

**Dates of Inspection:**

**20, 27 and 29  
September 2024**

## SUMMARY OF INSPECTION FINDINGS

The following is a summary of what we found during this inspection. The main body of this report contains further information about our findings.

This service has successfully addressed the four areas for improvement identified at the last inspection, which was carried out on 27 February and 3 March 2023. These were related to fire safety, the appointment of a health and safety lead, policy development, and staff personnel records.

Staff retention has been stable, although some night shifts were understaffed due to sickness. Safer recruitment and induction processes for new staff remain strong. The service has improved staff supervision, the training offer, and its wellbeing program, including a health plan and access to a mental health first aider. The wider organisation is developing a new appraisal system.

Fire safety practices and equipment maintenance meet best practices. A health and safety lead has been appointed and a new policy is in place. Staff have received relevant safety training, and monthly meetings are held to review health and safety incidents. The service achieved a five-star rating for food safety. A recent infection control audit showed improved compliance at 94.6%, with most recommendations being acted upon.

Medication storage and administration meet Standards, although minor inconsistencies in 'Pro Re Nata' (PRN) medication (that is needed as and when) record keeping were noted and fed back to the Registered Manager. Medication audits are undertaken regularly, and the management of care receivers who use Oxygen is in line with best practices.

Complaints were managed according to policy; however, complaints were not recorded on a central log. This was rectified during the inspection. Notifiable events to the Commission and safeguarding referrals were reviewed. These were found to be appropriate, with the service taking prompt and proper action, including learning for the service.

Care planning and the use of risk assessments were adequate and person-centred. However, increased use of the service's digital care management platform could provide further improvement. In the vast majority of cases, care plans were regularly reviewed. Person-centred care is promoted, including dietary needs, social engagement, and daily living choices.

A development plan for 2024-2025 focuses on investing in staff, improving safety, and enhancing the delivery of care. This includes refurbishing care receivers rooms to strengthen safety and their lived experience.

Overall, this service has made significant improvements since the last inspection. Care delivery is compassionate and person-centred. Robust operational systems are in place, and there is a commitment to continuous improvement. Care receivers, their representatives, care staff, and professionals provided positive feedback on the service and management team.

## IMPROVEMENT PLAN

There were no areas for improvement identified during this inspection and an improvement plan has not been issued.

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