

Summary Report

Sandybrook Day Centre

Adult Day Care Service

La Rue du Craslin St Peter JE3 7ZZ

24 and 30 September 2024

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SUMMARY OF INSPECTION FINDINGS

4.1 Progress against areas for development identified at the last inspection

At the last inspection, one of area for improvement was identified, and an improvement plan was submitted to the Commission by the Registered Provider, setting out how this would be addressed.

The improvement plan was discussed during the inspection, and it was positive to note that the improvement had been made. This means that there was evidence that risk assessments are clearly documented, the date commenced, updated and when the next review is required.

Areas for improvement will now be referred to as areas for development.

4.2 Observations and overall findings from this inspection

Feedback regarding the staff and the service delivered was consistently positive. Care receivers described staff as caring and helpful. Care receiver representatives said the staff were kind and supportive and gave suggestions and recommendations that supported the care receiver at home. Professionals praised the staff's personcentred and respectful approach, stating the staff responded in a clear, balanced, and timely manner.

The referral process and the assessment were clear and thorough and demonstrated teamwork within day services and collaborative working with other professionals. The care records sampled were person-centred and demonstrated that the staff team understood the care receivers needs and how to support them.

A range of activities is available to promote mobility, coordination, memory, and confidence. Care receivers were smiling, laughing, and engaged. Staff were observed supporting the needs of individuals and the group. The atmosphere at Sandybrook Day Centre was both stimulating and calm.

The team actively sought feedback on service delivery. There was a system in place to review service delivery through the production of comprehensive monthly provider reports. There was evidence that staff have undertaken appropriate training.

A system is in place to assign training and track if it has been undertaken. Staff gave examples of how training had influenced their practice. The policies reviewed defined terms, clearly set out processes, signposted to staff support and related other relevant organisational information and local legislations.

The service leadership and management structure represented a clear line of governance and was described by the Registered Manager as 'a golden thread'. Staff at all levels spoke of positive teamwork and feeling supported. There is an established system of appraisal and supervision, team meetings, and twice-daily safety check-in meetings.

There are two areas for development which are detailed within the report.

DEVELOPMENT PLAN

There were two areas for development identified during this inspection. The table below is the Registered Provider's response to the inspection findings.

Area for Development 1	The Registered Provider must ensure the door that enables access to the corridor between Sandybrook Day Centre and the neighbouring registered service
Ref: Regulation 18 (1) (b), Standard 7.3	have an alarm mechanism to alert staff when it is being opened.
To be completed: by 01/01/2025	Response by registered provider:
	Following consutation with the fire saftey officer for
	HCS, it has been identified that the best option to
	meet existing fire regulations (and this development
	plan) is to have the access control system disabled
	and a key lock fitted. This means that clients using
	the day centre cannot go through the door to the care
	home. Designated key holders have been issued
	keys and a keysafe will be situated next to the door,
	so all staff can easily access if required.

Area for Development 2 Ref: Standard 1.5	The Registered Provider must ensure that there is a written agreement which states how the service will be provided to meet the needs of the person receiving care. It will set out terms and conditions, payment arrangements (if appropriate) and
To be completed:	arrangements for changing or ending the agreement.
by 01/01/2025	Response by registered provider:
	Written agreements have been drafted and minor
	amendments have been made to the Standard
	Operating Procedures, setting out relevant review
	periods and contractual agreement between service
	users and the service. This reflects the small charges
	that may be accrued for lunches. This also sets outs
	the procedure for a situation that may arise requiring
	a notice period to be given. These will be finalised in
	Centre Leads Meeting and once authorised will be
	issued at the end of every users' introductory period.

The full report can be accessed from here.