



**Jersey Care
Commission**

Summary Report

Le Geyt Adult Day Centre

Adult Day Care Service

**La Grande Route de St Martin
Five Oaks
St Saviour
JE2 7GS**

23 September & 7, 18 October 2024

Publication Date

10 December 2024

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

Le Geyt Centre is a day service which caters for people with profound and complex disabilities and also provides individual programs for people on the autistic spectrum. The service operates between 9:30 – 3:00pm, Monday to Friday.

The service ensures that care receivers are supported with regular risk assessments and training using digital and physical systems.

Communication is managed through emails, meetings, and a WhatsApp group. Staff development is a priority, with shadowing and inclusive support. The service also supports student placements. Medication management follows strict protocols, including audits and staff training. Birthday celebrations and team bonding activities enhance the service's friendly, inclusive environment.

The service collaborates with external professionals (schools, therapists, social workers) and uses a Single Point of Referral (SPOR) for additional support. It conducts its assessments, like cooking evaluations, to develop personalised support plans. Key workers update these plans regularly. The service adapts care, offers external activities, and holds multidisciplinary team meetings to maintain comprehensive support and hospital passports to ensure emergency preparedness.

The manner in which consent is documented and stored within care receiver's files needs to adhere to the Capacity and Self Determination (Jersey) Law 2016, and is an area for development.

Le Geyt Day Service promotes care receivers' growth and engagement through a visual goal tree, collaborative activity selection, and a winter timetable trial period.

Activities like wet wheels and volunteering promote independence, while daily case notes and monthly reviews ensure progress tracking.

Staff receive regular supervision and annual appraisals, managed via the online government system, which helps maintain compliance and address outstanding tasks. This structured approach ensures continuous professional development and high-quality care within the service.

The service promotes a culture of conflict resolution, open communication, and staff support. There was evidence that the Registered Manager ensures staff feel heard and supported, providing flexibility for those facing personal challenges and encouraging team collaboration.

Staff have received an updated whistleblowing policy, demonstrating transparency. However, difficulty in accessing up-to-date policies and a need for improved policy management to enhance staff efficiency and compliance was highlighted.

DEVELOPMENT PLAN

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

<p>Area for Development 1</p> <p>Ref: 5.1</p> <p>To be completed: by 21/01/2025</p>	<p>Registered persons and care/support workers must at all times be compliant with the Capacity and Self Determination (Jersey) Law 2016 and relevant legislation in respect of people's rights, consent and decision making</p>
	<p>Response by registered provider:</p> <p>Further review of care receivers' consent to the care and support they receive in the Day Centre will be undertaken.</p> <p>Further consideration will also be given to how consent is recorded and reviewed, and a local protocol developed.</p> <p>In addition, a training plan has been devised to further enhance staff knowledge and understanding of this legislation.</p>
<p>Area for Development 2</p> <p>Ref: 1.6</p> <p>To be completed: by 21/05/2025</p>	<p>The provider will ensure there will be policies and procedures based on current best practice and evidence which will be available and accessible to people receiving care and others.</p>
	<p>Response by registered provider:</p> <p>The Quality and Safety Team within HCS are currently leading a piece of work to identify corporate</p>

	<p>policies in need of review or removal and that will improve accessibility to the relevant GOJ documents required by the service/care receivers.</p> <p>Any Day Care/Adult Social Care specific policies relating to the Learning Disability Service will be updated and ratified within the Adult Social Care Group and then approved through the usual HCS process as required. The registered manager will ensure that a process is in place to improve access to policies for staff.</p>
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<p>Area for Development 3</p> <p>Ref: 3.11</p> <p>To be completed: by 21/01/2025</p>	<p>The Registered Provider must ensure that the accommodation is well maintained and decorated.</p> <p>A schedule of works to be submitted to the Commission immediately after inspection.</p>
	<p>Response by registered provider:</p> <p>The registered manager will ensure that all Corporate and Government statutory and mandatory training is reviewed and updated within the agreed timeframes.</p> <p>During discussion with the inspector, there is further specific training needs highlighted to meet service delivery requirements. These are being addressed – for example, a plan has been devised to update all staff training around the Capacity and Self Determination (Jersey) Law 2016 on an annual basis.</p>

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