

# **Summary Report**

**Inpatient Unit (IPU)** 

**Care Home Service** 

Jersey Hospice Care
Clarkson House
Mont Cochon
St Helier
JE2 3JB

17, 21 and 23 October 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.

The inspection identified two areas that require improvement. One focuses on ensuring safe recruitment practices, and the second is regarding the safe management of medicines.

A daily 'safety huddle' is held where the team discusses potential safety issues. This meeting is vital for identifying and addressing risks and enhancing care receiver safety and well-being.

The service uses tools like the Integrated Palliative Care Outcome Scale (IPOS) to measure the effects of treatment plans. Safety crosses are used to monitor falls and pressure wounds, promoting prevention and effective management.

The service is committed to reducing falls through proactive risk management, regular assessments, and innovative technologies like sensors, enabling timely interventions. This approach highlights its dedication to care receiver safety and high standards of care.

Recent management changes prompted a review of the IPU environment, leading to improvements that have enhanced the experience for care receivers and their visitors. Communal areas, like the family room, are now more child-friendly, with resources for children available.

The service prioritises personalised care, ensuring comfort and ease for all care receivers. Staff support family visits and, when feasible, facilitate pet visits, recognising the value of these connections in promoting well-being.

The Interim Manager has implemented new governance structures to strengthen oversight and enhance accountability in its operations. These measures are designed to provide additional scrutiny and ensure the effective delivery of services.

# **IMPROVEMENT PLAN**

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

## **Area for Improvement 1**

**Ref:** Standard 3.6,

Appendix 4

# To be completed by:

With immediate effect

DBS checks must be requested for all newly recruited employees to ensure safe recruitment practices.

# **Response of Registered Provider:**

To ensure safe recruitment practices are met, JHC's DBS process and approach was changed with immediate effect post the inspection. DBS checks are therefore now being requested for all new hires, irrespective of the status of any existing DBS certificates still valid with previous employers. In addition, the safer recruitment policy and procedure are being updated to reflect the change in working practice, which will be ratified by JHC's Executive Team.

#### **Area for Improvement 2**

**Ref:** Standard 6.7, Appendix 9

### To be completed by:

Within 6 months of the inspection

The service requires improvements in medication management, including introducing pharmacist reviews, implementing medication audits, allowing care receivers to self-administer medication where appropriate, and establishing a protocol for managing and recording over-the-counter products.

## **Response of Registered Provider:**

The pharmacy resources for Jersey Hospice Care are currently being assessed. This will cover the process by which the pharmacy reviews on IPU will be carried out. Since the inspection, Jersey Hospice Care have been conducting medication audits. An audit plan for 2025 is being reviewed. The implementation of a self-administered medicines protocol will be examined by our medicine safety group for appropriateness within the clinical setting. The Medicines Protocols, which were created for over-the-counter medications, are presently being planned for implementation. This action plan will be monitored by our Medicines Safety Group, which is a component of our governance framework.

The full report can be accessed from <a href="here.">here.</a>