

Summary Report

Strathmore

Care Home Service (Supported Accommodation)

80 Marks Road St Saviour JE2 7LD

Dates of inspection:

11, 12 & 19 November 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.

Staffing in this home remains stable, supported by relief workers and the impending recruitment of a housekeeper. The staff rota provides a positive work/life balance. Comprehensive lone working policies with on-call managerial support ensure safety. Safer recruitment processes align with best practice, and personnel files are well-maintained.

Since the last inspection, no formal resident complaints have been registered, and any resident grievances have been resolved promptly. A complaints policy and suggestions box are accessible to residents. Significant incident reporting mostly met the required Standards; however, this does require better management oversight to ensure compliance.

Medication management includes appropriately trained staff and adherence to best practices, although annual competency assessments require attention and are an area for improvement. Infection control and food hygiene measures are robust. Other safety measures like regular maintenance checks, fire safety management, and CCTV meet standards and enhance resident and staff protection.

Resident referrals are accepted based on comprehensive initial assessments, focusing on risks, needs, and strengths. Resident engagement in the support programme is mandatory. The programme uses evidence-based tools, such as a risk reader and Outcomes Star, to track progress quarterly, help set goals and address the barriers of residents to achieving independent living.

Policies and procedures are regularly reviewed to ensure compliance with laws and the home's Statement of Purpose. Staff training, including a specifically tailored RQF Level 3 Diploma, meets the Standards. Inductions for new care staff follow best practices and this home's policy.

Resident feedback was consistently positive regarding their experience of support in this home. Feedback from care staff was positive and the personal reward this can provide. In addition, feedback from a professional provided assurance of the value of the support the home offers people who access it.

A service development plan and data-sharing initiatives with the Jersey

Homelessness Cluster underscore the home's role in addressing homelessness on
the Island.

IMPROVEMENT PLAN

One area for improvement was identified during this inspection. The table below is the Registered Provider's response to the inspection findings.

Area for Improvement 1

Ref: Standard 6.8, Appendix 9

To be completed by: 3 months from the date of inspection (11 February 2025)

The administration of medicines will be carried out by trained and competent support workers who have completed an Accredited Level 3 Medication

Administration Module (Vocational Qualification).

Systems must be in place to review the competency of support workers in managing medicines at least once a year.

Response of Registered Provider:

With reference to the area for improvement, we have sourced a provider (Government of Jersey) for the Level 3 Medication Administration Module. We await confirmation from the training provider of the next available enrolment dates.

Management observations continue to take place for staff administering medication. In addition, an audit of medication administration takes place twice daily.

The full report can be accessed from here.