

# **Summary Report**

**Clifton Care Home** 

**Care Home Service** 

Bagatelle Lane St Saviour JE2 7TD

23, 24 October and 19 November 2024

# **SUMMARY OF INSPECTION FINDINGS**

There was evidence from the feedback provided by care receivers and relatives of a caring staff team and Registered Manager. Care receivers and relatives expressed high satisfaction with the nursing care provided within the home and with the communication between themselves, the staff, and the Registered Manager.

Care receivers and relatives did, however, comment on the current environment and their disappointment that the refurbishment of the home was not as yet underway.

The environment and fire safety of the home became a focus for the inspection early on, with the regulation officers contacting the Jersey Fire and Rescue Service for advice during the first inspection visit due to the seriousness of some of the concerns. The internal environment displayed wear and tear in some of the care receivers' bedrooms, and the external environment had been neglected, with lack of suitable outdoor space for care receivers and evidence of weeds and clutter. The Commission issued an improvement notice to the provider on the 6 December 2024 to address both of these issues as outlined above.

A core staff team commented that they worked well together and generally felt supported by the Registered Manager. However, there was a lack of evidence of regular supervision per the Standards, and staff were working with outdated policies that needed reviewing. These are both areas for development. In addition, safe recruitment practices were absent in two out of the five files reviewed at inspection, so is also an area for development.

Feedback on training from staff was mixed. The training matrix was reviewed at inspection and further clarity regarding the matrix was sought after inspection. There appeared to be an over dependence on online training and gaps in staff's mandatory training requirements. Therefore, as a result of these findings staff training will be an additional area for development, the Registered Manager was informed of this during the writing of this report. Staff training is highlighted further under the heading of 'Well Led'.

Staff were clear regarding their roles and responsibilities, and the Registered Manager described regularly working on the floor with care staff to ensure adequate oversight of care provision. At the time of the inspection, no one was undertaking monthly quality assurance

reports on behalf of the provider. The last report was carried out in July 2024. Therefore, this will be an area for development, as there is a lack of independent oversight per the Standards.

Overall, there are eight areas for development, including the previous area for improvement regarding staffing levels, which has not been met and the two improvement notices concerning the environment and fire safety of the home.

#### **DEVELOPMENT PLAN**

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

# **Area for Development 1**

**Ref:** Regulation 10 & Regulation 18 (3) (g) (h)

## To be completed:

by 20/01/2025

The Registered Provider must ensure that all works are undertaken as stipulated in the Notice of Requirements issued by the Fire Service under the Fire Precautions (Jersey) Law 1977, within the timescales agreed by the Fire Service. The Registered Provider must complete this action by 20 January 2025.

# Response by registered provider:

A substantial investment has been made towards temporary Fire Improvement Works at Clifton as per the NOR issued by the SOJF&RS.

The progress of the work is monitored by the Fire Officer and is posed to be completed by February end 2025.

A further extensive program of fire safety works at Clifton is incorporated into the refurbishment project.

### **Area for Development 2**

**Ref:** Regulation 18 (1) (a) (b) (c) and (2) (a) (c)

#### To be completed:

by 20/02/2025

The Registered Provider must undertake a programme of repair and maintenance to the area of the home which will remain operational during the planned refurbishment works, to ensure that it meets and maintains the requirements of Regulation 18 and Standard 7 of the Care Home Standards. The Registered Provider must complete this action by 20 February 2025

#### Response by registered provider:

Clifton is committed and focused to proceed with the long overdue complex refurbishment project, however, in the meantime, we can reassure the Commission that the residing areas for the service users have been considerably improved both from fire safety and aesthetics point of view. The works have been undertaken by professionals, and we aim to complete all the works by the end of February 2025.

## **Area for Development 3**

Ref: Standard 3.9

# To be completed:

Within two months from the date of the inspection (19 January 2025) The Registered Provider must ensure that care workers do not work more than 48 hours per week unless under extraordinary circumstances, and on a short term basis.

# Response by registered provider:

We have revisited the off-duty rotas, The Jersey Care Commission Standards for Care Homes (Adults) 2019, Standard 3.9 and the Employment (Jersey) Law 2003, Part 3, Articles 10-15 minimum rest periods. Keeping the regulation / law in mind. The off-duty rota can evidence that all staff have been working within regulations apart from two qualified Senior Staff Nurses who have been covering shifts in the interim due to lack of applications for a position of qualified nurse. We will continue to advertise and hope to appoint a suitable candidate soon. In the meantime, both Nurses are having adequate rest periods. The employer has agreed with the staff concerned to have adequate rest periods as per the law. As mentioned in our response, all staff at Clifton enjoy additional breaks during their shifts due to reduced workload at the care home and do not experience tiredness or fatigue.

#### **Area for Development 4**

Ref: Standard 1.6

#### To be completed:

Within six months from the date of the inspection (19 May 2025)

Policies must be up to date, relevant to local Jersey legislation (law) and guidance.

#### Response by registered provider:

A Jersey based HR professional is reviewing the policies and procedures including the Statement of Employment. They will be introduced upon completion.

In the interim, some of the vital policies have been reviewed and updated by the Head of Home.

# **Area for Development 5**

Ref: Standard 3.14

# To be completed:

Within three months from the date of the inspection (19 February 2025) The Registered Provider must ensure that care workers receive regular opportunities to discuss their roles through formal supervision and appraisal.

## Response by registered provider:

Annual Appraisals completed – 100% aggregate Supervision Session One completed – 100% aggregate

Supervision Sessions Two, Three & Four to be conducted as planned.

# **Area for Development 6**

**Ref:** Standard 3.6 (Appendix 4)

## To be completed:

With immediate effect.

The Registered Provider must ensure that safe recruitment practices in line with the Care Home Standards have been followed for all staff.

#### Response by registered provider:

Clifton strictly abides by the recruitment practices and standards ensuring that references received are from genuine referees including references received from the last employer located anywhere in the world.

DBS is conducted through Ucheck for all new employees and current employees with over three years' service. The recruitment policy has been reviewed.

#### **Area for Development 7**

Ref: Standard 12.2

#### To be completed:

With immediate effect.

The Registered Provider must arrange for a representative to report monthly on the quality of care provided and compliance with registration requirements.

# Response by registered provider:

A Quality Assurance Officer has been appointed who has commenced preparing the monthly quality reports for Clifton.

## **Area for Development 8**

Ref: Standard 3.11, (Appendix 7), 6.2.

## To be completed:

Within six months of the date of the inspection (19 May 2025)

The Registered Provider must ensure that all care/support workers complete and remain up to date with statutory and mandatory training requirements

## Response by registered provider:

Clifton has one Manager with Level 5, four qualified Senior Staff Nurses, one Care Services Lead with Level 3 currently completing Level 5, two Senior Care staff with Level 3, five Healthcare Assistants with Level 2, one healthcare Assistant with BSC in nursing and two staff with Care Certificates enrolled to complete their Level 2.

The current team of staff are experienced and learned to high standards. Mandatory trainings are conducted annually both on-line and face-to-face.

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