



**Jersey Care
Commission**

Summary Report

Glanville Care Home

Care Home

**70-74 St Mark's Road
St Saviour
JE2 7LD**

27 March and 3 April 2025

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.

At the last inspection, one area for development was identified, and the Registered Provider submitted a development plan to the Commission setting out how these areas would be addressed.

The development plan was discussed during this inspection, and it was positive to note that the development had been made. This means that there was evidence of an induction competency assessment tool.

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

Since the last inspection, all employees have completed a staff induction competency checklist regardless of how long they have worked in the home.

The shift rota provides a blend of experienced staff to meet the needs of the care receivers, and two new senior posts have been added to strengthen leadership in the home and provide operational support for staff.

The staff consulted provided positive feedback on the culture in the home and the leadership and shared how they appreciate having time to interact with the care receivers and their representatives.

Safe recruitment practices are an area of good practice, and the staff personnel files were orderly and complete.

There was evidence of risk assessments that had undergone regular review. Care plan reviews had not been conducted as per the internal processes, and by the second day of inspection, the Registered Manager shared a plan for the forthcoming year of dates planned for care plan reviews. Care plan reviews are an area for improvement.

A review of a sample of staff rotas found that staff members are flexible to rota changes and, when required, work an overtime shift. Minimum safe staffing levels are maintained, but staff have exceeded the maximum number of hours the Standards state they can work due to the unforeseen absence of their colleagues and staff recruitment. This is an area for improvement.

Carers and support workers attend a six-hour mandatory care training day, which covers most of the compulsory training required by the Commission. On reviewing the training matrix, it was apparent that staff had not been attending essential safeguarding training. Following the inspection, the Registered Manager will arrange specific safeguarding training. This is an area for improvement.

Feedback was collated as part of the inspection process from care receivers, their representatives, members of staff and professionals external to the service. All the feedback received was complimentary of the home, the care, the staff and the Registered Manager.



A healthcare professional shared:

Staff are wonderful, caring and knowledgeable about their residents.

IMPROVEMENT PLAN

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

<p>Area for Improvement 1</p> <p>Ref: Standard 2.6, Regulation 9 (2) (b)</p> <p>To be completed: by 31 August 2025</p>	<p>Care plans will be reviewed at least every six months and revised as required.</p>
	<p>Response by registered provider:</p> <p>Glanville Care Home wishes to clarify that, at the time of the inspection, all resident care plans were up to date, having undergone a full review in January 2025. We acknowledge that the recommendation made refers to an internal process improvement; however, we would like to emphasize that we are compliant with the Jersey Care Commission standards.</p> <p>Care plans at Glanville are live documents that reflect the current, factual needs of each resident. During the inspection process, it was explained to, and verified by the inspector that any changes arising between formal review dates were appropriately updated within the individual care plan folders, with clear evidence of these updates present.</p> <p>We take our responsibility to maintain accurate, person-centred care documentation seriously, and we remain committed to ongoing internal review processes to ensure we continue to meet and exceed regulatory expectations.</p>

<p>Area for Improvement 2</p> <p>Ref: Standard 4.1, Regulation 11 (1) (d)</p> <p>To be completed: by 31 December 2025</p>	<p>The service must ensure all care/support workers have adequate training in safeguarding so that they will recognise abuse or the risk of abuse and know what to do if they have concerns.</p> <p>Response by registered provider:</p> <p>Glanville acknowledges the Jersey Care Commission's recommendation and safeguarding training will be delivered as a standalone unit. We would like to clarify that, safeguarding content has been incorporated within the broader suite of mandatory training modules delivered by our external training provider, rather than presented as a separate, dedicated course.</p> <p>However, following the Care Commission's guidance during the first inspection visit, we have taken prompt action to address this point. Safeguarding training as a standalone unit has already been booked for all relevant staff, ensuring full alignment with the Commission's expectations.</p> <p>We would also like to emphasise that at no point has this been an area of concern for the operation of the service, as our staff are fully aware of safeguarding procedures, including recognising signs of abuse and knowing how to respond to concerns. This has been consistently reflected in previous inspection outcomes and daily practice.</p>
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<p>Area for Improvement 3</p> <p>Ref: Standard 3.9, Regulation 17 (4) (a)</p>	<p>Care/support workers will not work more than 48 hours per week unless under extraordinary circumstances and on a short-term basis only. A contingency for unforeseen absence is required to ensure that the home is not reliant on staff to work more than 48 hours regularly.</p>
<p>To be completed:</p> <p>by 31 August 2025</p>	<p>Response by registered provider:</p> <p>We acknowledge the observation relating to care staff occasionally working more than 48 hours per week. We would like to reassure that this is not standard practice at Glanville, nor is it indicative of a wider issue. The instances referenced were the result of isolated and exceptional circumstances, each arising unexpectedly and at different times. While these situations may have appeared continuous, in reality, they were separate and individually managed.</p> <p>These occurrences were directly linked to recruitment delays, particularly due to the time required to complete thorough and safe recruitment processes, which we remain committed to upholding. In each case, interim measures were taken to ensure that the quality of care remained unaffected, and staffing levels remained safe.</p> <p>It is important to note that staff members who covered these additional shifts did so voluntarily through an internal system that allows individuals to opt in for extra duties based on their availability and willingness. This approach ensures that no undue pressure is placed on staff, and any additional hours are agreed upon transparently.</p>

	<p>Furthermore, the inspection report clearly highlights that staff remain very happy in their roles, with no concerns raised in relation to the additional hours worked. Staff also benefit from above-minimum rest breaks, and their morale and commitment were evident throughout the inspection process. In fact, residents themselves expressed appreciation for the consistency and continuity of care, which is recognised as one of Glanville's key strengths.</p> <p>We continue to closely monitor working hours and staffing levels, and we are actively improving our recruitment strategies and contingency planning to prevent similar situations from arising in the future. We remain fully committed to meeting and maintaining JCC standards, while prioritising staff well-being and the high-quality, consistent care our residents value.</p>
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The full report can be accessed from [here](#).