



**Jersey Care  
Commission**

## **Summary Report**

**Rosevale**

**Care Home**

**Les Amis Limited  
La Grande Route de St Martin  
St Saviour  
JE2 7GS**

**Inspection Dates  
16 and 23 April 2025**

**Date Published  
29 May 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.

There was evidence of an experienced and dedicated core staff team led by the Registered Manager and Team Leader. The Registered Manager fostered and supported staff members' development within the team and throughout the organisation.

Safe practices were demonstrated regarding recruiting and induction of new staff within the service. Staff also expressed satisfaction with their training, supervision, and appraisal arrangements.

The home environment was homely and welcoming, but wear and tear was evident internally and externally. The front garden was overgrown, and the side garden was currently out of use due to wall repairs, although this was nearing completion. This is an area for improvement. Internal and external maintenance must be undertaken, and the garden must be made into a welcoming, accessible space for care receivers.

Feedback from health professionals confirmed a proactive approach to promoting the health and well-being of care receivers. The care plans further evidenced this, reflecting a strong commitment to person-centred care. Care receivers appeared relaxed and happy within the home and provided positive feedback regarding their experiences. However, staff did highlight some discord between care receivers currently and this was being kept under review.

Extensive work had been undertaken with care receivers around advance care planning and end-of-life care. The Registered Manager played a key role in developing this training within the organisation and provided a recent example where these plans proved invaluable. This represents an example of good practice.

There was clear evidence of quality oversight of the home, both through internal processes and external reviews. The Team Leader and Registered Manager expressed that they valued this external oversight as a means of continuous improvement. Comprehensive policies and procedures were in place to support

staff, who were able to provide recent examples of instances where they had referred to these policies and explained their relevance. All staff demonstrated a clear understanding of their roles and responsibilities.

## IMPROVEMENT PLAN

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

<p><b>Area for Improvement 1</b></p> <p><b>Ref:</b> Standard 7.1, Regulation 18 (2)</p> <p><b>To be completed:</b> by 16 October 2025</p>	<p>The Registered Provider must ensure that the accommodation is well maintained and decorated, and the garden space is well kept, safe and secure.</p> <hr/> <p><b>Response by the Registered Provider:</b></p> <p><b>Cracked paint work around the front door and damp on the ceiling - maintenance have completed work on the ceiling, the Cracked paint around the door frame has been reported and is on the maintenance list and will be rectified ASAP.</b></p> <p><b>Upstairs main bathroom, damp on the ceiling – reported to maintenance to investigate this further and repair.</b></p> <p><b>Garden- overgrown, the maintenance has mowed the lawn, request put in for maintenance to tidy up the overgrown plants weeds at the front and side of the house</b></p> <p><b>Window ledges all around the house- Landlords are in the process of dealing with this.</b></p> <p><b>Landlords are still working on the wall in the back garden, this is checked regularly by the landlord and should be completed in a couple of weeks.</b></p> <p><b>Safe space been allocated in the Garden for the service users to use while work is being completed</b></p>
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The full report can be accessed from [here](#).