



**Jersey Care  
Commission**

## **Summary Report**

**Silkworth Lodge**

**Care Home Service**

**6 Vauxhall Street  
St Helier  
JE2 4TJ**

**Inspection Dates  
25 April & 7 May 2025**

**Date Published  
3 June 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.

The findings from this inspection show that the home provides a safe and quality service to clients through its registration conditions and Statement of Purpose. The service has many strengths, and feedback from clients was overwhelmingly positive about the support they received. They felt the service was excellent and recognised the staff as kind, caring, and compassionate. They described feeling fully involved in the treatment programme. The findings show that the service is operating safely.

There is a thorough assessment process providing clients with enough information to make informed decisions about admission into the home. Risk management is considered part of the admission process, and staff work with clients to develop individual care plans, which were noted to be holistic, personalised and recovery focused. Throughout the programme, clients are encouraged and supported to lead healthier lifestyles, emphasising exercise, nutrition, peer support and education around addiction.

The service also maintains close working relationships with relevant health services and external partner agencies. Those agencies spoke highly of the service, emphasising positive relationships, professionalism, frequent and open communication, and a flexible approach to problem-solving. They described the home as transparent in its approach. One professional described the service as “*the Gold Standard*”.

Staff are recruited safely in line with the Standards and provided with supervision and training relevant to service needs. Robust governance processes are in place, with the Registered Manager visible and accessible. Additionally, the provider representative maintains close links with the home, visiting regularly to engage and meet with clients. The home environment is well maintained, pleasantly furnished and decorated; clients and others described it as warm in its feel and welcome.

One area for improvement resulting from this inspection is developing the induction records to fully meet the Standards, specifically evidencing that staff can work without direct supervision. Despite this, staff were passionate and enthusiastic and described the home as an open, supportive, and positive work environment with low staff turnover.

## 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.

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| <p><b>Area for Improvement 1</b></p> <p><b>Ref:</b> Standard 3.10<br/>Regulation 17 (4)</p> <p><b>To be completed:</b><br/>by 7 August 2025</p> | <p>The registered provider must demonstrate that care workers complete a structured induction programme, which will assess their competence to work without direct supervision.</p> <hr/> <p><b>Response by the Registered Provider:</b></p> <p><b>All employees undergo an induction programme which is specific to the type of role that they carry out, however it is accepted that this process was not a documented process. In order for best practice and to ensure continuity in how this is done, the process has been clearly documented now and will be used for any new future member of the team taking up position. This documented process has been communicated and takes immediate effect.</b></p> |
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The full report can be accessed from [here](#).