

## **Summary Report**

**Rosemary Cottage** 

**Care Home Service** 

La Rue De La Vallee St Mary JE3 3DL

Inspection Date 14 July 2025

Date Published 19 August 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 Regulation Officer conducted a thorough review of Rosemary Cottage's recruitment, onboarding, care provision, and governance practices. A recent staff recruitment followed the organisation's updated recruitment policy, including detailed applications, structured interviews, and full pre-employment checks.

Staffing is stable, with low turnover—only one new hire in three years. The home employs seven full-time and three bank staff, supported by a detailed training matrix. All staff have completed a wide range of mandatory and specialist training, with over 70% qualified at RQF Level 2 or higher in health and social care. Medication is securely stored, and only RQF Level 3-trained staff administer it. Monthly audits ensure compliance with care standards, including medication safety.

The service provides effective and responsive care, with strong communication through staff handovers, quarterly meetings, and regular supervisions. Care receivers and their families participate in planning and feedback, with recent satisfaction surveys showing overwhelmingly positive results. Staff and care receivers describe the environment as supportive and homely. Family members praised the quality of care, the compassion of the staff, and the range of activities available.

Governance is robust, with monthly reports, incident tracking, and clear risk assessments. The service complies with relevant laws, including the Capacity and Self-Determination Law, and has made appropriate safeguarding referrals. No complaints have been recorded since the last inspection.

The Regulation Officer found Rosemary Cottage to be a well-led, caring, and effective service that offers personalised, flexible support. The management team demonstrates strong leadership, and the culture of openness and continuous improvement contributes significantly to positive outcomes for care receivers.

## **IMPROVEMENT PLAN**

There were no areas for improvement identified during this inspection and an improvement plan is not required.

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