Jersey Care Commission

Summary Report

Camelot

Care Home

3 Waverley Terrace
St Saviour's Road
St Saviour
JE2 7LA

Inspection Date
19 November 2025

Date Published
12 December 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 are consistent with those identified previously and clearly evidence that the home continues to meet all regulatory requirements. The home's philosophy and stated aims are strongly embedded in daily practice, reflecting a strong commitment to supporting residents in their personal recovery journey while living with mental illness.

It was evident that residents are encouraged to be as independent as possible and to take as much control of their lives as possible. They engage in activities that are meaningful to them, are involved in decision-making, and receive support that helps build their confidence and independence. The staff team consistently focuses on residents' strengths and builds on their abilities, reinforcing that recovery and improvement are achievable.

The leadership in the home is strong, with a knowledgeable and skilful staff team who understand and recognise when residents may be experiencing symptoms associated with their mental illness and know when to seek professional guidance.

Feedback from residents, external health professionals, and family members was extremely complimentary of the way in which the home is managed, highlighting a caring culture and the positive impact this has on residents' wellbeing. The home provides a safe and supportive environment to enable residents to progress in their recovery.

The standards relating to care planning arrangements, risk management, governance, safe recruitment, training, supervision and staffing arrangements are all met. Medication was administered safely and effectively.

One area for improvement was identified relating to ensuring the annual competency checks for staff who administer medication are consistently recorded.

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.

Area for Improvement 1 **Ref:** Standard 6 Appendix 9 Regulation 14 **To be completed:** by 19/02/2026	The provider must ensure that staff who administer medications are assessed as competent on at least an annual basis.
	Response by the Registered Provider: Steps in place for biannual assessment of medication competency. The form we are now using is attached.

The full report can be accessed from here.