



**Jersey Care
Commission**

INSPECTION REPORT

Glanville Care Home

Care Home Service

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

**Inspection Dates
18 and 19 May 2026**

**Date Published
22 June 2026**

1. THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014 ('the Law'), all services carrying out any regulated activity must be registered with the Jersey Care Commission ('the Commission').

This inspection was carried out in accordance with Regulation 80 of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 to monitor compliance with the Law and Regulations, to review and evaluate the effectiveness of the regulated activity and to encourage improvement.

2. ABOUT THE SERVICE

This is a report of the inspection of Glanville Care Home. The care home service is operated by Glanville Home for 'Infirm and Aged Women' and there is a registered manager.

Registration Details	Detail
Type of regulated activity	Care Home Service
Mandatory Conditions of Registration	
Category of care	Adult 60+
Maximum number of care receivers	25
Age range of care receivers	60 years and above
Maximum number of care receivers that can be accommodated in each room	Rooms 3-8 1 person Rooms 10-12 1 person Rooms 14-25 1 person Rooms 27-30 1 person
Discretionary Conditions of Registration	
Bedrooms 17 and 18 (have a sink and no toilet) are to be used to provide respite care only to ambulant care receivers.	
Additional information	
An up-to-date statement of purpose was provided for this inspection, and no revisions were required.	

As part of the inspection process, the Regulation Officer evaluated the home's compliance with the mandatory conditions of registration and current discretionary condition required under the Law. The Regulation Officer concluded that all requirements have been met.

3. ABOUT THE INSPECTION

3.1 Inspection Details

This inspection was announced and notice of the inspection visit was given to the Registered Manager four days prior to the first inspection visit. This was to ensure that the Registered Manager would be available during the visit.

The Registered Manager and staff team refer to individuals receiving care as residents. For consistency, this report will adopt the same terminology and refer to care receivers as residents.

Inspection information	Detail
Dates and times of this inspection	18 May 2026 09:00 – 17:30 19 May 2026 13:10 – 17:05
Number of areas for improvement from this inspection	None
Number of care receivers accommodated on the day of the inspection	25
Date of previous inspection	27 March and 3 April 2025
Areas for improvement noted at the last inspection	Three
Link to the previous inspection report	RPT GRH Inspection 20250403.pdf

3.2 Focus for this inspection

This inspection included a focus on the areas for improvement identified at the previous inspection, as well as these specific lines of enquiry:

- **Is the service safe**
- **Is the service effective and responsive**
- **Is the service caring**
- **Is the service well-led**

4. SUMMARY OF INSPECTION FINDINGS

4.1 Progress against areas for improvement identified at the last inspection

At the last inspection, three areas for improvement were identified, and an improvement plan was submitted to the Commission by the Registered Provider, setting out how these areas would be addressed.

The improvement plan was discussed during this inspection, and it was positive to note that all improvements had been made. This means that there was evidence of:

- Care plans are reviewed at least every six months, or sooner if required, with all review opportunities clearly documented.
- Safeguarding training has been delivered to the staff team as a standalone unit and is compliant with relevant standards.
- Care and support staff are not working more than 48 hours per week unless in exceptional circumstances. To maintain appropriate staffing levels, an additional bank staff member or the Deputy Manager is deployed to cover unforeseen absences, annual leave, or when increased support is required.

4.2 Observations and overall findings from this inspection

The service promotes residents' social well-being by understanding their interests and relationships and encouraging meaningful activities and connections both within the home and the community.

The management team and staff deliver excellent person-centred care, building strong relationships with residents and their families to understand individual preferences and needs. This ensures residents feel happy and supported, with staff kept informed of daily changes through effective handovers.

Staff training meets required standards, with the management team carefully selecting good-quality training providers. The Registered Manager is currently reviewing providers to ensure training remains both effective and accessible for staff.

Staffing levels are appropriate, supported by bank staff when needed, with clear roles and requirements set out in a staffing policy.

The Registered Manager has identified the need to update policies and engaged an external consultant; current sampled policies were found to be comprehensive and aligned with legislation.

The care home follows safe recruitment practices, including Disclosure and Barring Service (DBS) checks and references prior to employment, with a six-month probation period to support staff induction, training, and suitability for the role.

The service provides a structured induction programme, including shadowing, training, and competency-based assessment to ensure staff can perform their role effectively.

The home offers a bright and welcoming environment that provides comfortable communal spaces for socialising, a light and airy dining space, and lots of outdoor private space for enjoying the open air.

The home maintains strong health and safety standards, with effective systems in place for safety procedures and cleanliness. A dedicated housekeeping and domestic team help ensure the environment remains safe, tidy, and well-organised.

Regular audits are conducted across key areas, such as medication, care records, and equipment, to maintain standards and identify improvements.

5. INSPECTION PROCESS

5.1 How the inspection was undertaken

The Care and Support Services with Accommodation Standards were referenced throughout the inspection.¹

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection report, the Statement of Purpose, notification of incidents, training matrix, and policies.

The Regulation Officer gathered feedback from four care receivers and five of their representatives. They also had discussions with the service's management and received feedback from staff members. Additionally, feedback was provided by five professionals external to the service.

As part of the inspection process, documents including policies, care records, incidents and complaints were examined.

At the conclusion of the inspection visit, the Regulation Officer provided verbal feedback to the Registered Manager which was followed up by email on 26 May 2026.

¹ All Care Standards can be accessed on the Commission's website at <https://carecommission.je/>

This report presents our findings from the inspection and outlines the range of observations made. Throughout the report, we may highlight any areas of good practice identified, along with suggestions where practice could be strengthened or further enhanced.

5.2 Sources of evidence.

Follow up on previous areas for improvement	
Focus	Evidence Reviewed
Care plan reviews at least very six months	Review of care plans, date of review clearly documented.
Standalone training in safeguarding	Training matrix Feedback
Staff will not work more than 48 hrs per week	Duty rotas Feedback
Key lines of enquiry	
Focus	Evidence Reviewed
Is the service safe	Employee files Recruitment policy Competency Induction booklet Training matrix Supervision matrix Risk assessments Feedback Medication administration policy Staffing policy Staff rotas Medication practices
Is the service effective and responsive	Risk assessments Feedback Written agreements (Residents) Complaints, suggestions and compliments policy Resident surveys Staff training matrix Audits Care records Staff handbook
Is the service caring	Resident's welcome booklet Observations of staff with residents Feedback from care receivers, relatives and professionals Initial assessments Supervision matrix Personalised care plans

Is the service well-led	Feedback from staff, residents, relatives, and professionals Staff rotas Policies and procedures Staff retention Organisation structure Monthly reports Supervision and training matrix's
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6. INSPECTION FINDINGS

Is the service safe?

People are protected from abuse and avoidable harm.

The care home ensures that staff training consistently meets required standards, supporting the delivery of safe and effective care. The management team demonstrates a proactive and diligent approach in sourcing high-quality training providers, with a strong emphasis on face-to-face learning to enhance staff engagement and understanding. The Registered Manager highlighted that they are currently reviewing the training providers in use to ensure that both quality and accessibility are maintained, enabling staff to receive convenient, relevant, and up-to-date training that supports their roles effectively.

The home follows safe recruitment practices in line with regulatory standards and its own recruitment policy. All new recruits are subject to appropriate pre-employment checks, including DBS clearance and satisfactory references, prior to commencing employment. A six-month probationary period is in place, during which staff receive induction and training, allowing both the employee and the service to ensure suitability and satisfaction.

Health and safety practices within the home are upheld to a high standard, with effective fire safety procedures, Control of Substances Hazardous to Health (COSHH) management, and regular cleaning schedules in place and actively maintained. A dedicated domestic team, including a housekeeper, ensures the smooth day-to-day running of the environment, contributing to a safe, clean, and well-organised home.

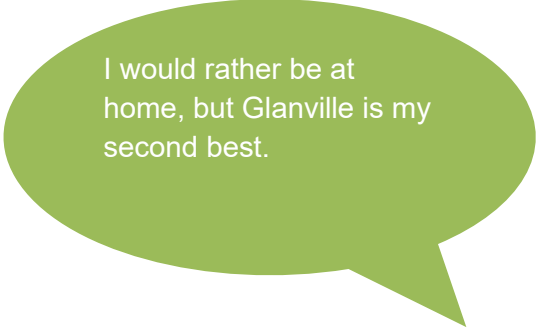
Medication practices were reviewed and found to align with required standards, including safe storage, administration, record-keeping, incident reporting, and auditing. Staff administering medication are trained to Regulated Qualifications Framework (RQF) Level 3, with annual competency assessments in place.

Individualised risk assessments are developed for each resident, taking into account their specific needs and circumstances. These include areas such as mobility, transportation, falls prevention, medication, skin integrity, and personal safety. Risk assessments are regularly reviewed and updated to reflect any changes, ensuring that care remains safe while promoting independence and wellbeing.

Is the service effective and responsive?

Care, treatment, and support achieves good outcomes, promotes a good quality of life and is based on the best available evidence.

The service demonstrates a strong commitment to supporting residents' social wellbeing. Staff show a clear understanding of each individual's interests, hobbies, and personal relationships, including connections with relatives and community groups. The home actively encourages and facilitates a range of social activities both within and outside of the home, helping residents to remain engaged, maintain meaningful connections, and enjoy a fulfilling lifestyle.



I would rather be at home, but Glanville is my second best.

While a few expressed a preference to live in their own homes, they acknowledged that this may not be the safest option and recognised the home as a suitable alternative. The Registered Manager explained that residents are supported to maintain their usual routines wherever possible, with staff accommodating individual preferences, such as flexible mealtimes outside of the standard daily arrangement.

The service delivers a structured induction programme for all new care staff, incorporating shadowing of experienced colleagues, mandatory training, and practical guidance on key aspects of the role. Staff are supported to develop their skills and confidence through supervised practice, with competencies assessed to ensure they can carry out their duties safely and effectively.

Staff receive quarterly supervision, which is documented and stored in individual staff files, with evidence reviewed by the Regulation Officer. A supervision matrix is maintained to ensure records remain up to date and easily accessible. Annual appraisals are also conducted, covering performance, achievements, training, and future goals.

The management team actively promotes awareness of Pension Credit and supports residents to undergo means testing to determine their eligibility. This ensures that those who qualify can access additional benefits, including free essential healthcare services such as dental, optical, and chiropody treatments. This proactive approach helps maximise residents' entitlements and supports their overall wellbeing.

The home provides a welcoming and well laid out environment that enhances daily living, including activities and mealtimes. The dining room is light and inviting, with a dedicated kitchen team preparing fresh meals daily, offering choices and accommodating individual preferences. It was particularly positive to observe a resident celebrating their birthday with a homemade cake prepared by the kitchen staff, a gesture extended to all residents. In addition, several communal living areas on the ground floor offer comfortable spaces for activities, socialising, and shared entertainment.

Is the service caring?

Care is respectful, compassionate, and dignified. Care meets people's unique needs.

Staff skills within the home are well supported and developed. New staff without prior care experience are mentored and encouraged to complete a Level 2 Regulated Qualifications Framework (RQF), and the majority of the team are trained to Level 2 or 3. The Registered Manager and Deputy Manager hold Level 5 qualifications, providing strong leadership and expertise within the service.

The home supports several residents living with dementia and is committed to promoting their independence while ensuring safety, dignity, and privacy. Drawing on specialist dementia training, staff make efforts to understand each resident's routines, preferences, and dislikes, enabling them to maintain a sense of normality and continue with familiar daily activities as much as possible.

The Registered Manager and staff team demonstrate excellence in recognising and responding to the individual needs of each resident. This is achieved through building strong relationships with residents and their relatives, allowing staff to understand personal preferences, interests, social and religious needs, and what promotes each individual's wellbeing. Care is highly person-centred, with a clear focus on ensuring residents feel happy, relaxed, and content.

Effective shift handovers involving all care staff ensure that any updates or events are consistently communicated across the team on a daily basis. This is an area of good practice.

Rotas demonstrate that staffing levels are sufficient to meet the needs of residents, with contingency arrangements in place, including support from the Deputy Manager and bank staff to cover unforeseen absences. Outside of regular hours, members of the senior management team are on call to provide additional support to night staff if required.

Initial health assessments are completed by the Registered Manager or Deputy Manager, with care plans written in a personalised, first-person format to reflect the individual's voice. Care plans are developed collaboratively with residents and are regularly reviewed to ensure they remain accurate and responsive to any changes in care needs.

The home manages residents' finances with care, using a purchase card system rather than personal bank cards, and providing clear receipts and monthly invoices if any of the residents' request staff members to purchase anything for them. This ensures transparency, accountability, and peace of mind for residents and their families.

The care home supports students from the local college by offering placement opportunities as part of their courses. This demonstrates a strong commitment to the local community, valuing the contribution of students while helping to develop the skills and experience of future care professionals.



A professional fed back:

The home is always welcoming, and the staff are always kind and understanding with our students.

Is the service well led?

The leadership, management and governance of the organisation assures delivery of high-quality care, supports learning and innovation, and promotes an open and fair culture.

The management team and staff maintain positive relationships with residents. As this is a small home, the team know the residents and their family members well. Residents feel comfortable approaching managers to provide feedback, supported by an accessible management office and an open-door policy. This was evident during the inspection, where the Regulation Officer observed relatives and residents freely visiting the office. Staff are proactive in responding to any changes in a resident's presentation, engaging with the individual and their next of kin and working collaboratively to address any concerns.

There are regular audit programmes in place to evaluate performance across key areas of the home, including medication practices, care records, and equipment, helping to ensure consistent standards and identify any areas for improvement.

The home's equality, diversity, and discrimination policy was comprehensive and clearly outlined a supportive approach. The Registered Manager also promotes an open-door culture, encouraging staff to feel safe and supported in raising any concerns about discrimination.

Staffing levels were appropriate, as evidenced by the duty rotas, with additional support provided by bank staff. The home also maintains a Staffing- Minimum Requirements policy, clearly outlining staff roles, required staffing levels to ensure safe and effective care delivery, and the qualifications of the staff needed for each shift.

The Registered Manager has identified that the current suite of policies requires a comprehensive review and update. To address this, an external consultant has been engaged to support the review and revision process, ensuring all policies are current and aligned with relevant standards.

A sample of existing policies was reviewed and found to be comprehensive, user-friendly, and reflective of appropriate legislation.

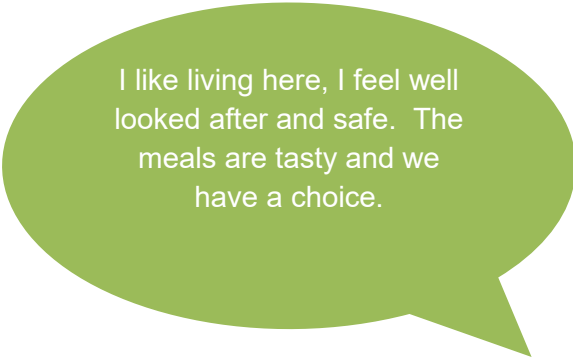
The home offers a two-week respite service, subject to availability, allowing prospective residents to experience living in the home before making a long-term commitment.

Annual surveys are completed by residents and their families, with responses reviewed by the management team to identify themes and areas for improvement. Any resulting changes are communicated through 'You said, we did' updates to keep residents and relatives informed.


What residents said:



I love living here, the staff are very kind and thoughtful. I like the food and enjoy the different crafts that we do.



I like living here, I feel well looked after and safe. The meals are tasty and we have a choice.



I am happy at Glanville, the carers are lovely to us, and we are well looked after.

Feedback from staff members:

I recommend the place that I work its very good. Anything that we worry about we always have the manager or assistant manager to help us.

Care plans, risk assessments and resident information are accessible and updated regularly, helping staff provide person centred care.

I feel valued and treated fairly.

What relatives said:

Xxx stated that it is the best home in the world. If I need a care home in the future, this is where I would want to be.

The staff hold my Xxx hand at bedtime, they kiss her goodnight, tell her she is safe and wish her a good night. It is not just personal care and support it is emotional care that they are best at.

The communication with the staff team is good, the managers are excellent at getting in touch if I need to be made aware of changes or if there are any updates to care plans.

Nothing is too much trouble for the staff, Xxx stayed until 08.30pm one evening to collect my Xxx from the hospital rather than have her waiting for transport, they are so thoughtful.


My Xxx calls Glanville home which is remarkable for her because she lived alone for so long and wanted to maintain her independence.

I have never had to complain about anything the management team are very accessible and transparent, a true open-door policy. It is easy to just have a chat if I feel unsatisfied about something.

Some professional's views:



I have received very good feedback from my patients regarding their care and treatment they receive in the care home. They feel they are being looked after very well. The carers are very attentive.



The resident has spoken very positively about the home manager. It is clear that the manager shows genuine compassion and care towards residents, which is commendable.



I find the staff team including the manager Xxx and deputy Xxx extremely professional. Xxx is amazing, her decisions for the residents are always person centred, it is about the residents, and the staff follow Xxx lead.

IMPROVEMENT PLAN

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

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of the Care Commission during the course of this inspection. The findings contained within this report do not exempt the service from their responsibility for maintaining compliance with legislation, Standards and best practice.



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