Jersey Care Commission

# Summary Report

## 102 HCS Care Home

## Care Home Service

## The Office of the Minister of Health
## Government of Jersey
## Union Street
## St Helier
## JE2 3DN

## Inspection Date
## 8 July 2026

## 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 inspection found this to be a well-led home with a supported staff team. The governance and management structure reflects the size and complexity of the home, and there are clear lines of accountability from care staff to senior staff in the wider Learning Disability Team. There was a system in place to report monthly on the quality of care provided and there was evidence of a learning culture.

Care and support in the home, and activities outside the home, were meticulously planned and undertaken to meet the care receiver's needs and holistically enhance their quality of life. Staff demonstrated an in-depth knowledge of the care receiver's needs and had a compassionate and professional approach. Food and activity choices were provided that fitted with their documented likes and dislikes and were presented to meet their communication style.

The Regulation Officer received positive feedback from the care receiver's representative and two professionals external to the home. The professionals praised staff's effective and responsive practices and their empathic and compassionate approach.

There were sufficient appropriately qualified, trained, and supported staff available to meet the care receivers' needs safely and effectively. There were human resource policies in place to support safe recruitment, and fire safety practices were evident.

The requirement for a written agreement remains an area for improvement.

## 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**<br><br>**Ref:** Standard 2.3, Regulation 8<br><br>**To be completed:** by 08/10/2026 | The Registered Provider will ensure there is a written agreement which states how the service will be provided to meet the needs of the person receiving care. |
| | **Response by the Registered Provider:**<br><br>The Registered Provider will introduce a clear written agreement outlining how the service will meet each person's assessed needs. The agreement records care arrangements, capacity and best-interest considerations, involvement of relatives or representatives, funding arrangements, review processes, and the provision of key information about the service. It also includes a dedicated compliance section to evidence that individuals and/or their representatives have received information in an accessible format and understand the care being provided. |

To ensure there is clear evidence that the required improvement has been made, the Provider must submit written confirmation to the Commission when the areas of improvement have been achieved.

This action will be used to confirm completion and provide assurance that the necessary improvements have been achieved.

The full report can be accessed from here.