Jersey Care Commission

Summary Report

Lakeside Manor Care Home

Care Home Service

La Rue de la Commune
St Peter
JE3 7BN

Inspection Dates
6, 8 and 9 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.

4.1 Progress against areas for improvement identified at the last inspection

At the last inspection, no areas for improvement were identified.

4.2 Observations and overall findings from this inspection

The staff team adopts a whole-home approach to care, working across different areas of the home to ensure all care receivers are well known to them. Although staff are allocated specific floors during each shift, they regularly support care receivers throughout the home, promoting positive relationships and enabling the delivery of consistent, person-centred care.

The Registered Manager conducts unannounced night-time spot checks, verified by staff, to monitor care standards and ensure effective oversight of the home. This was identified as an area of good practice.

The management team completes regular audits, including reviews of nutrition and dining experiences, to ensure residents' dietary needs, preferences, and requirements are effectively identified and communicated to staff.

Staff receive ongoing training to ensure they have the skills and knowledge to meet care receivers' needs safely and effectively. Mandatory training is completed during induction and refreshed regularly in line with organisational requirements.

Nutrition and hydration are actively promoted throughout the home, with care receivers having access to a range of refreshments, including popular homemade fruit smoothies. The kitchen has also maintained a five-star Eat Safe rating, demonstrating high standards of food hygiene and safety.

The home recognises falls as a key risk for care receivers living with a cognitive impairment and has measures in place to reduce and monitor this risk. Following any fall, a 48-hour review is completed, appropriate referrals are considered, and preventative measures such as sensor mats and movement alerts are used to support care receivers at higher risk of falling.

Due to a significant number of care receivers' lacking capacity to provide meaningful feedback to the home, this is often obtained through family members and representatives. The home supports engagement through quarterly residents' and relatives' meetings and encourages families to take an active role in the home by attending events and entertainment activities.

The home's medication management systems were found to be well organised and in line with expected standards. The Regulation Officer verified that the two actions identified during the Pharmacist Inspector's focused inspection in March 2026 had been successfully addressed, with appropriate arrangements in place for the safe storage, administration, recording, and ordering of medicines.

The organisation has effective systems for reporting, reviewing, and analysing accidents, incidents, and near misses. Records demonstrated that incidents were appropriately managed, trends were monitored to support learning and improvement, and all notifiable events had been reported to the Commission in line with regulatory requirements.

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 here.