



**Jersey Care
Commission**

FOCUSED INSPECTION REPORT

Beaumont Villa

Care Home Service

**Rue de Craslin
St Peter
JE3 7HQ**

**Inspection Date
11 August 2026**

**Date Published
24 September 2026**

1. THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014, 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 (as amended) 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 focused inspection of Beaumont Villa. The care home is operated by Care UK Care Services Limited and Aria Healthcare Group Ltd and there is an interim manager in place.

Registration Details	Detail
Regulated Activity	Care Home Service
Mandatory Conditions of Registration	
Category of care	Dementia Care
Maximum number of care receivers	24
Age range of care receivers	60 years and above
Maximum number of care receivers that can be accommodated in each room	Rooms 1-24 one person
Discretionary Conditions of Registration	
Admissions to the home will be phased and contingent upon staffing levels meeting the minimum requirements set by the care home (adults) Standards at all times.	
Additional information	
The Commission received a new Registered Manager application on 13 March 2026. This application has not been completed yet as essential documents have not yet been submitted to the Commission.	

3. ABOUT THE INSPECTION

3.1 Inspection Details

This inspection was unannounced and two regulation officers were present.

Inspection information	Detail
Date and time of this inspection	11 August 2026 5.58am – 8.45am
Number of areas for improvement from this inspection	Two
Number of care receivers accommodated on day of the inspection	14
Date of previous inspection: Areas for improvement noted in 2026 Link to previous inspection report	22, 23 April and 1 May 2026 Five RPT BV Inspection 2026050.pdf

3.2 Focus for this inspection

This focused inspection was undertaken in response to information shared with the Commission about practices within the home which did not support the principles of person-centred care.

In line with its responsibilities under the Regulation of Care (Jersey) Law 2014, the Commission carried out the inspection to assess current practice, particularly relating to personal choices and preferences of care receivers during their daily routines.

4. SUMMARY OF INSPECTION FINDINGS

4.1 Areas for improvement identified at the last inspection

At the last inspection undertaken on 22, 23 April and 1 May 2026, four 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 within the timescales set out in the report. The areas for improvement were:

- The Registered Provider must undertake a full review of all policies and procedures to ensure that they are Jersey specific in terms of legislation references, Jersey best practice procedures and the requirements of the Commission.
- The Registered Provider will facilitate a programme of activities, which will provide positive and meaningful outcomes for people, based on their personal interests, needs and preferences.
- The Registered Provider must have vehicles of a sufficient size, fit for purpose, safe and suitable to accommodate care receivers for regular outings and engagement in the community.
- The Registered Provider must ensure the accommodation is designed to meet the needs of care receivers with dementia.

To support assurance that the required improvements have been completed, the following action was agreed:

- The Registered Provider will provide written confirmation to the Commission once the areas of improvement have been achieved. This confirmation should be submitted by 25 September 2026.

4.2 Observations and overall findings from this inspection

The Commission undertook this focused inspection to assess practices relating to person centred care.

The evidence viewed and collected during the inspection demonstrated that care receivers' preferences were not clearly identified or being met, and the environment was not adequately secured.

The Regulation Officers identified two breaches of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 ("the Regulations") which are discussed in detail within the inspection findings of this report.

5. INSPECTION PROCESS

5.1 How the inspection was undertaken

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

As part of the inspection process, care plans were viewed and practice was observed. Regulation officers spoke with care staff on duty.

The Interim Manager arrived during the inspection and was advised of the purpose of the visit. An email was then sent on 12 August 2026 advising that the inspection findings had identified two further areas for improvement.

5.2 Sources of evidence.

Focus	Evidence Reviewed
Person centred care	Review of care records Observations made by Regulation Officers
Expectations of night duty	Feedback from staff

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

6. INSPECTION FINDINGS

Two regulation officers conducted an unannounced inspection of the service out of hours.

On arrival, the main entrance door was ajar. The regulation officers were able to enter the building and access communal areas without being challenged. This was discussed with the staff on duty at the time and was identified as an area for improvement. This constitutes non-compliance with Standard 8.9, Regulations 18 of the Regulations.

The regulation officers observed that the main lights were on before 6:00am. At that time, staff were supporting care receivers with morning personal care, including showering and making beds.

Care staff told the regulation officers that the main lights are usually switched on between 5:00am and 5:30am. They explained that this was part of the morning routine to support care receivers

Of the 14 care receivers living at the home, five had been assisted to get up, showered and dressed before 6:15am. A further two care receivers were observed asleep in chairs wearing nightwear. While it is recognised that some care receivers may naturally wake early, there was no evidence within the care plans to demonstrate that these practices reflected their individual preferences, assessed needs or usual routines. Additionally, the regulation officers noted that each care receiver had a 'Plan of Care Day' detailing the tasks to be completed each day. Recorded showering times were noted to start from 4:45 am. This constitutes non-compliance with Standard 3.4, Regulation 8 of the Regulations.

Staff were asked whether there was an expectation from the incoming shift that a set number of care receivers should be up, showered and dressed before handover. Staff told the regulation officers that there was no such expectation.

It was observed that care receivers who had been assisted to get up were offered hot drinks and biscuits. However, breakfast was not served until approximately two and a half hours later, resulting in an extended period between rising and receiving a

substantial meal. There was no evidence within the care plans to show that this practice reflected their individual preferences or usual routines.

The inspection concluded that immediate improvement is required to ensure care is consistently delivered in a way that upholds care receivers' dignity, choice, individual wellbeing and safety.

The unsecured entrance door observed during the inspection also confirmed the need for the Registered Provider to strengthen security arrangements to prevent unauthorised access to the accommodation.

IMPROVEMENT PLAN

There were two areas for improvement identified during this inspection

Area for Improvement 1	The Registered Provider will ensure the security of the accommodation from access by unauthorised persons.
Ref: Standard 8.9 Regulation 18	Response by Registered Provider:
To be completed: With immediate effect	The Commission did not receive a response from the Provider to these areas for improvement within the 28-day timeframe.

Area for Improvement 2	The Registered Provider must ensure care receivers receive person centred care, and have a personal plan based upon their goals, aims and preferences.
Ref: Standard 3.4, Regulation 8	Response by Registered Provider:
To be completed: With immediate effect	The Commission did not receive a response from the Provider to these areas for improvement within the 28-day timeframe.

To support assurance that the required six improvements have been completed, the following action was agreed:

- The Registered Provider will provide written confirmation to the Commission once the areas of improvement have been achieved. This confirmation should be submitted by 25 September 2026.

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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