



**Jersey Care
Commission**

INSPECTION REPORT

**LV
Home Care Service**

**Charles House, Charles Street
St Helier JE2 4SF**

26 November 2020

THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014, all providers of care homes, home care and adult day care services must be registered with the Jersey Care Commission ('the Commission').

This inspection was carried out in accordance with Regulation 32 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.

ABOUT THE SERVICE

The is a report of the inspection of LV Home Care. The service office is in St Helier and the care is provided island-wide.

The service became registered with the Commission on 22 August 2019.

Registered Provider	LV Care Group
Registered Manager	Edgar Dingle
Regulated Activity	Home Care Service
Conditions of Registration	<u>Mandatory</u> Medium Plus (600 to 2250 care hours per week) Categories of care: Learning Disability; Physical Disability; Autism; Old Age; Dementia Care; Substance Misuse; Mental Health. Age range: 18 and over No discretionary conditions.
Dates of Inspection	26 November 2020
Times of Inspection	9.30am to 12.30pm
Type of Inspection	Announced
Number of areas for improvement	None

The Home Care Service is operated by LV Care Group. The registered manager is Edgar Dingle.

At the time of this inspection, there were six people receiving care from the service, one of whom was described as receiving a "care in the community" service, and five receiving a "complex needs" service.

SUMMARY OF INSPECTION FINDINGS

This inspection was announced and was completed on 26 November 2020. The Home Care Standards were referenced throughout the inspection.¹

The Regulation Officer focussed on the following areas during the inspection:

- the service's Statement of Purpose and conditions on registration
- safeguarding (adults and children)
- complaints
- safe recruitment and staffing arrangements (including induction, training, supervision, staffing levels)
- care planning
- monthly quality reports.

Overall, the findings from this inspection were positive, and there was evidence of care receivers being provided with a service that is safe, and which takes their wishes and preferences into account.

The service is currently providing 650 care hours each week and the Statement of Purpose continues to reflect the range and nature of services provided to care receivers. The Regulation Officer was satisfied that the provider and manager fully understood their responsibilities in this regard and was satisfied that all conditions were being met.

The Regulation Officer saw evidence of up-to-date safeguarding policies and procedures. Staff recruitment files and training files evidenced effective safeguarding training. The Standard is met.

The written complaints procedure and complaint form for care receivers and their families are made available and discussed at the start of care provision. Complaints forms are part of every care receiver's personal file. The Standard is met.

The service's arrangements for recruiting staff were satisfactory, and the registered manager was able to evidence the checks undertaken before new staff were able to work with care receivers on their own. The interview with the registered manager and the records reviewed demonstrated that staffing numbers were adequate, and that staff were appropriately deployed within the service.

The care plan reports reviewed by the Regulation Officer evidenced the organisation's efforts to identify needs, write an objective for each plan to meet this need, and to write a detailed plan of action for the carer to follow.

¹ The Home Care Standards and all other Care Standards can be accessed on the Commission's website at <https://carecommission.ie/Standards/>

The Regulation Officer was shown six monthly reports up until November 2020 that used the Commission's template and were completed by the Company's Compliance Manager. The Regulation Officer noted that these reports were sent to and were discussed by all the shareholders

The Regulation Officer was satisfied that the Standards for recruitment and staffing, care plans, and quality monitoring were well met, and there were no areas for improvement identified.

INSPECTION PROCESS

Prior to the inspection visit, information submitted by the service to the Commission since the service became registered, was reviewed. This included any notifications and any changes to the service's Statement of Purpose.

As a result of the Covid-19 concerns it was not possible to meet with other staff members during the inspection. Two relatives of care receivers were spoken with as part of the inspection. The views of professionals (social workers), were also obtained.

During the inspection, records including policies, care records, incidents and complaints were examined. The Regulation Officer visited the service office and met with the registered manager.

At the conclusion of the inspection, the Regulation Officer provided feedback to the registered manager.

This report sets out the findings of the inspection and includes areas of good practice which were identified. No areas for improvement have been identified.

INSPECTION FINDINGS

The service's Statement of Purpose and conditions on registration

The Home Care Service's Statement of Purpose was reviewed prior to the inspection visit. The Standards outline the provider's responsibility to ensure that the Statement of Purpose is kept under regular review and submitted to the Commission when any changes are made.

The Home Care Service is, as part of the registration process, subject to the following mandatory and discretionary conditions:

Conditions of Registration	<p><u>Mandatory</u></p> <p>The registered manager is Edgar Dingle The maximum number of care hours to be provided each week is: Medium Plus (600 – 2250 care hours per week) Categories of care: Learning Disability; Physical Disability; Autism; Old Age; Dementia Care; Substance Misuse; Mental Health. Age range: 18 and over</p> <p><u>Discretionary</u></p> <p>None</p>
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LV Home Care was registered as a “Medium Plus” size service to provide between 600 and 2250 care hours each week. The registered manager informed the Regulation Officer that the size of the service was approximately 2,000 hours at the start of the Covid-19 pandemic (March 2020) but was significantly reduced in order to avoid a risk of care staff spreading the virus to care receivers.

The registered manager advised the Regulation Officer of plans to grow the service again, and at the time of the inspection there were only six care receivers supported by 19 care/support workers.

The service is currently providing only 650 care hours each week and the Statement of Purpose continues to reflect the range and nature of services provided to care receivers. The Regulation Officer was satisfied that the provider and manager fully understood their responsibilities in this regard.

The Regulation Officer was satisfied that all conditions were being met.

Safeguarding (adults and children)

The Standards for Home Care Services set out the provider’s responsibility to ensure that care receivers feel safe and are protected against harm. This means that service providers should have robust safeguarding policies and procedures in place which are kept under review. Staff working in the service should be familiar with the safeguarding arrangements and should make referrals to other agencies when appropriate.

The Regulation Officer saw evidence of up-to-date safeguarding policies and procedures. The manager was familiar with the content of the service’s safeguarding arrangement and could describe these.

Staff recruitment files and training files evidence LV Home Care’s induction programme which includes enrolment on the Care Academy’s Care Certificate and Level 2 and 3 QCF award courses when this is appropriate. The records document the regular review of the effectiveness of safeguarding training during team meeting discussions and in staff supervision.

A robust system of incident reporting is in place. This is intended to ensure that any incidents are reported promptly to the register manager and to the other shareholders (providers). The company's Compliance Officer routinely tracks incidents and accidents and undertakes investigations as appropriate.

There have been ten notifications to the Commission since the service became registered. These have been dealt with appropriately and the learning has resulted in actions to improve the service.

The Regulation Officer was satisfied that the Standard is met.

Complaints

The Standards for Home Care Services set out set out the provider's responsibility to ensure that there are arrangements in place for the management of complaints. This means that care receivers should know how to make a complaint and what to expect if they need to make a complaint. The service's staff should be familiar with the complaints management procedures and service providers should closely monitor their implementation.

The service's Client Guide (handbook) includes a complaints policy and procedure. It states that LV Home Care welcomes all complaints and compliments about the service and that feedback is greatly appreciated. The service sends feedback forms which can be returned directly to a Compliance and Special Projects Manager. These forms include a range of questions which are intended to enable the organisation to better understand how care receivers perceive the service and of how the service can be improved.

Both the written complaints procedure and the complaint form for care receivers and their families are made available and discussed at the start of care provision. Complaints forms are included in every care receiver's personal file.

The two representatives of care receivers spoken to during the inspection knew how to make a complaint.

The Regulation Officer was satisfied that the Standard is met.

Safe recruitment and staffing arrangements (including induction, training, supervision, staffing levels)

The safe recruitment of staff is an important element in contributing to the overall safety and quality of service provision. The Standards and Regulations set out the provider's responsibility to ensure that there are always suitably recruited, trained and experienced staff available to meet the needs of care receivers.

The Regulation Officer saw evidence of both a policy and procedures for safe recruitment, in accordance with the Standards and Regulations.

The registered manager demonstrated a commitment to safe recruitment and was able to describe practice and outcomes to evidence this. The Regulation Officer reviewed seven staff files.

Each file started with a checklist. There was a formal application form and a record of the interview questions and responses. Applicants are required to provide the details of two referees and to complete a pre-employment medical questionnaire. The offer letter is not sent until screening checks are completed, followed by a contract of employment.

The files also contained records of all necessary training with copies of training award certificates. Some training is delivered in-house to new members of staff and other training is sourced externally. There is also a programme of competency reviews as part of the induction for new care staff, and each "induction book" is signed off by a manager.

Another section of the staff files contains the continuing supervision / competency reviews which take place every three months.

The Regulation Officer was satisfied that the Standard was met.

Care planning

The people to receive this service should have a clear plan of the care to be provided to them. This should be based on an assessment of their needs, wishes and preferences. The Standards and Regulations set out the provider's responsibility to ensure that care plans are person centred and kept under review. The staff delivering care should be familiar with the care plans and ensure that any changes in needs are communicated appropriately.

The service's Client Guide sets out an aim to meet care receivers' needs by providing a flexible and reliable quality service that offers care in a person-centred way, and by providing care which can be tailored to suit the needs of the individual.

The service has a referral policy and arrangements for obtaining information (including assessments of need and preference) about prospective care receivers.

LV Home Care use an electronic recording system called "Fusion", and the care plan reports reviewed by the Regulation Officer evidenced the organisation's efforts to identify needs, to write an objective according to each need, and to write a detailed plan of action for the carer to follow.

These action plans were easy to follow. A good example was a plan which was in place to ensure that a care receiver who is unable to communicate verbally could be supported to communicate through their behaviour and emotions. Information was provided in the plan to support care staff to understand how this person communicates.

The plan provided staff with the necessary guidance and information relating to this care receiver's communication needs. The information included a "Disability

Distress Assessment Tool” which described a range of verbal and non-verbal signals that could indicate the care receiver’s contentedness and distress.

The Regulation Officer examined other detailed care plan reports that covered areas of care and need including: morning routine; car safety; epilepsy; personal care; nutrition; moving and handling and medication.

This attention to detail was commented on by one of the care receiver’s relatives, who felt that LV Home Care provided peace of mind in respect of their relative being well looked after. Another representative of a care receiver described the quality of care as ‘excellent’ and said they highly recommend them. The social workers commented on the good quality of care provided.

The initial meeting and development of initial plans for a new care receiver are undertaken by the registered manager. These initial plans are reviewed with the care staff the care receiver and their representatives after some weeks of information gathering. The Regulation Officer saw evidence of regular reviews of all the care plans. This Standard was well met.

Monthly quality reports

The quality of care provision should be kept under regular review. The Standards and Regulations set out the provider’s responsibility to appoint a representative to report monthly on the quality of care provided and compliance with registration requirements, Standards and Regulations. The manager should be familiar with the findings of quality monitoring activity and any actions required to improve the quality of service provision.

The Regulation Officer noted that there are systems in place for the registered manager to monitor, audit and review the quality of care within the service. There is evidence that the findings of such activities are acted upon and disseminated across the service. In addition, there are feedback mechanisms in place which integrate the views of care receivers, their representatives, and support workers in the evaluation and review of the quality of care.

The Regulation Officer was shown six monthly reports dated to November 2020. These used the Commission’s template and were completed by the company’s Compliance Manager.

It was good to note that the reports consistently set out an evaluation of the performance of the service against its Statement of Purpose and the Regulations and Standards. The Regulation Officer noted that these reports were sent to and were discussed by all the shareholders.

The Regulation Officer was also shown evidence of documentation which included: a recent policy review; an audit (an internal inspection) of all aspects of nutrition; client feedback forms on the quality of the service and a report on this year’s staff survey.

This Standard was well met.

IMPROVEMENT PLAN

There were no areas for improvement identified during this inspection and an Improvement Plan has not been issued.

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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