



**Jersey Care
Commission**

INSPECTION REPORT

RJ Response Services Limited

Home Care Service

**Roslyn Farm
Rue du Douet
St Ouen
JE3 2HN**

23 July 2021

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

This is a report of the inspection of RJ Response Services Limited. The service's office is situated in St Ouen. The aims and objectives of the service is to provide a 24 hour call out service to people living in their own homes in order to provide practical help and advice in an emergency. The service also provides some planned personal and social care visits and can also offer an assistive technology service in order to assist people to remain at home more safely.

The service became registered with the Commission on 14 December 2020.

Regulated Activity	Home care service
Conditions of Registration	<u>Mandatory</u> Type of care: Personal care Category of care: Adult 60+, dementia care, mental health Maximum number of personal care hours to be provided per week: 80 Age range of care receivers: 18 and above <u>Discretionary</u> There are none
Date of Inspection	23 July 2021
Time of Inspection	8.30am – 11.45am
Type of Inspection	Announced
Number of areas for improvement	None
Number of care receivers using the service on the day of the inspection	145

The Home Care Service is operated by RJ Response Services Limited and the registered manager is Jonathan Mager. The discretionary condition applied at the

time of initial registration stated that the registered manager had to complete a Level 5 Diploma in Leadership in Health and Social Care by 14 December 2023. Prior to the inspection visit, the manager provided confirmation that he had achieved this qualification and therefore the Commission was satisfied that the discretionary condition had been met.

This was the first inspection since the service was registered.

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.

Clients are very happy with the service that they receive, and they described receiving timely, appropriate responses to their requests for assistance in times of emergency. Clients had an overall positive opinion of the service and said that one of the service's strengths was the small response team so that they knew the staff team and who would be responding to them. They also described the manager as being hands on and accessible.

The service also provides short term personal care and support to clients in their own homes and they too also expressed satisfaction with the level and standard of support received. The service maintains good relationships with other agencies and health care professionals, some of whom expressed confidence in the service and described it as proficient.

There are safe recruitment practices in place and training is provided for staff relevant to their scope of practice. Staff spoken with were clear about their roles and responsibilities and they knew of their limitations and how to escalate concerns to relevant health and social care services. There are policies and procedures in place to guide staff in their practice and staff receive formal supervision where they meet with the registered manager to discuss work related matters. Staff that were spoken with described immense job satisfaction and that there was a culture of support and commitment to striving towards good outcomes for clients.

The service maintains its own useful data and shares the findings with other external agents such as the ambulance service and social services. The plans to develop and expand the service were discussed and the registered manager and provider have a clear idea of how the service will maintain its quality and operate within its stated aims and objectives.

INSPECTION PROCESS

This inspection was the first inspection since the service was registered and it was completed on 23 July 2021. The registered manager was given three days' notice of the inspection which was to ensure that he would be available during the visit and to

confirm the service's infection prevention and control arrangements in light of the Covid-19 pandemic.

The Home Care Standards were referenced throughout the inspection.¹

This inspection focussed on the following lines of enquiry:

- **Staff recruitment, training and development**
- **Approaches to care and welfare of care receivers**
- **Staff competence relating to categories of care provided**
- **Management of services**
- **The service will be reviewed regularly**

Prior to our inspection visit, all of the information held by the Commission about this service was reviewed.

The Regulation Officer sought the views of the people who use the service and spoke with managerial and other staff. The Regulation Officer established contact with six clients and this contact was made by telephone. The views of three health and social care professionals were also obtained as part of the inspection process.

During the inspection, records including policies, procedures, falls protocols, care records, incidents and complaints were examined.

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

This report sets out our findings and includes areas of good practice identified during the inspection.

INSPECTION FINDINGS

Staff recruitment, training and development

Reference was made to Standard 3 of the Home Care Standards which states:
"You will be cared for and helped by the right people with the right values, attitudes, understanding and training."

The service's safe recruitment policy was examined which sets out clear guidance in respect of recruitment and selection practices to safeguard clients. A sample of staff files was reviewed which confirmed that the service had applied the principles of safe recruitment in practice. The recruitment process for two staff who were to be

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

employed was underway with their start dates to be confirmed once the manager was provided with their enhanced criminal records checks.

The induction policy was reviewed which sets the objectives for staff to integrate into their new role. A discussion with two members of staff who were recruited after the service was registered, confirmed that a comprehensive induction programme had been provided and that they were clear of what was expected of them in their role. They described the support that was provided to them at the outset of their employment and both confirmed that they have regular opportunities to meet with the registered manager to discuss their role and any issues of concern. Staff spoke of the open, supportive culture that they have experienced and flexible working arrangements that are offered.

The induction policy and staff records that were reviewed evidenced that the registered manager has a clear understanding of the expectations of staff and that there are adequate systems in place to monitor their performance. Interim performance review records that were examined, showed that aspects of their role had been assessed and clear objectives set for staff learning and development. One member of staff told the Regulation Officer that they feel valued as an employee and consider that they are developing their knowledge and confidence. The management team provide positive leadership and are keen to grow the staff team.

Communication is a strong feature within the service and the minutes of the most recent team meeting were reviewed, which showed that there were discussions relating to the impact of Covid-19, training and development and the recruitment of new staff joining the team. In addition to formal staff meetings, there are safe cloud-based systems for the sharing of information amongst the team which takes account of client confidentiality also.

Staff training records were examined, which showed that staff are up to date in mandatory training subjects. Staff are also provided with training in mental health and dementia in recognition that these categories of care feature within the service's registration conditions. Two members of staff told the Regulation Officer that they have been provided with training in the use of handling equipment and communication techniques when responding to client's requests for assistance. They described the function and benefits of assistive technology devices and their impact in helping people to remain at home more safely. The registered manager described his vision for staff to benefit from a more intensive First Aid training programme in the future. Out of the four staff that are employed, two staff members have a Level 2 vocational training qualification and one has a Level 3.

A sample of staff rosters was provided which show the names and working hours of each staff member who is providing the response service. In addition, the name and scheduled working hours of one staff member to provide personal support to their allocated clients were also recorded. One client informed the Regulation Officer that they knew in advance which staff member would be attending to their short-term personal support needs, which they felt was reassuring to them.

Approaches to care and welfare of care receivers

Reference was made to Standard 5 of the Home Care Standards which states: "You will be supported to make your own decisions and you will receive care and support which respects your lifestyle, wishes and preferences."

Referrals into the service come by way of independent enquiry and contact or through a range of health professionals who consider the service may be of benefit to clients. Feedback from three health and social care professionals confirmed that they have high levels of confidence in the service and felt the team had developed good links and relationships with other key agencies. Some of their comments included;

"We have found RJ Response to be organised, flexible, efficient and pragmatic with use of the alarm system. Referrals are always dealt with in a timely manner and Jon and Rob are always available to offer a handover. They are accommodating and they set boundaries which do not compromise their responder service".

"When working with Rob or John I have always found them to be very helpful, working hard to provide a service that is tailored to the individual, often going above and beyond to ensure patient safety. Our interactions with RJ Response has been a positive one".

"Jon and his team are always quick to respond to my requests, feed-back to me with outcomes from their visits and will consider any service that is in their power/remit to provide. When I have asked, they have patiently explained to me how a particular system works so I am more knowledgeable when seeking to promote safety for my clients and reassure absent family members. I have had at least two families that are so appreciative of their service".

Clients who were spoken with also expressed that the response service was a life line to many of them and they spoke of their experiences in receiving an immediate response, which very often was to a mistaken request for assistance. People overall described the service as giving them great comfort in knowing they would get support in the event of a fall at home and made the following comments;

"it does what it says on the tin"

"I can't speak highly enough of them, they're tops"

"they're really good at communicating with you, they let you know what is going on"

"I've pressed my button by mistake on many occasions, but I still get them contacting me asking if I'm ok and the staff are really helpful, and they know what they're doing"

"I'm absolutely astounded at the efficiency of the service, I would describe it as unique and super-efficient, my experience so far has been excellent"

“I can’t find anyone in the company that I haven’t found to be respectful, I’m very pleased to know it’s there and that someone is there for me”.

The type of support that is routinely provided ranges from an initial response service where staff will assess the client and ensure the most appropriate treatment is given and any onward referral to other services made if needed. This was confirmed during discussion with one client who told the Regulation Officer that they had fallen in their home and that the staff member recognised the severity of injury and had called the ambulance service on their behalf. Some clients are provided with social and personal care support and the registered manager explained that he may refer potential clients to another home care service provider if he feels that their care needs are beyond what can be provided.

Clients are supported to access health services, for example by making phone calls to the ambulance service or GP when indicated. One client told the Regulation Officer that the service had arranged for them to attend the vaccination centre which they had found that to be a great help.

During the inspection visit one client’s pendant alarm was triggered and the registered manager provided an immediate response and spoke directly with the individual, who confirmed they were safe and had pressed their call alarm by mistake. The manager also explained how the Global Positioning System (GPS) tracker system works for clients who are living with dementia. The GPS device sends an alert to a nominated family member and the service, when the client goes beyond the boundaries of a safe zone. This was directly observed during the visit and the manager explained that the client had consented to this arrangement and allows the client to have a degree of freedom and their family to know of their whereabouts.

Clients and their families are provided with instruction in relation to the use of various devices and this was confirmed by them during discussion with the Regulation Officer. One client commented that they had been given very clear instructions on how to use their pendant and another person said that they had been provided with simple directions on how to charge their pendant alarm. A health and social care professional also commented that the manager ‘has patiently explained to me how a particular system works so I am more knowledgeable when seeking to promote safety for clients and reassure absent family members’.

Samples of risk assessments and records that are completed following response visits were examined and noted to provide details of the event and outcome. Risk assessments are completed as part of care planning and highlight vulnerabilities and set out ways in which to keep clients safe. Records are maintained where staff provide personal support to clients and these were found to be detailed and comprehensive in nature. The outcomes of client visits are communicated to health and social care professionals where necessary. One staff member described the importance of maintaining accurate records following visits, even when clients may have declined interventions.

Staff competence relating to categories of care provided

Reference was made to Standard 6 of the Home Care Standards which states: "Your care will be provided with consistency by competent care and support workers who have the necessary training and qualifications to meet your needs."

The registered manager explained the standard operating procedures and processes. These outline the approach to be taken in response to clients who have fallen, as a means of ensuring that they receive appropriate care and treatment. This process also helps in avoiding care receivers being unnecessarily transferred to hospital, although this is assessed on a case-by-case basis to ensure that decision-making is appropriate and that clients remains safe. Support from the ambulance service is requested when this is needed.

This was also explained during discussion with two members of staff who had a clear understanding of their remit. One health and social care professional confirmed this also and stated that staff work within their scope of practice with an awareness of when to call an ambulance. There was evidence gathered to demonstrate that this has proved to be beneficial and lessened the demand upon some emergency services.

Staff have access to several policies and procedures to guide their practice which include a post fall protocol which is displayed in the staff office and provided to staff for reference. This helps to inform decisions about checks for injury and safe handling and ensures that any injuries are treated appropriately. Staff are provided with emergency equipment and have been trained to use it. Two staff members described that they had received instructions in the use of handling equipment and that their competency in this had been checked thereafter.

The registered manager recognises the limitations of staff and has a clear plan to further develop and enhance their skills with a more intensive training programme. One staff member who provides personal support to one client has completed appropriate training for the administration of medication. Formal team meetings are held on a quarterly basis and usually include discussions about client needs and the most recent meeting detailed discussions about infection prevention measures.

Foundation level safeguarding training is provided to all staff. The registered manager and one staff member described a safeguarding situation that required a referral to Health and Community Services. This detailed potential financial abuse and exploitation of a vulnerable adult in the community and the staff member who recognised the situation reported and escalated their concerns in a timely and appropriate manner. The registered manager submitted a retrospective notification to the Commission as soon as the inspection was completed, once this was brought to his attention.

The service has also developed a self-neglect policy and an example was provided where the manager had notified Health and Community Services of a situation where they considered that a person was residing in insanitary conditions and was at risk of harm due to self-neglect.

Management of services

Reference was made to Standard 8 of the Home Care Standards which states:
“The home care service will be well managed.”

The service has clear lines of accountability and both clients and staff that spoke with the Regulation Officer knew of the managerial structure and objectives of the service. The registered manager has many years' experience of working in the emergency services and has a clear vision of how the service will develop to meet individual needs, with the aim of supporting clients to remain independent.

The service has a complaints policy and has not received any complaints since it was registered. This was discussed during the inspection and it was noted that the client information leaflet did not contain information about how clients may raise a complaint or concern. This was addressed by the registered manager immediately following the inspection and he provided the Regulation Officer with an example and confirmation to as to how this would be addressed.

The service will be reviewed regularly

Reference was made to Standard 9 of the Home Care Standards which states:
“The care service will be checked and reviewed regularly to sort out any issues and make things better for you and others.”

The service maintains useful data in response to times of call out responses, outcomes of visits and types of injuries and shares those findings with relevant agencies which was explained and demonstrated during the inspection. The manager seeks to get as much feedback as possible from clients who use the service to gain their views. Examples of client feedback and comments of their experiences were examined during the inspection, which found that feedback had been consistently positive. Client feedback is routinely shared with the staff team.

Samples of the monthly quality assurance reports were examined which showed that the registered manager had been reviewing the service's operation in accordance with the Standards. During the inspection, the Regulation Officer discussed the benefit of someone other than the manager to undertake the monthly quality assurance reviews so that a more objective review may be considered. This was acknowledged and accepted by the manager and they agreed to address this for the forthcoming month's review.

The manager discussed his reflection on some unique client circumstances that had been brought to his attention which recognised potential risks to clients. He explained the safeguards that had been implemented as a consequence which demonstrated another important aspect of the manager's ability to continually review the service.

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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