



**Jersey Care
Commission**

INSPECTION REPORT

Able Community Care Limited

Home Care Service

**Office 3
Bethlehem Centre
La Rue des Buffes
St Mary
JE3 3DE**

9 November 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 Able Community Care Limited. The service's offices are situated within Bethlehem Church in St Mary. The service provides live in care workers to support people in their own homes as an alternative to moving into a care home. Able Community Care Limited does not directly employ care workers; they introduce care workers to care receivers, therefore care workers are classed as self-employed. The service's aims and objectives, as described in the Statement of Purpose, is to "provide an alternative to moving into residential care by offering a live in care service to people who wish to remain living in their own homes".

The service became registered with the Commission on 2 August 2019 and this is the second inspection since registration.

Regulated Activity	Home Care Service
Conditions of Registration	<u>Mandatory</u> Type of care: Personal care/ Personal support Category of care: Old age, dementia, physical disability, mental health, learning disability Maximum number of hours of care that can be provided per week: 2,249 Age range of care receivers: 18 years and above <u>Discretionary</u> There are no discretionary conditions.
Date of Inspection	9 November 2021
Time of Inspection	11:30am – 3:15pm
Type of Inspection	Announced

Number of areas for improvement	Two
Number of care receivers using the service on the day of the inspection	14

The Home Care Service is operated by Able Community Care Limited. The Service is currently without a Registered Manager. Since the last inspection on 2 July 2020, the Commission was informed on 25 June 2021 of the Manager's resignation, and received a notification on 9 July 2021. This notification included details of the registered provider's arrangements to ensure that the service had a suitable interim management plan in place. The service is being managed by an Interim Manager, who facilitated the inspection and advised that progress has been made with the appointment of a new manager, who is due to take up the position in January 2022.

The Provider's main offices are in Norwich, although there are also locally based offices which have been acquired since the previous inspection.

SUMMARY OF INSPECTION FINDINGS

The following is a summary of what we found during the inspection. Further information about our findings is contained in the main body of this report.

Care receivers, their families and one health and social care professional were very positive about the care workers who deliver support. This included confidence in the care workers' abilities to interact, understand and respect care receivers and their personal preferences. Family members valued the continuity of care offered by their relatives' usual care workers and described the open communication between care workers and themselves. Families described care workers as being compassionate and understanding and had developed good relationships with them.

Care workers work within their boundaries and are aware of the Service's expected conduct. There are policies and procedures for them to refer to and care workers know how to keep care receivers safe and understand their responsibilities in reporting concerns. Care workers complete training in mandatory subjects and as far as possible, the service aims to match care workers with relevant knowledge and skills to ensure the best possible match and outcomes for care receivers.

Care workers, family members, care receivers and health and social care professionals described support from the management structure and confidence that any issues of concern would be addressed.

There are two areas for improvement identified from this inspection, one of which relates to ensuring that quality monitoring processes are compiled into a monthly report as the Standards require. The other relates to ensuring that care records are maintained in accordance with the timescales as described within the Regulations.

INSPECTION PROCESS

This inspection was announced and was completed on 9 November 2021. Notice of the inspection was given to the Interim Manager two weeks before the visit. This was to allow the Interim Manager to make travel arrangements to come to Jersey.

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 the information held by the Commission about the Service was reviewed, including the previous inspection report.

The Regulation Officer sought the views of the people who use the service and their relatives. The Regulation Officer spoke with three relatives and one health and social care professional after the inspection visit and also met with one care receiver and their care worker.

During the inspection, records including policies, care records, incidents and reports detailing feedback from staff were examined.

At the conclusion of the inspection, the Regulation Officer provided feedback to the Interim Manager and further followed this up with a telephone call on 26 November 2021.

This report sets out our findings and includes areas of good practice identified during the inspection. Where areas for improvement have been identified, these are described in the report and an improvement plan is attached at the end of the report.

INSPECTION FINDINGS

At the last inspection, three areas for improvement were identified and an improvement plan was submitted to the Commission by the Provider setting out how these areas would be addressed. The improvement plan was discussed with the Interim Manager during the inspection and it was noted that whilst there had been

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

improvements made in respect of developing monthly reports, this has not been consistently done and ceased once the previous manager had left the service. This was discussed with the Interim Manager who explained that there will be a plan in place to address this to make sure that this Standard will be consistently met.

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.”

No new care workers have been recruited to work in Jersey since the service was registered in 2019, which demonstrates consistency in the workforce. The Interim Manager explained that there have been no changes made to the service’s recruitment practices and advised that the service follow safe recruitment practices before care workers are eligible for registration with Able Community Care Limited. Care workers must demonstrate that they have had a minimum of one years’ experience working in a structured care setting, as part of the eligibility criteria.

There are also systems in place to ensure that care workers remain fit for their role and this requires care workers to provide evidence of a satisfactory criminal records check, valid public liability insurance and confirmation that they have updated their knowledge base in mandatory subjects. The Provider maintains these records. One of the care workers that was spoken with confirmed this is expected to remain on the register to work and showed the Regulation Officer evidence of their training record, insurance certificate and spoke of their experience and vocational qualifications in healthcare prior to becoming a live in care worker.

It was established through discussion with one care worker and the Interim Manager that it was their understanding that care workers who are from outside Jersey are not required obtain a registration card². The Regulation Officer advised that the Interim Manager seek further advice and instruction from relevant Government of Jersey departments to clarify the position for care workers.

The Interim Manager also confirmed that training in areas specific to care receivers’ health conditions will be undertaken by care workers on a case by case basis. As far as possible, the Interim Manager will select care workers with appropriate skills to ensure the best possible match and outcomes for care receivers. One care receiver told the Regulation Officer that even with their limited experience of the service to date, they said that the service had made significant efforts to match a care worker to their specific needs. Relatives who were consulted, confirmed that the care workers allocated to support their family members were considered to be a good match. Care receivers’ are notified of their care workers’ Covid-19 vaccination status.

² Registration cards are required if you work in Jersey and information can be found at www.gov.je/working

The Regulation Officer received complimentary comments about care workers from one care receiver, family members and one health and social care professional.

Some of the comments included:

“We’ve been very impressed with the quality of carers, we’ve never had any negative experiences with the carers they are all nice and caring. We’re very satisfied with the care and support provided and we can see that [name] health hasn’t changed and their needs are being attended to” [from a family member]

“The carers provide a great support to [name], I’ve met the carers in person and always found them to be very professional and accommodating to meet [name] needs” [from a family member]

“I’ve been impressed so far with the carer, who I’ve found to be very friendly and non-judgemental as she takes note of my wishes and I’ve got freedom to do whatever I want when I want. There’s never any pressure on me to go to bed early, I’m more than happy with how things are so far” [from a care receiver]

“Overall, we’re really happy with the standard of care from the carers, from the level of planning and organisation and we don’t have any concerns. [Name] has improved a lot due to the consistency and stability of carers and there’s no pressure on us as a family to arrange anything. The changeover of carers is very good and [name] reaction to the carers is very good” [from a family member]

“I’ve not had any concerns about the carers, I feel they’re very experienced and my client’s family were very positive about the carers. The commitment of the carers to remain on island during the pandemic was great as a lot of them agreed to remain in place and support which was a great help” [from a health and social care professional]

The Interim Manager explained that he maintains ongoing contact with care workers to provide them with opportunities to discuss their work and highlight any concerns that they may have and records pertaining to these discussions are retained. These were not examined or reviewed during the inspection.

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.”

An initial assessment of need is undertaken for all prospective care receivers to determine whether a live in care worker will be suitable to meet their needs. Care receivers and their representatives are involved in developing their support plans thereafter. One care receiver told the Regulation Officer that they feel in control of deciding how their support is provided and described that along with their

representative had been involved in writing and developing their support plans. They spoke of being able to access it at all times, but described that, “everything is done as it should be so I don’t need to read it”.

One family member said that they were involved in the assessment process at the outset and had met with the previous manager and felt that they were “assured straight away that it would be a good fit for [name]”. They knew that support plans had been written and were kept in the home, but did not feel the need to read them as they had confidence in the care workers’ ability in providing care.

The Regulation Officer visited one care receiver in their own home and took the opportunity to read their support plans and daily records. The personal plans were detailed to reflect personal preferences and care delivery strategies. The plans supported and promoted independence and the entries recorded in the daily log book showed outcomes that evidenced the care receiver’s wellbeing. The personal plan relating to maintaining the care receiver’s safety was directly observed during the visit and the care worker provided a comprehensive overview of the care receiver’s personal preferences, history and family relationships.

The personal plan set out how the care workers breaks are managed during the week. A sample of medication administration records (MAR) were examined during the visit and the care worker described the process for safe medicine administration. Records pertaining to financial transactions were recorded in the daily log book and receipts maintained. The care receiver appeared relaxed in their demeanour during the visit and they told the Regulation Officer that they liked their care worker and appeared to respond well to them. The care worker included them in conversation and was overheard offering various healthy food options for them to choose for their evening meal. The care receiver was observed making jokes and laughing during conversation.

Family members said that care workers kept them informed and updated about their relative’s welfare and any changes in their health. One family member said that when they visit their relative they notice that they respond very well to the care worker, they hear and witness lots of laughs and the carers have a very good understanding of [name] and display a “natural warmth”. Another family member said that they felt very involved and part of their relatives care as the care worker shares relevant information with them that they value.

One family member described their relative’s health condition is helped by having a daily routine to provide structure to their day, but they said that the care worker does this in such a way that the care receiver retains a sense of control and independence. One care receiver spoke of their care worker’s ability to provide them with guidance and reassurance to express themselves in certain situations when they are struggling to communicate. They said this was done in a supportive way and had helped to increase their confidence.

The Interim Manager advised that the service retains care receivers’ care records for a three-year period. It was advised that the Regulations require that they are retained for at least five years. This is an area for improvement.

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 provider’s handbook for care workers was examined which provides information and guidance including care workers roles and responsibilities, health and safety issues and policies and procedures. Each care worker is provided with the handbook and the care worker spoken with confirmed they had access to this and knew of the content. The handbook describes the process for handover of one care worker to the next. The care worker and family members spoken with described the handover from one care worker to another as smooth and with sufficient time built in to allow for a handover of information.

Care workers are aware of the limitations and boundaries associated with their role and their expected conduct. The care worker provided an example whereby they had sought professional medical advice when they had observed changes in the care receiver’s presentation.

The Interim Manager confirmed that they had been liaising with one health professional regarding the level of support one care receiver has been receiving. They had also made a referral for input from the Occupational Therapist in response to a change in one care receiver’s needs.

The Commission has been informed of notifiable events although have only received one notification since the previous manager left the service.

Management of services

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

Since the previous inspection, the provider has sourced a more suitable office base in Jersey from where the Registered Manager (once appointed in January 2022), will be based. The current management structure is that the Interim Manager, who is based in England, is assuming the Registered Manager role until the new manager is appointed.

All people spoken with as part of the inspection, knew how to contact the Interim Manager and had his contact details. They described confidence in getting a response to any issues of concern, and in addition there is 24 hour support for care workers to use if they need advice or guidance outside of hours. The care worker spoken with, knew of the on call management arrangements and said that their experiences making contact out of hours for advice had always been positive.

The Service has contingency plans in place to ensure that care receivers will continue to be supported in the event of unforeseen, emergency situations which require their care worker to leave. The Interim Manager confirmed that this rarely happens, and would usually be in response to family illness or bereavement for example. There may be occasions when care receivers require admission into hospital and an agreement will be made between them and the care worker as to whether the care worker remains whilst they are in hospital.

The service places an importance on ensuring continuous support is provided to care receivers from their regular, known care workers. Feedback from care receivers, families and one care worker confirmed that there are well established relationships with care workers and they were happy with their support.

Care receivers or their representatives are provided with an offer of care letter which outlines the care costs, and are required to sign up to the terms and conditions before the care worker is assigned to them.

The Statement of Purpose was reviewed and discussed with the Interim Manager during the inspection visit and the content remains relevant to the service provided. However the manager agreed to make some minor amendments to the organisational structure contact details and submit it to the Commission.

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."

Attempts were made by the previous Registered Manager to comply with the area for improvement that was made on the previous inspection relating to monthly quality monitoring reports. The Interim Manager confirmed that this was something that had stopped since the previous manager left and acknowledged that it needs to start again. This is an area for improvement.

The service handbook provides details of the complaints process. There had been no complaints that warranted investigation since the last inspection in 2020. The Commission received a telephone call from a relative of a care receiver in February 2021 raising concerns about the information in their relative's support plan. They were advised to make contact with the Registered Manager and subsequently made contact with the Commission the day after their initial contact to report that they had received a satisfactory response and confirmed that their "wishes and desires have been acknowledged and respected".

The Service had obtained feedback from care workers in July and August 2021, which showed that they felt supported in their roles and valued the assistance of the management team. There were frequent and recurrent comments from all people spoken with as part of the inspection as to how satisfied people felt with the quality of their care workers.

IMPROVEMENT PLAN

There were two areas for improvement identified during this inspection. The table below is the registered provider's response to the inspection findings.

<p>Area for Improvement 1</p> <p>Ref: Regulation 23 (3)(a)</p> <p>To be completed by: with immediate effect</p>	<p>The provider must retain care records relating to care receivers for at least five years.</p> <hr/> <p>Response by registered provider:</p> <p><i>The Commission did not receive a response from the Provider to this area for improvement within the 28 day timeframe.</i></p>
<p>Area for Improvement 2</p> <p>Ref: Standard 9.2</p> <p>To be completed by: with immediate effect</p>	<p>The provider must ensure that the quality assurance processes in place include monthly reporting on the quality of care and support provided and evidence of compliance with the Regulations and Standards.</p> <hr/> <p>Response by registered provider:</p> <p><i>The Commission did not receive a response from the Provider to this area for improvement within the 28 day timeframe.</i></p>

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.



Jersey Care Commission
1st Floor, Capital House
8 Church Street, St Helier
JE2 3NN

Tel: 01534 445801

Website: www.carecommission.je

Enquiries: enquiries@carecommission.je