



**Jersey Care  
Commission**

## **INSPECTION REPORT**

**Here 2 Help Limited**

**Home Care Service**

**Les Chenes**

**La Rue de la Guilleaumerie**

**St Saviour**

**JE2 7XF**

**23 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 Here 2 Help Limited. The service has an office in St Saviour and became registered with the Jersey Care Commission ('the Commission') on 8 April 2020.

Registered Provider	Here 2 Help Limited
Registered Manager	Alex Reid
Regulated Activity	Home Care Service
Conditions of Registration [Mandatory and discretionary]	<b>Type of care:</b> personal care, personal support <b>Category of care:</b> Old Age Dementia Care Physical Disability Autism Mental Health <b>Maximum number of personal care / personal support to be provided per week:</b> 600 hours <b>Age range of care receivers:</b> 60 plus

Dates of Inspection	23 November 2021
Times of Inspection	10.30 – 13.30
Type of Inspection	Announced
Number of areas for improvement	One
Number of care receivers using the service on the day of the inspection	23

The Home Care Service is operated by Here 2 Help limited and the registered manager is Alex Reid.

At the time of the inspection, there were 23 people receiving care from this service.

According to the Statement of Purpose the service, 'aims to fully support clients to remain in their own homes as long as they are able or willing to do so and in the manner in which they choose. Whilst under our care they will be treated as individuals, with dignity and respect.'

There is a requirement for Registered Managers to hold a Level 5 RQF (Regulated Qualification Framework) qualification in Leadership and Management or to undertake this course within three years. This would be a discretionary condition. The Commission is satisfied that Alex Reid holds this Level 5 qualification so no discretionary condition is applied.

On the 24 September 2021, the Commission received notification that the previous Registered Manager, had resigned with immediate effect. A Regulation Officer met with the Provider's nominated contact to ensure that arrangements were in place to continue to support the care receivers. The Provider's nominated contact agreed to remove the category of care relating to nursing care and to cease the onboarding of new care receivers until alternative and sufficiently robust management arrangements were in place.

## **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.

The service was established and registered with the Jersey Care Commission on 8 April 2020. This is the first inspection of the service. The inspection was undertaken by one Regulation Officer over three hours at the service's registered office.

Overall, the inspection findings were positive. The service has faced a number of challenges since beginning operation, which have included responding to the Covid 19 pandemic and the need to provide alternative management changes following the resignation of the previous Registered Manager on September 24. Despite these difficulties, the service and the small, dedicated staff team have responded appropriately and care receivers have continued to be provided with a good standard of care.

The service follows clear and robust recruitment procedures to ensure that care workers who are recruited share the service's overarching ethos to care. New staff members undergo an intensive induction process, which includes both mandatory training and specialist training (where this is required to meet the individual needs of care receivers). Staff who were spoken to confirmed that this was the case. Face to face training was difficult to source for a period as a result of restrictions associated with the pandemic. However, it is positive to note that the service has successfully sourced face to face training in relation to a number of areas including first aid and manual handling. Feedback from staff members, which was sourced during the inspection, indicates that the staff team is both committed and enthusiastic and is well led by both the Director and recently appointed Registered Manager. The Registered Manager has undertaken supervision with all staff and has planned appraisals to be completed in early 2022.

Care receivers and healthcare professionals are positive about the service and of the care which is provided. Care receivers describe positive relationships with care workers. Professionals described a responsive service, which is keen to develop.

Detailed care plans were in place and their contents were discussed with management. Care receivers confirmed that there was positive communication within the service. They indicated that care workers are consistent and that any changes are notified to them and discussed in advance of them taking place. New care workers are introduced to the care receivers before they begin to provide support. Care receivers confirmed that staff members behaved in a professional way, demonstrating a good level of both experience and motivation and that care is delivered respectfully and in a way which maintains individual dignity.

It was apparent that care receivers felt listened to and were fully involved in decisions relating to care planning.

While recognising that the Provider's nominated contact undertakes their own internal audits, there was no external quality assurance process in place at the time of the inspection. This is an area for improvement.

The Provider's nominated contact has a responsibility to appoint a representative to report monthly on the quality of care provided and compliance with the registration requirements, Standards and Regulations. The Registered Manager should be familiar with the findings of quality monitoring activity and of any actions required to improve the quality-of-service provision. The Provider's nominated contact and Registered Manager understand the requirements around this and advised that they would take the necessary steps to address this area in the new year.

## **INSPECTION PROCESS**

This inspection was announced and was completed on 23 November 2021. Notice of the inspection visit was given to the Registered Manager on the day before the visit. This was to ensure that the Registered Manager and Provider's nominated

contact would be available during the visit and to confirm the service's infection prevention and control arrangements.

The Home Care Standards were referenced throughout the inspection.<sup>1</sup>

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/or their representatives, and spoke with managerial and other staff.

The views of four healthcare professionals were also obtained as part of the inspection process.

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

At the conclusion of the inspection, the Regulation Officer provided feedback to the Registered Manager and Provider's nominated contact.

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 action plan attached at the end of the report.

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

## INSPECTION FINDINGS

This is the first inspection for this service. The service was established and registered with the Commission on 9 April 2020. At the time of the inspection, the service was supporting 23 care receivers.

### **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 Registered Manager and Provider’s nominated contact spoke in detail to the Regulation Officer in relation to their recruitment and training policy and process. The employment records which were retained on file, confirmed that appropriate procedures were in place to ensure that safe recruitment checks are completed before new staff meet with care receivers. Staff files include a detailed application form, interview notes, references, DBS and copies of training records.

Through his conversations with the Regulation Officer, it was apparent that the Registered Manager had a detailed understanding of these requirements. He also explained his plans in respect of future supervision and appraisals. There are currently regular team meetings and briefings where care plans and ideas for supporting care receivers are discussed and shared.

Following the recruitment of a Registered Manager and another full-time care worker, the Provider’s nominated contact confirmed that they are now able to fully deliver care packages with capacity to cover illness and holidays. Staff rotas provided evidence to support this.

The Provider’s nominated contact has also recruited another experienced care professional to support the Registered Manager. This individual holds RQF level 3 qualifications together with extensive care industry experience.

Staff who were spoken with as part of the inspection, described a very clear recruitment process. It is acknowledged that the service had recently experienced some challenges in respect of the time taken for DBS certificates to be received and that this caused some frustration for both the employee and the service.

### **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."

The service has a Statement of Purpose which reflects this Standard in that the service aims to support clients to remain in their own homes and to live their lives in the manner in which they choose.

Care records indicated that all care receivers are assessed by the Registered Manager prior to the service providing support. The care receivers' thoughts and wishes in relation to how the care is provided were clearly evidenced in recordings. Care plans were broken down into tasks which are then undertaken by the care staff. As an example, one task described in detail how lunch should be prepared for a care receiver. The detail clearly reflected the care receiver's wishes in relation to this.

The service uses an electronic recording system called "Care Line Live'. This is an app-based system which allows carers to quickly update care plans and to record their sessions with care receivers. The Regulation Officer observed the system in 'live' mode. The Registered Manager was able to monitor care tasks being completed and was able to respond to missed tasks through an alert system. Members of staff advised that initially, they had been sceptical of the systems and felt 'tracked', however, the staff team has come to recognise the advantages of the new system and its ease of use.

As part of the inspection process a number of care receivers were spoken to.

Feedback included:



*'girls are great, always on time'*

*'very happy with service – am always contacted if there is a problem'*

*'have met the manager and director – understand how to complain or discuss any problems'*

*'am introduced to new carers before they start – I feel very relaxed after this has happened'*

*'seems like a really professional company – had previous company before which were always late'*

*'the carers we have are great – nothing is too much trouble'*

Four healthcare professionals were also contacted. A health professional provided the following feedback: *'very responsive company – reacted well to advice given re care receiver care plan.'*

An Adult Social Worker added, *'very happy with this company – always respond to enquiries.'*

A GP advised that, *'I have regular contact with this service in relation to a number of clients – the requests are appropriate and they engage with the advice I provide'*.

A nurse confirmed, *'I have worked with carers from the agency with 2 clients, treatment plans were followed and advice sort when needed'*.

### **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."
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Following the establishment of the service it grew quickly, and, following the recruitment of a team of care staff, was able to support a number of care receivers.

During part of the final quarter of 2021, the service was without a registered manager. The Provider's nominated contact remained in contact with the Care Commission throughout this period and a number of variations to the Statement of

Purpose were agreed. This enabled the service to focus on the provision of both personal care and personal support for care receivers.

Members of staff who were spoken with as part of this inspection, described their individual recruitment experience as having been positive. Training is provided and they gave a recent example of face-to-face training for First Aid and manual handling. This was reflected in the staff files which were examined during the inspection visit. The Registered Manager fully understands the requirements in relation to RQF (Regulated Qualifications Framework) Level 2 and 3 training and the requirements in relation to mandatory training. Staff files contained evidence of completion of training in areas including First Aid, manual handling, infection control, food hygiene and safeguarding. There was also evidence of specialised training for a care receiver in relation to medication management. The service supports a number of care receivers with dementia and there is evidence of specialist training having been provided to care staff in relation to this area. Care staff confirmed that they feel supported in delivering the care packages and that plans for care receivers are discussed in the staff team meetings.

The Registered Manager and Provider's nominated contact were able to demonstrate that they fully understood their responsibilities in the provision of ongoing training and have commissioned a training provider to ensure that staff training is kept up to date. It was apparent that there have been challenges in sourcing face-to-face training recently due to the restrictions associated with the pandemic. However, it is positive that the Provider's nominated contact has arranged some face-to-face sessions in recent months. Online training was also evidenced throughout care worker's records.

The Registered Manager has met with the staff team and completed initial supervision sessions with them. He has a clear plan for appraisals which will be completed in early 2022.

The Provider's nominated contact has completed an audit of care plans in October which indicated a number of deficits relating to risk assessments and that some

contracts with care receivers had not been signed. These matters have now been addressed.

The Registered Manager has met with each of the care receivers of the service to ensure that their needs are being appropriately and comprehensively met. He has updated care plans and risk assessments accordingly.

### **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 was established in April 2020. It is acknowledged that it has faced a number of challenges since this time, particularly in respect of there being an absence of a registered manager for a period. The service responded to this by reaching an agreement with the Commission that it would not onboard any new care receivers until such time as a new registered manager was in post, and that the category of nursing care would be removed from its Statement of Purpose. The service has successfully recruited a suitably qualified and experienced staff member to the post of Registered Manager.

A thorough review and audit has been undertaken in relation to care plans and risk assessments. As a consequence, each care record has been updated and includes care receiver involvement in its formation. Risk assessments have also been completed and records now include signed agreements.

The current operational management structure consists of a Registered Manager supported by a Director. There is an Office Manager who supports the team. The Director shared plans with the Regulation Officer relating to the development of the service and further staff appointments are due to be made in January 2022.

The service has invested in an app-based care management system. This provides real time information from carer to the office team and provides an assurance that all care tasks have been fully completed. Care plans were divided into specific care

tasks and any incomplete tasks flagged on the system to enable remedial action to take place. Care staff complete tasks and update notes through the app, which enabled care records to be updated in real time. The Registered Manager reviews the care plans regularly and this was evident in the records which were seen by the Regulation Officer.

Potential new care receivers were assessed by the Registered Manager and care taken to ensure that the service is equipped able to support specific care packages prior to packages of support being agreed. The Provider's nominated contact has confirmed that a number of care packages needed to be declined as the service was not able to fully meet these needs. Once a care package is agreed, the Provider's nominated contact will prepare an agreement which is then signed by the care receiver. This document is detailed and clearly defines the nature of the care being provided, as well as contact details, the Complaints Policy and associated costs.

The Regulation Officer read the service's complaints policy which was found to be sufficiently detailed to comply with the Standards and Regulations.

Care staff confirmed to the Regulation Officer that the service is well managed, and that they feel supported and appreciated.

The Regulation Officer discussed notifications with the Provider's nominated contact and the Registered Manager. Clarity was provided in relation to the types of incident that require notifications to be sent to the Commission. Whilst it is acknowledged that that improvement was necessary in this area, following the inspection visit, the Commission has received a number of appropriate notification of incidents. On the basis that the Commission is satisfied that the Provider's nominated contact and Manager each have a clear understanding of their responsibilities in this area, this is not identified as an area for improvement at this time. However, there is a need for the service to submit notifications consistently and the Commission will continue to monitor compliance in this area.

## **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 Regulation Officer discussed the requirements in relation to monthly quality assurance reports with the Provider’s nominated contact and Registered Manager. Although it is recognised that this is a relatively new service, the Provider’s nominated contact accepts that this important area of development was missed. It was noted that the Provider’s nominated contact has undertaken a number of audits in relation to care plans and care packages, but these would benefit from external oversight. Positive discussions were held in relation to establishing a way for this to happen. This is an area for improvement.

As part of the continuing review of the service’s provision of care, reviews should source and evaluate feedback from both care receivers and staff. Reviews should also ensure that the Statement of Purpose remains up to date. The Registered Manager is currently meeting with care receivers to gain feedback on the service.

The Provider’s nominated contact shared with the Regulation Officer their plans for the development of the service. These were very positive and could be developed into a written development plan for the service. This could form part of the annual review and evaluation of the service.

## IMPROVEMENT PLAN

There was one area for improvement identified during this inspection. The table below is the registered provider's response to the inspection findings.

<p><b>Area for Improvement 1</b></p> <p><b>Ref:</b> Standard 9</p> <p><b>To be completed by:</b> 31 January 2022</p>	<p>The quality of services provided should be kept under regular review. The provider has a 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.</p> <hr/> <p><b>Response by registered provider:</b></p> <p>We accept and understand the point in relation to quality assurance and monthly reports.</p> <p>We will provide the Commission with a detailed plan which will explain how we will meet this area for improvement.</p>
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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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