



**Jersey Care
Commission**

INSPECTION REPORT

Tranquil Home Care Ltd

Home Care Service

**Jayen House
Goose Green Marsh
St Peter
JE3 8BU**

16 June 2022

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 Tranquil Home Care Ltd. The service is located in a semi-rural area within the parish of St Peter. The building is shared with other local businesses and is situated on the first floor. The premises consist of an office area and a large meeting room which is also used for training.

The service became registered with the Commission on 25 September 2020.

Regulated Activity	Home Care Service
Conditions of Registration	<u>Mandatory</u> Type of care: personal care, personal support Category of care: Adult 60+, Dementia care, Learning Disability, Autism, Physical and/or Sensory Impairment Maximum number of personal care / personal support hours: 600 hours per week Age range of care receivers: 18 and above

	<u>Discretionary</u> There are no discretionary conditions
Date of Inspection	16 June 2022
Time of Inspection	11am to 2:40pm
Type of Inspection	Announced
Number of areas for improvement	One
Number of care receivers using the service on the day of the inspection	Eight

The Home Care Service is operated by Tranquil Home Care Ltd and the Registered Manager is Elaine Gladwell.

The Regulation Officer reviewed the Statement of Purpose as part of the inspection process, and it was found to be reflective of the service provided. Some minor amendments were identified in relation to staffing levels / structure and the process for assessments / reviews. The Registered Manager acknowledged the changes required and submitted an updated Statement of Purpose on the day of the inspection visit.

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.

Overall, the findings of this inspection were positive. The Registered Manager engaged fully in the inspection process and ensured that all requests for information and records was fully met. In addition, several care receivers, family members, professionals and staff were happy to provide feedback on the service which was consistently positive. This included much praise for the Registered Manager.

There are a range of measures in place to support safe practices within the service and to identify and manage risk. Examples of this include policies and procedures, records management and reviews of service provision which include care receiver and family contributions. Out of hours on call procedures were discussed with the Register Manager. While it was recognised that there are procedures in place, this needs to be formalised. This is an area for improvement.

Recruitment practices were reviewed and the recruitment folders of eight new members of staff examined. All information relating to safe recruitment procedures was found to be in place.

There is a comprehensive induction process in place which provides appropriate learning opportunities, supervision and support for staff during the first few months of their employment. Following induction, staff are supported in their role through regular supervision, appraisal and regular competency reviews. This was found to be an area of good practice.

Training for staff was examined in detail and was found to be consistent with the requirements of the Home Care Standards. There was also evidence of appropriate training in relation to the categories of care provided.

There was evidence to support a strong emphasis on a person-centred approach to care and support. This was evidenced through care plans, feedback received, and initiatives undertaken to adapt communication to meet individual needs. This is an area of good practice.

INSPECTION PROCESS

This inspection was announced and notice of the inspection visit was given to the Registered Manager three days before the visit. This was to ensure that the Registered Manager 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.¹

This inspection focussed on the following lines of enquiry:

- **Safety**
- **Care and support**
- **Training**

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection report, the service's Statement of Purpose, communication records and notification of incidents.

The Regulation Officer sought the views of the people who use the service and / or their representatives. Two care receivers and two family members provided feedback to the Regulation Officer by telephone or in person having given prior consent to be contacted.

The views of one professional and four staff members were also obtained as part of the inspection process.

During the inspection, records including policies, care records, training records, recruitment files, inductions and incident reports were examined.

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

At the conclusion of the inspection, the Regulation Officer provided initial feedback to the Registered Manager. This was followed by final written feedback two weeks after the inspection visit.

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, two 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.

The improvement plan was discussed during this inspection, and it was positive to note that all the improvements had been made. This means that there was evidence of formal supervision for staff and care plan reviews are recorded.

The service is currently providing a total of 151 hours of support each week to eight care receivers. The size of packages spans two to 70 hours per week. The type of support ranges from assistance to access leisure and social opportunities, to daily support within care receivers' own homes. There are eight permanent members of staff employed on a mixture of full and part time contracts. The service is also supported by a pool of zero hour contracted staff. There is also a plan in place to increase the number of administration staff in the coming weeks.

The Registered Manager reported that there have been some challenges with recruitment and retention of staff. However, this has improved in recent months and there are plans to expand the service later in the year.

Safety

<p>The Standards outline the Provider's responsibility to ensure that people will feel safe and are kept safe. Care receivers will have the right to live safely and free from harm.</p>
--

The Regulation Officer reviewed a sample of 14 policies and procedures which were cross referenced to the Home Care Standards. The content was found to be robust with references to key legislation and supporting agencies where appropriate. All policies and procedures will be available to staff online when the service moves to a new electronic record management system.

Transport procedures were discussed, and it was identified that care staff use their own vehicles as part of their role for the transportation of care receivers where required. While it was recognised that there was a company vehicle policy in place, the Regulation Officer discussed with the Registered Manager the benefits of developing a transport policy which would capture all the safety measures required for the transportation of both staff and care receivers. This was undertaken by the Registered Manager within four days of the inspection visit.

The service provides minimal support for care receivers in relation to support with financial transactions. This includes activities such as food shopping. There have been several processes implemented to ensure that appropriate safety measures are in place. This takes account of accurate records of income and expenditure and submission of appropriate receipts which are made available to the care receiver and family members. It was noted by the Regulation Officer that there was no record of the financial support given within the care plan and the service did not have a policy for the handling of personal monies. This was acknowledged by the Registered Manager and immediate steps were taken to implement a policy and review the information contained within the care plan. A copy of the finance policy was sent to the Regulation Officer within four days of the inspection visit.

First Aid and Infection Control practices were discussed with the Registered Manager who was able to demonstrate that all staff are in possession of the necessary Personal Protective Equipment (PPE) for home and community visits. All staff have also been issued with First Aid kits.

There have been no safeguarding alerts raised since the last inspection. A policy is in place and safeguarding training is included within the mandatory training for the service.

There is a comprehensive complaints policy in place, a copy of which is given to care receivers as part of the contractual agreement. No formal or informal complaints have been recorded since the last inspection on 16 and 20 April 2021.

The Registered Manager was confident of the processes in place to ensure that care receivers and families can provide feedback on the service. Formal feedback is sought on a three to six monthly basis with informal telephone contact from the Registered Manager on a monthly basis. A sample of the formal feedback received was viewed by the Regulation Officer and was found to be complimentary of the service provided. This was supported in the feedback provided as part of the inspection, with prompt responses from the Registered Manager sighted as being very re-assuring.

Monthly reports are compiled by the Registered Manager. The Regulation Officer viewed the reports for March, April and May 2022 following the inspection visit and were found to clearly review a range of operational topics relating to the Home Care Standards, with actions and outcomes recorded.

Recruitment files for eight members of staff employed since the last inspection were reviewed. All safe recruitment checks were found to be adequately recorded and personnel files had the relevant information in place. The Registered Manager was also able to demonstrate her responsibilities relating to safe recruitment and the processes required when issues arise.

Notifications to the Commission since the last inspection were reviewed and a sample of three care receivers' files were randomly selected for review of accidents and incidents. No unreported notifiable incidents were noted.

There were no Significant Restriction of Liberty (SROL) authorisations in place at the time of the inspection. Training in the Capacity and Self Determination (Jersey) Law 2016 (CSDL) has been undertaken by established members of the team, with training currently being sourced for newly recruited members of staff.

Support for staff and clients is available via the main office and Registered Manager, with care receivers and family members confirming that responses to enquiries are prompt. There is information in care receivers' files within their homes on who to contact in an emergency. An informal process was found to be in place for on-call support for staff out with office hours. Formalised procedures with written guidelines and a designated rota for who will be on-call needs to be in place for staff, in order to ensure that staff are clear about who to contact out of office hours, particularly as the service expands. This is an area for improvement.

The Registered Manager confirmed that Tranquil Care is registered with the Jersey Office of the Information Commissioner (JOIC).

Care and support

<p>The Standards outline that people in receipt of care and support should experience compassion, dignity and respect. Care receivers, where appropriate should be involved in all decisions relating to their care and support in a way that respects their rights, individuality and beliefs.</p>

The Registered Manager undertakes an initial assessment of new referrals to ensure that care needs can be met. This is supplemented by the assessment information provided by the professional making the referral.

There are contracts in place for each care receiver which are agreed and signed before the service commences. Contracts contain information relating to type of service to be delivered, fees, notice periods for cancellations and termination of contracts and complaints procedures.

The service has been using a paper-based care plan and records system and copies are kept in care receivers' homes. Reviews are undertaken on a three-monthly basis and recorded in the care plan.

At the time of the inspection visit, the service was in the process of transferring to a new electronic care plan system called Carebeans. The Regulation Officer reviewed the new system and viewed samples of the care plans which were found to be comprehensive, demonstrated a good understanding of care receivers needs and provided detailed plans for visits. The system also includes an "all about me" section which provides insight into individuals wishes, preferences, likes and dislikes. Copies of assessments and reviews were also found to have been uploaded on to the system.

There were several examples highlighted to the Regulation Officer of the service's commitment to working to the principles of person-centred practices. This included the use of "living my best life" booklets provide pictorial references to the activities and events undertaken by care receivers and descriptions of what they have achieved in their day. The service is also responsive to individual preferences, respecting the wishes of one care receiver who did not wish staff to wear uniforms during visits and outings. One professional also spoke of the Registered Manager's willingness to work collaboratively and explore options in order to improve outcomes for care receivers.

Specific health needs are addressed within the care plans and appropriate direction given to staff. This includes areas such as nutritional and dietary requirements, mobility and safe handling.

The Regulation Officer had the opportunity to visit a care receiver in their own home to gain feedback on the care delivered to them. They provided a positive view of the staff who support them and the range of activities that they are supported to participate in. The care receiver spoke of the value they placed upon maintaining their independence and felt that the level of support provided recognised this.

The care plan folder was reviewed with the permission of the care receiver. There were lots of pictorial reminders of activities undertaken which prompted conversation between the care receiver and the Regulation Officer and it was clear that activities were based upon the care receivers wishes and preferences and interests. Care records were also found to be up to date. The Regulation Officer also noted warm and friendly interactions between the care receiver and staff member.

The adaptation of communication styles to meet individual needs was found to be a key strength. Examples of pictorial and written daily and weekly planners for care receivers were provided by the Registered Manager who explained this helps to provide prompts and reminders to care receivers about their day and for one individual with a cognitive impairment, it helped them to make sense of the reasons why support staff were coming to their home. This is an area of good practice.

During feedback there was consistently high praise given to the Registered Manager for her professionalism, client focused approach to care delivery, willingness to be flexible and support provided of staff. Care receivers and family members also highlighted that the Registered Manager is responsive to any queries or concerns raised and will regularly make contact to review the quality of care provided.

All care receivers and family members spoken to commented on the positive relationships that they have built with the staff who support them. One relative spoke of the re-assurance they received from staff and how well they dealt with care needs sensitively. They also noted that staff always offer to do things for them which they appreciated.

Other comments made by care receivers and family members included:

“Very good”

“Staff are very pleasant. They listen and do things the way I like”

“All very positive”.

“The care is delivered in very professional way”

Training

The Standards outline that at all times there should be competent and skilled staff available. Staff should be provided with a range of relevant training and development opportunities.

There is a strong focus on induction to the service which emphasis the standards for care delivery. This is supported by an induction policy and comprehensive induction programme which includes training in key areas and assessment of competency.

Staff are given opportunities to shadow experienced members of staff until they are deemed competent and feel confident to undertake solo duties. This is complimented by regular opportunities to review progress with the Registered Manager.

There have been four members of staff who have commenced working for the service in recent months. During feedback, they spoke positively of their induction experiences, training opportunities and the support that had been available to them during induction. This is an area of good practice.

The code of practice for health and social care support workers in Jersey is issued to all new staff members and they are asked to complete a workbook based on the seven key principles of the code.

A variety of training opportunities are available. All staff undertake the Care Certificate, as well as other mandatory training courses which are updated at regular intervals. This includes First Aid, food hygiene, safeguarding, safe handling and infection control.

There is a blended approach to training which includes online and classroom-based learning opportunities. Courses are delivered by credible training sources and professionals.

The Registered Manager reported that two members of staff hold a Level 3 Regulated Qualification Framework (RQF) or National Vocational Qualification (NVQ) in Health and Social Care, with another currently undertaking the award. One further member of staff also holds a nursing qualification. A further three members of staff will undertake an RQF qualification once they have completed the Care Certificate.

In addition, the Senior Support Worker and newly appointed member of administration staff will both have an opportunity to undertake the RQF Level 5 in Management and Leadership. This will help to develop roles within the service and provide additional managerial support to the Registered Manager as the service expands.

The service is registered to provide support for several categories of care and has a high dementia care profile. All staff receive training in dementia care which is supplemented by the completion of a workbook to consolidate learning. The Registered Manager explained that there was no provision of support for learning disabilities or autism at the time of the inspection, however there were plans to update training in this area in the coming months as the service would like to offer this type of support as it expands.

The Registered Manager demonstrated awareness of the need for staff to be trained to carry out specialist or delegated tasks. The team provide catheter care and have received specific training in this area.

The minimum standard for medication training within the service is the Level 3 RQF unit in administration of medication. At the time of the inspection visit, five members of staff were due to commence their training in July 2022.

There is a medication policy in place, as well as a medication error and near miss policy. There is provision for competency checks on at least an annual basis which are measured against a comprehensive list of performance indicators.

Formalised supervision sessions take place on a three-monthly basis. This was confirmed by staff members who spoke positively of the support they receive. Staff also commented on the regular informal opportunities which they have to discuss their role and explore any training opportunities which they feel they may benefit from. Appraisals are also undertaken on an annual basis and there are regular opportunities to in place to review competency and skill development. This is achieved through the staff competency framework which is overseen by the Registered Manager and the Senior Support Worker.

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.

Area for Improvement 1 Ref: Standard 6 To be completed by: 2 months from the date of inspection (16 August 2022).	The Registered Provider must ensure that the service has clear written procedures for the provision of on-call and provide a rota detailing the cover provided for staff.
	Response by registered provider: On-call written procedures and on-call rota has now been implemented.

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
Jersey JE2 3NN

Tel: 01534 445801

Website: www.carecommission.je

Enquiries: enquiries@carecommission.je