

Summary Report

Here2Help Limited

Home Care Service

Les Chenes
La Rue de la Guilleaumerie
St Saviour
JE2 7XF

12 May 2022

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 policy and procedure folder was reviewed at inspection, a number of the policies were found to need reviewing. There was one example of inconsistencies in practice compared to policy. This is highlighted further under the heading of 'safety'. This is an area for improvement.

A sample of recruitment files were reviewed at inspection, there was evidence of safer recruitment checks not being completed prior to employees start dates. Examples of these were Disclosure and Barring Service (DBS) checks and references not being in place. This is an area for improvement.

Medication training is provided by an online training forum. It is a requirement of the Standards for all care workers to have completed an accredited RQF Level 2 or 3 medication module in medication administration, prior to having any involvement in the administering of medication. Although some staff had completed this training, others had yet to do so and yet were already involved in medication administration. This is a significant concern and is an area for improvement.

The assessment and planning of care was reviewed during the inspection and a sample of care plans were viewed on the online system. The plans enable specific tasks to be identified that staff then carry out. The Interim Manager discussed that there was no assessment documentation in use, to assess the care needs of new care receivers. This is an area for improvement.

Feedback from care receivers and relatives concerning the care and support received was generally positive; this is highlighted further under the heading of 'care and support'. There was also evidence of trying to match carers with care receivers' needs and preferences to ensure person-centred care.

There was evidence of adequate staffing levels on the day of the inspection; however, staffing levels within the service had fluctuated due to recent staff turnover within the team and changes to management.

There was no clear induction policy for new employees; this is an area for improvement.

The safeguarding training available for staff was an online module, not specific to Jersey and therefore unlikely to relate to relevant local legislation and guidance. This is an area for improvement.

The annual appraisals and supervisions for staff were not up to date at the time of the inspection; this is an area for improvement. The Interim Manager showed the Regulation Officers a supervision template which could be used in supervision sessions with staff. It was discussed with the Interim Manger that an alternative template may be more useful and that the Commission may be able to provide an example of such a template.

A copy of the Statement of Purpose was reviewed as part of the inspection process; this had not been updated since March 2020 and subsequently this was identified as an area for improvement at the time of the inspection. For example, the organisational structure and age range needed updating.

The area for improvement from the previous inspection on 23 November 2021, concerning monthly reports, had not been met at the time of this inspection and so remains an area for improvement. This is discussed further under the heading 'inspection findings'.

IMPROVEMENT PLAN

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

Area for Improvement 1 Ref: Regulation 17 (5)	The Registered Provider must ensure that all safer recruitment checks are completed prior to workers commencing employment.
To be completed by: with immediate effect.	Response by registered provider:
	The service closed on 2 July 2022.
	Click or tap here to enter text.

Area for Improvement 2 Ref: Regulation 17 (4) (c)	To introduce a system of regular formal staff supervision and appraisal. To ensure staff are given the opportunity to discuss their role, any issues and training needs.
To be completed by: with immediate effect.	Response by registered provider: The service closed on 2 July 2022.
	Click or tap here to enter text.

Area for Improvement 3	The Registered Provider must ensure that all policies are kept up to date and reflect current best practice
Ref: Standard 1.4	guidelines. They must be reviewed at regular intervals and reflect local (Jersey) laws, practices and
To be completed by: three months from the date	support services that are available.
of inspection (12 August 2022).	Response by registered provider:
,	The service closed on 2 July 2022.
	Click or tap here to enter text.

Area for Improvement 4

Ref: Regulation 11 (1) (d)

To be completed by: 3 months from the date of inspection (12 August 2022).

The Registered Provider must ensure that all staff receive safeguarding training that reflects local (Jersey) relevant legislation and guidance.

Response by registered provider:

The service closed on 2 July 2022.

Click or tap here to enter text.

Area for Improvement 5

Ref: Regulation 14 (3)

To be completed by: with immediate effect.

The Registered Provider must ensure that any worker involved in the dispensing and management of medicines has appropriate training.

Response by registered provider:

The service closed on 2 July 2022.

Click or tap here to enter text.

Area for Improvement 6

Ref: Regulation 17 (4) (c)

To be completed by: with immediate effect.

The Registered Provider must ensure that all staff complete a structured induction process to ensure that staff are competent to work in the care service.

Response by registered provider:

The service closed on 2 July 2022.

Click or tap here to enter text.

Area for Improvement 7

Ref: Regulation 20 (3)

To be completed by: 1 month from the date of inspection (12 June 2022).

The Statement of Purpose will be regularly reviewed and updated.

Response by registered provider:

The service closed on 2 July 2022.

Click or tap here to enter text.

Area for Improvement 8 Ref: Regulation 19 (4) To be completed by: with immediate effect. The Registered Provider must produce a regular monthly report on the quality of care provided in compliance with registration requirements. Response by registered provider: The service closed on 2 July 2022. Click or tap here to enter text.

Area for Improvement 9	The Registered Provider must ensure that the service's assessment process is detailed and
Ref: Regulation 8 and 9	documented appropriately to ensure that the specific needs and preferences of care receivers are
To be completed by: with immediate effect.	identified.
	Response by registered provider:
	The service closed on 2 July 2022.
	Click or tap here to enter text.
	Click or tap here to enter text.

The full report can be accessed from here.