



**Jersey Care  
Commission**

## **INSPECTION REPORT**

**Gentle Care Limited**

**Home Care Service**

**Suite 3, Ground Floor, Tower House,  
First Tower Business Park,  
La Route es Nouveaux,  
St Helier, JE2 4ZJ**

**1 September 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 Gentle Care home care service. The service supports adults with personal care and personal support to enable them to live in their own home. This is the second inspection report since the service became registered under the Regulation of Care (Jersey) Law 2014.

Regulated Activity	Home care service
Conditions of Registration	<u>Mandatory</u>  Type of care: Personal care / personal support  Category of care: Adult 60+, Dementia, Physical disability, Learning disability, Autism  Maximum number of hours of personal care / personal support to be provided per week is 2,250  Age range of care receivers: 18 and above
Date of Inspection	1 September 2022
Time of Inspection	9.40am – 12.30pm
Type of Inspection	Announced
Number of areas for improvement	None
Number of care receivers using the service on the day of the inspection	20

The Home Care Service is operated by Gentle Care Limited, and the Registered Manager is Anne Ruth.

Since the last inspection on 13 and 20 August 2021, the Commission received an updated Statement of Purpose in August 2022. This was in relation to a reduction in the number of care receivers who were provided with a service.

## **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.

Safe recruitment processes are followed, and all staff have a period of induction before being assessed as being competent to work without supervision.

Notifications are made appropriately to the Commission. The management team identify safeguarding issues and make referrals appropriately to the Adult Safeguarding Team.

Referrals to this service are assessed by a member of the senior management team and the wishes of care receivers are considered as part of the care plan. Care plans are reviewed where there is a significant change or every six months.

The Registered Manager seeks feedback from care receivers and their relatives and takes action as a result of this feedback. Feedback from care receivers and relatives was overwhelmingly positive. This was evidence of good practice.

All staff undertake a probation period and must be signed off as competent by using an induction workbook.

Staff are provided with both statutory training and opportunities for development through the RQF Health and Social Care qualifications.

Feedback received from staff provided evidence of a supportive management team.

There were no areas for improvement for this service.

## INSPECTION PROCESS

This inspection was announced with one week's notice to ensure that the Registered Manager would be available.

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

This inspection focussed on the following lines of enquiry:

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

Prior to our inspection visit, the information held by the Commission about this service was reviewed, including the previous inspection reports.

The Regulation Officer sought the views of the people who use the service, and or their representatives by email. One Deputy Manager was spoken to as part of the inspection visit, and the views of all staff members were sought by email.

The views of three professionals, were also obtained as part of the inspection process.

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

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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/>

Following the inspection, the Regulation Officer provided feedback to the Registered Manager and Deputy Manager.

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

## INSPECTION FINDINGS

At the last inspection, no areas for improvement were identified that required any follow up on this visit.

### Safety

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.

Since the last inspection, the Registered Manager has reviewed and updated all policies. The Regulation Officer reviewed a sample of these policies and found them to be sufficient. A hard copy of the policies is available in the Head Office. All staff can access the policies online.

There are 50 staff employed at this service, including two Deputy Managers. The Regulation Officer reviewed recruitment records for three new members of staff. In all cases there was evidence that safe recruitment checks had been made prior to the start date of the employee. The Regulation Officer also reviewed criminal records checks for all further employees who had been recruited since the last inspection.

The Registered Manager highlighted issues with staff recruitment, which is acknowledged across the care sector. There are currently three vacancies at this service and recruitment is ongoing. Where necessary, the Registered Manager has reduced services provided in order to ensure safe provision of care.

In these circumstances, the Registered Manager has notified Adult Social Care services, notified the Commission and given appropriate notice.

There was evidence that the Registered Manager identifies safeguarding concerns and takes appropriate action. The service also ensures that notifications of incidents are made to the Commission as required by the Standards.

The Registered Manager is aware of their responsibilities to apply for authorisations of Significant Restrictions on Liberty (SRoL). Where necessary, these had been identified and were in place, with a calendar reminder to request an updated assessment annually.

There was evidence that the Registered Manager has a good understanding of the impact of working excessive hours on both care staff and care receivers. In one example, the Registered Manager has worked with the care receiver to explain why it is necessary for a shared responsibility for all the care team. Although it has been difficult at times, the Registered Manager has endeavoured to work with the care receiver to find a solution to the management of this care plan.

This home care service is registered with the Office of the Information Commissioner. The Registered Manger had requested an audit of their internal processes through this agency, and as a result all office staff received an upgraded course on data protection.

### **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>
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The Registered Manager has introduced a new assessment process for potential clients which includes needs, wishes and expectations. Referrals are mostly made from the Adult Social Care team and the assessment includes information provided in the social work report. All assessments for new care plans are completed by a member of the senior management team.

There is a computerised copy of the care plan in the head office, but each care receiver has a copy of their own care plan in their home. Risk assessments are completed by a member of the senior management team, and it was noted that positive risk taking is safely encouraged.

Care plans are reviewed and updated every six months, or where there has been a significant change in the needs or wishes of the care receiver.

One relative described how the staff had taken the care receiver to meet friends and to places that were important when they were younger. Their relative had really enjoyed this activity and they felt this had helped with their emotional wellbeing. This was an example of person-centred care.

It was positive to note that a survey was sent to all care receivers, or their representatives in May 2022. Overall, the feedback was positive. Where issues were highlighted, the Regulation Officer noted that there had been further discussion with care receivers and changes were made as a result. This was evidence of good practice.

Feedback was provided by several care receivers and relatives. A sample of comments were:

*“care is very good. I always know who is coming. The care plan involves us all. Issues have been resolved quickly. They all do a very good job.”*

*“(Relative) always seems pleased to see them. It’s been such a relief. Fantastic service.”*

*“Gentle Care has provided an excellent standard of care and service to my (relative). I would not hesitate to recommend them. The service is highly reliable and also flexible....the manager matched us with some lovely staff who went out of the way to personalise the care.”*

*“Gentle Care are very caring... would highly recommend”*

*“We are extremely happy with the level of care provided so far. The staff...have all been extremely well trained....management are available 24 hours a day and have always been prompt in dealing with any queries we may have.”*

A professional who provided feedback stated that they *“found this care agency to be really good to work alongside. They put the client’s and their families’ wishes at the forefront. Family members have expressed that they are very satisfied with the care delivered by this agency.”*

## **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.
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This service currently employs 50 care staff, plus the Registered Manager. There is an appropriate management structure in place to ensure that staff and care receivers can contact either a Deputy Manager or Registered Manager at any time. This includes an on-call system and is evidence of good practice.

All new staff undertake a probation period of three months, during which time they undertake a basic training programme. There is an induction workbook on each employee’s file, and there was evidence of both practical training and demonstration of the understanding of integrity and person-centred care. The Registered Manager at this service stated that they encourage all staff to begin the RQF Health and Social Care Level 2 qualification during this period, in addition to the basic statutory training.

It was positive to note that all staff are now encouraged and paid for the classroom hours to attend underpinning training and RQF courses. This has been a positive development in the last year.



There is a training record in place which demonstrates that all staff undertake both statutory and mandatory training.

Both Deputy Managers are currently studying for the RQF Level 5 Leadership qualification. This has been particularly difficult during the period of the pandemic, and both staff members have continued to cover shifts in addition to their management responsibilities. Unfortunately, this additional work has led to a need to extend the time for both staff members to complete this qualification. However, both staff members remain committed to the organisation and their development was noted during this inspection visit. Succession planning was a positive feature of this service.

All staff undertake medications training and there was evidence that a member of the management team check competencies in this area yearly. Where there have been medications errors, the Registered Manager will use this opportunity to update training, not just for the individual but for the team.

It was positive to note that all staff undertake training in Positive Risk Taking and Learning Disability.

Staff were all sent an email requesting feedback on their experience of working for this service. Overall, the feedback was positive with a selection of comments such as:

*“I feel very lucky to work for such a great care provider and I always say I have the best job in the world. It’s the best company I have ever worked for.”*

*“We are always encouraged to work together as a team and to always communicate with each other and talk about any issues that may occur.”*

*“the management team are very supportive, approachable, helpful and understanding.”*

*“They are really organised....a really good company to work for.”*

One member of staff reported that they had worked for this home care agency for a number of years and stated that the Registered Manager is *“passionate about her clients and has a flair for choosing a team that will suit the client’s needs.”*

## **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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