

## **SUMMARY REPORT**

## **TESH Healthcare Jersey Limited**

**Home Care Service** 

Regus
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Esplanade
JE2 3AS

26 October 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. It was noted the service had only recently taken on care packages despite it being registered in 2021 and having been subject to one previous inspection 12 November 2021. At that time, it had been anticipated commencing care toward the end of 2021, and once all policy and procedures had been fully established and/or reviewed by the new manager at the time.

It was pleasing to note that the most recently appointed Registered Manager has played a key part in addressing or ensuring that the areas for improvement as recorded in the last inspection report have been appropriately actioned. Discussions of their professional background in healthcare which has included local work experience in clinical practice, and prior to taking on the registered position, evidenced a very well informed and knowledgeable practitioner.

Supervision and support of staff that is in place and the managerial approaches to assessment and care planning principles demonstrated a holistic approach to care delivery which appears well coordinated. Plans for introduction of deputy manager and care coordinator roles to further embed a strong culture of leadership and clinical oversight was also positive to note.

Aligned with this were good systems of information technology (IT) being utilised for care staff when undertaking their primary roles and responsibilities in the community, and available within the new and much better office facility which the Provider has recently invested in.

It was recorded on the day of the inspection eight care receivers were in receipt of care but also noted only three provided with support under the "live-in" care model. This was a primary model of care identified in the Statement of Purpose (SoP) prior to registration of the service. While this was not of any concern as the service is still at an early stage of building its client base some further consideration was advised about any possible refinements to the SoP which may be indicated by this different

business model. It was noted recruitment of locally based employees will also support these ways of working if the service progresses in that way.

From discussion with the Registered Manager, it was apparent that the Provider had not fully appreciated some of the requirements to inform the Commission of any notifiable incidents (notifications), through the identified communication channels. This was made as an area for improvement. Similarly, there were some gaps in safe recruitment protocols and retention of records and this was also made an area for improvement. However, the general approach to safe recruitment was not of concern.

It was noted from care plan approaches and recording systems used the instructive and helpful information that would enable appropriate interventions to be followed in supporting care receivers. The Registered Manager provided a comprehensive summary of how care needs will be established through initial assessment and engagement with care receiver and/or significant others such as relatives and other professionals i.e., from healthcare professionals submitting a referral to the service from in-patient setting.

Feedback received from a variety of sources confirmed good communication and involvement by the Provider/Registered Manager to meet the expected Standards.

## **IMPROVEMENT PLAN**

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

Area for Improvement 1	A review of internal systems for incident
	reporting must be undertaken to ensure that all
Ref: Standard 4.3 & Appendix 7	notifiable incidents are submitted to the
	Commission.
	Response by registered provider:
To be completed by:	A review of internal systems has been
	undertaken and protocols revised to ensure
With immediate effect.	notifiable incidents are submitted to the
	Commission when required. The registered
	manager will report all incidents within the 48
	notification period.

Area for Improvement 2  Ref: Standard 3.5, 3.6	Recruitment processes and due diligence as carried out for all new employees should have fully auditable and relevant records filed for inspection
	Response by registered provider:
To be completed by:	A thorough review of the current system has been undertaken and registration has also
With immediate effect	been completed for Tesh Healthcare to be able to apply directly for DBS reports. Furthermore, the admin team has been expanded to make sure 2 people double check the compliance documents prior to on boarding any new staff members.

The full report can be accessed from <a href="here">here</a>.