



**Jersey Care
Commission**

INSPECTION REPORT

1st Choice Island Home Care Ltd

Home Care Service

**Beach View
La Route De La Haule
St Peter
Jersey
JE3 7YD**

22 November 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 Island Home Care. The office of the service is situated in the Parish of St Peter, in the home premises of the Director. The Service provided is island wide.

The service became registered with the Commission on 21st March 2022

| Regulated Activity | Home care service |
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| Conditions of Registration | <u>Mandatory</u> Type of care: Personal care and personal support. Category of care: Adults 60+, Dementia Care, Physical Disability, Learning Disability, Autism, Mental Health, Substance misuse (drugs and/or alcohol), and 17+ |

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| | <p>Maximum number in receipt of personal care / personal support to be provided per week: 600 hours.</p> <p>Age range of care receivers: 17 years and over.</p> <p><u>Discretionary</u></p> <p>Condition that James Videgrain registered as manager of Island Home Care must complete a Level 5 Diploma in Leadership in Health and Social Care by 21 March 2025</p> |
| Date of Inspection | 22 November 2022 |
| Time of Inspection | 10.30am to 13.30pm |
| 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 1st Choice Island Home Care Ltd, and the Registered Manager is James Videgrain.

The discretionary condition on the service's registration was discussed with the Registered Manager. This is in process and the Registered Manager is hoping to complete the qualification within 2023.

This is the first inspection since the establishment of the business in March 2022. The Commission has received two applications from the registered provider to vary a condition on the service's registration. The first application was to add four new

categories of care. The second application was to add one more additional category of care for a care receiver.

The Service has had the same Registered Manager in place since the initial registration.

The Commission held a copy of the service's Statement of Purpose from the initial registration. On review with the Registered Manager, there are areas requiring revision such as 'staffing arrangements'. This was written before the service was operational, and therefore refers to the intentions at that time as opposed to the current reality. The Regulation Officer therefore recommended to the Registered Manager they revise the Statement of Purpose to reflect the service that is now operational.

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.

This was the first inspection of the service since becoming operational in March 2022.

The overall findings of this inspection were positive. The Regulation Officer was presented with evidence of a service that puts the needs of the care receivers and its staff members at the heart of the business. This is in keeping with the ethos of the service as highlighted in the Statement of Purpose.

The provision of care provided is safe, supportive, inclusive and co-produced by the care receivers and their families.

At the time of inspection, the service was primarily providing support to a range of care receivers in their own homes. This was for care receivers 60+, those requiring dementia care, autism, physical disabilities and mental illness.

The recruitment process follows good practice with a safe recruitment policy available to provide underpinning guidance.

The Registered Manager demonstrated knowledge of the process for notifying the Commission of incidences, or when there has been an authorisation of a Significant Restriction of Liberty (SRoL), for any of their care receivers.

There is evidence of a robust 'standards based' induction programme for new members of staff. A competency framework is utilised, this is signed off by the Registered Manager after a three-month deadline, which can be extended to six months if necessary.

A programme of mandatory training is provided. This initially includes sixteen modules, with policies to support areas such as moving and handling, medications etc. The Registered Manager reported that he aims to employ people that have a minimum of two years of care experience, to ensure that they are sufficiently skilled and competent to meet the needs of the care receivers.

Individual training needs are identified by the staff member and the Registered Manager. Care packages that staff members are supporting are taken into consideration when looking at targeted training needs.

Training is clearly recorded for all staff members including the Registered Manager. The Registered Manager has a matrix system in place which ensures he has oversight of staff training.

Staff are to be provided with an annual appraisal and they receive quarterly supervision, which has a restorative focus and is planned and recorded.

All care receivers have a holistic assessment of their needs completed by the Registered Manager, before the care package is agreed and implemented.

Care plans are person centred and always co-produced with the care receiver and their families if possible. They have a minimum review period of three months.

Care receivers and relatives were contacted to gather their views about the service. The feedback received was overwhelmingly positive; this was substantiated by the feedback received from staff and health care professionals. This evidenced that the care given promoted respect, honesty and inclusion of the care receivers.

The organisation has a complaints procedure which is explained to the care receivers during their assessment and introduction to the service. Complaints are considered and responded to by the Registered Manager. The Organisation's Statement of Purpose clearly sets out the initial complaint's procedure.

INSPECTION PROCESS

This inspection was announced and was completed on 22 November 2022. A few days' notice was given to ensure that the Registered Manager was available. Follow up enquiries with care receivers, relatives and staff members were finalised within two weeks of the visit.

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 Statement of Purpose, notifications, monthly quality reports and any correspondence received.

The Regulation Officer sought the views of the people who use the service, and/or their representatives, and spoke with the Registered Manager and other staff.

There were no care receivers present during the inspection. The Regulation Officer asked the Registered Manager to provide a sample of care receivers who were then contacted by the Registered Manager to offer the opportunity to participate in the inspection feedback.

The Regulation Officer established contact with three care receivers and three family members. All contacts were by telephone.

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

Staff members were provided with the opportunity to contact the Regulation Officer to give feedback on their experiences of working for the organisation; the views of one member of staff were received.

Additionally, the Registered Manager provided the contact details of three independent healthcare professionals who had worked in partnership with Island Home Care service. All three professionals were contacted, and a comprehensive response was received from one professional.

During the inspection, records including policies, care records, recruitment files, staffing rotas, training records, incidents and complaints were examined.

At the conclusion of the inspection, the Regulation Officer provided feedback to the Registered Manager.

This report sets out our findings and includes areas of good practice identified during the inspection. There were no areas of improvement identified.

INSPECTION FINDINGS

This was the first inspection of the service since becoming operational in March 2022.

The Regulation Officer reviewed notifications sent to the Commission before attending the inspection. These were cross referenced with the log of notifications that the service held. It was positive to note that all incidences that met threshold for reporting to the Commission had been passed on.

Even though this is a relatively new service that has only been operational since March 2022, the Regulation Officer was able to find evidence of an organised, positive, and well-run service.

This was demonstrated through the robust leadership of the Registered Manager and the presence of a supportive team, who come with previous experience, skills and competencies. These features of the staff members are further enhanced with additional training and up to date policies and procedures that they can refer to in their practice.

One member of the staff team gave positive feedback regarding their experience of working for Island Home Care. Stating that they 'always feel supported' by the Registered Manager. The staff member reported that she had been given opportunities to further enhance her knowledge through having the opportunity to complete additional training, in an area of care that she had not had experience in previously. She told the Regulation Officer that she has been able to utilise her knowledge and new skills with some of the clients that are supported by the service.

Safety

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| <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> |
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Prior to the Inspection, the Regulation Officer requested the last three months of quality assurance reports for the service. The Registered Manager provided these, and they were reviewed before the inspection. The Regulation Officer noted that the reports had been written by the Registered Manager who is also the Registered Provider. It was noted that this did not offer any independent oversight of the service. The Regulation Officer recommended that an appropriate independent person be considered to complete the monthly reports. This has not been made an area of improvement as the Registered Manager advised that he would remedy this by the time of the next monthly report and he identified that he would utilise his newly appointed 'care manager' to have oversight of the quality assurance.

The Registered Manager follows safe recruitment practices which includes an application form, interview, employment contract and clear job description. The

Disclosure and Barring Service (DBS) process is utilised prior to an individual being employed. Two professional references are requested or a character reference if the employee is unable to provide two professional ones. The Regulation Officer viewed three recruitment files which contained evidence that all relevant safe recruitment checks had been completed. The Registered Manager demonstrated his knowledge of utilising a risk assessment should there be any issues with the DBS process after employment.

Care receivers' records are documented on a General Data Protection Regulation (GDPR) approved online system called 'Careline- live'. The planning and implementation of care is recorded on Careline. This is made accessible to care receivers if they request to see their records. Staff members access the record via their work mobiles. Each staff member records the care event before they leave the care receiver's home, ensuring that they are contemporaneous.

Some care receivers have prescription medications. The full prescription and its details are available on the care receiver's record. Consequently, when staff members are accessing this information, they are able to see the requirements for dispensing, and the medication care plan.

The Regulation Officer was satisfied that care receivers' personal information is stored safely and securely.

The service provides a comprehensive set of policies in line with the business and the care delivered. Policies are introduced to staff members on their induction, and throughout their employment when they may need highlighting for certain practices. The list of policies seen appeared appropriate and based on best practice. They are regularly reviewed by the Registered Manager.

There is a policy for lone working which considers the safety of the care receivers and the staff team. The electronic online system 'Careline- live', gives reassurance that the Registered Manager can see when the staff member has arrived and left the place of care. A Quick Response (QR) code is scanned by the staff member when

they arrive at the home of the care user, which then locates them. This not only provides oversight for safety matters but can also alert the manager if the staff member has not arrived and other staff need to be assigned to provide care.

Additional policies are signposted to the staff team by the Registered Manager once they have become available.

The Registered Manager confirmed that there were no Significant Restrictions on Liberty (SRoL) authorisations in place at the time of the inspection. Confirmation was given that the Capacity and Self Determination (Jersey) Law 2014 (CSDL) training is part of the mandatory programme.

During the initial assessment and contract agreement, care receivers are made aware of the procedure for making complaints or raising any concerns. Care receivers and their family members who were contacted by the Regulation Officer for feedback, confirmed that they were made aware of the complaints process. One care receiver reported that they “would have no worries about calling” the Registered Manager and raising any concerns, and that he was always ‘very easy to get hold of’ and “good at listening”.

Staff are also made aware of the complaint’s procedure. The Registered Manager encourages the opportunity for staff and care receivers to provide compliments or positive feedback to the service. Any complaints also are filtered into the Commission via notifications.

Safeguarding practice is prioritised. There is a clear safeguarding policy and staff are encouraged to access the ‘Making Safeguarding Personal’ (MSP) local training. Adult safeguarding training is mandatory for all staff members in their induction period if they are not up to date on commencement of employment. The Registered Manager is trained to provide Safeguarding education alongside the Safeguarding Partnership Board (SPB). He advised that he utilises his own safeguarding knowledge to deliver training to the staff team.

Staff members receive mandatory training in medicines management. The opportunity to progress and complete the Regulated Qualifications Framework (RQF) level 3 is available to staff and encouraged by the Registered Manager. Care receivers' medication prescriptions are available for reference on the care receivers' online records.

Competencies are passed by the staff before they are authorised to dispense medicines without supervision.

Care receivers have their medication stored in a locked box in their home. With consent from the care receivers', staff hold the key and administer the medication during the care episode in line with care receivers' individual prescriptions. This helps to prevent any medication errors where the care receiver may take their medication and also be given it by the staff.

Care and support

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.

Referrals into the service can be made by families, GP's, social care professionals, or the individual themselves. At the time of the inspection, Island Home Care were offering a service to a range of individuals that meet the home care criteria, for example those requiring dementia care or experiencing mental illness.

Each care receiver has an assessment of need which may also include a risk assessment where necessary. This is completed by the Registered Manager. Having viewed some of the initial assessments during the inspection, it was evident that time is taken to gather as much information from different sources about the care receiver to include in the assessment. This includes information from the care receivers and their family members that know them well. The assessments are detailed, holistic in nature and co-produced by the care receivers. A relative of one

care receiver fed back that the Registered Manager, 'listens to my daughter and there is child focused care planning'.

One professional commented about the Registered Manager in their feedback that, "when requested he is able to provide beneficial insight and information of clients during multi-disciplinary team discussions".

The service currently employs fourteen full time health care support workers, one full time holiday cover support worker, one care manager, one director and four bank support workers. The Regulation Officer was satisfied that there is an appropriate number of staffing hours to meet the assessed needs of the current care packages. The recent introduction of a care manager will support the management structure and allow for an additional person that the care receivers and staff team can refer to if needing to seek advice and support or escalate concerns to.

The electronic staffing rotas were seen by the Regulation Officer who was satisfied that there were sufficient staff in place to cover the current workload.

The Registered Manager confirmed that his staff members are qualified in the level 2 or level 3 Regulated Qualification Framework (RQF).

The Regulation Officer was able to review several care records during the inspection. The records consisted of individual care plans, risk assessments and daily recordings related to the care received. Evidence was seen of inclusion of the wishes and feelings of the care receivers and family members. Care plans provided clear guidance on the tasks and support needed for each care receiver.

The care plans are reviewed as standard a minimum of every three months.

The service utilises digital Medication Administration Record's (MAR) which are available in care receivers' records for those that are taking medication. Staff can access the MAR sheet which details the medication/s and when they need to be administered. The system is designed to provide a recording of the medication administration.

The Regulation officer was able to see evidence of collaborative working with partner agencies such as the occupational therapy service and the adult social work team. Feedback was requested from some of the partner services. One professional reported that, "James and his team appear to have good working relationships with clients' loved ones and encourage active involvement from clients' support networks to enable person-centred support to be delivered".

The Registered Manager, when introducing new staff to care receivers, ensures that there is always an introduction visit completed by the current staff member with the new staff. The client's preferences are handed over directly during this visit, with the care receiver and they are encouraged to take part in the handover of information.

Where possible, the Registered Manager attempts to carefully match the staff member with the care receiver dependant on skills and experience. This is appreciated by the care receivers. Feedback from one care receiver stated that their carer/s are generally, 'on time, happy and communicate well if they are running late or if there is a change in schedule'.

The privacy and dignity of care receivers is always considered. A care receiver informed the Regulation Officer that her carers inform her if they need to share information about her, such as when a different staff member is going to be covering for the regular staff. When referring to how and when their information is shared, the care receiver reported that, 'I am confident and reassured', that this happens appropriately. The same care receiver also commented that by sharing information, the staff team are, 'singing from the same hymn sheet', and therefore provide consistency and respect her wishes. The Registered Manager ensures that all staff sign a confidentiality statement when they commence work with the organisation.

Care receivers and their relatives who were contacted for feedback, were asked about whether they were clear on how to make a complaint, give positive or negative feedback about their care or generally raise any issues. It was positive to hear that all the individuals spoken to reported that it is easy to get hold of the Registered Manager and communication is very good. It was understood that the Registered

Manager would be the person to contact to deal with any concerns, and that care receivers felt confident that any problems would be dealt with effectively.

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.

For care receivers that may have additional health needs that require more specialist training for the staff members, the Registered Manager advised that they identify the appropriate training. This is offered to the staff members that are looking after these care receivers. The team also work collaboratively with other health professionals to meet any additional needs of the care receivers.

An extensive induction programme is offered for new employees. This follows a robust recruitment process that requires employees to have had a minimum of two years care work experience. Staff follow a competency framework which includes training, practical skills and observations of care packages being delivered. Staff competencies are signed off by the Registered Manager and senior care staff when they are satisfied that the specified standards have been met. There is a general expectation that the induction process will be completed within a three-month timeframe. However, this can be extended to six months if this is satisfactory to the staff member and Registered Manager.

There are up to seventeen modules of mandatory training offered, which is mostly provided online by organisations which include, 'Care College', 'Care Hub' and 'Grey Matter'. The Registered Manager has skills and training in some areas such as safeguarding, where he is qualified to deliver the training to the staff.

Training for delivering medications is prioritised and, the competencies for this are accessed via an e-learning package. All members of the care staff team have a

minimum of the Level 2 Delivering Medication qualification and some also are trained to Level 3.

In order to identify individual staff learning and training needs, the Registered Manager undertakes an annual training needs analysis. Within this, the packages of care delivered by individual staff members are considered. One staff member confirmed that they were able to identify some additional training around working with a care receiver with autism, and that this was supported and undertaken. The staff member informed the Regulation Officer during feedback, that they utilise what they learnt everyday with a couple of care receivers that they support.

The Regulation Officer reviewed the training matrix available electronically for all staff members. This gives the Registered Manager a suitable overview of the training needs of his staff members. The organisation will give protected time to ensure that mandatory training is completed.

The Registered Manager recognises that annual appraisals are a necessity to understand and encourage staff members to think about their professional development and recognise any learning needs. As this is a new business that has been functioning for less than a year, the Registered Manager explained that no annual appraisals had been completed at the time of the inspection. However, the Registered Manager intends to complete the appraisals for all staff members by the end of the first year.

Supervision is mandatory for the staff care team. It is completed by the Registered Manager at a minimum of every three-months. It is formalised in that a record is made with specific actions identified. The well-being of staff is discussed in their supervision. It was confirmed by one member of staff that they receive timely supervision and that they find it a 'safe space' to discuss work-based issues, and home/life balance.

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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