



**Jersey Care
Commission**

Summary Report

Tutela Jersey Limited

Home Care Service

**Ground Floor
CTV House
La Pouquelaye
St Helier
JE2 3TP**

8, 9 November & 9 December 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.

Since the last inspection on 16 and 18 May 2022 where five areas of improvement were identified, Tutela have achieved the required improvements in two areas, with three remaining as areas for improvement. This relates to the induction, supervision and ongoing training opportunities for staff.

Feedback received from care receivers and their relatives was generally positive about the care and support that they receive and the staff teams who support them. This was also witnessed by one Regulation Officer who visited care receivers at home. However, some concern was expressed regarding the quality of service delivery and lack of knowledge and understanding of staff.

This was echoed in the views of professionals who expressed their concerns relating to a variety of issues which included staff training, lack of consistency within staff teams and the ongoing support for staff. Several professionals also identified issues with communication, failures to implement recommendations, or to seek advice and support from professionals when issues are identified.

Generally, staff reported that they felt supported in their roles. There was a commitment to providing support which is responsive to individual needs and preferences.

Staffing levels were identified as an area of concern with insufficient levels of contracted staff available, to meet the number of support hours required each week. This has resulted in some staff working excessive hours on a regular basis.

There were sufficient systems for reporting of incidents / accidents. However, there were multiple examples of under reporting of notifiable incidents to the Commission. It was also noted that there are no systems in place to monitor and audit incidents /

accidents internally and poor recording of outcomes and actions taken following incidents.

There was a lack of governance systems and processes within the service. This included audit, quality assurance frameworks and alert systems. Governance frameworks provide the foundation upon which safe systems of working can be established. This is, therefore, a particular area for concern.

Regulation Officers identified that the growth of the service has been out of pace with the development of appropriate management structures and governance frameworks, leaving the service to rely upon informal practices. This was acknowledged by the Registered Manager. It is therefore essential that a development plan is put in place which identifies the actions required to improve and maintain safe and effective delivery of services.

There are nine areas for improvement made as a result of this inspection.

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.

<p>Area for Improvement 1</p> <p>Ref: Standard 3.14</p> <p>To be completed by: 2 months from the date of inspection (9 February 2023).</p>	<p>The Registered Manager must ensure that all care / support staff are given regular opportunities to discuss their role and identify any issues through formal supervision. Supervision sessions must be carried out a minimum of four times per year with records retained.</p> <hr/> <p>Response by registered provider:</p> <p>Online and onsite training has been given to selected team coordinators staff, who are either enrolled on or have an RQF Level 3 or higher, to take on the role as supervisors for members of care/support/office staff. Supervisions have now been allocated on a quarterly basis with one of the qualified team coordinators with an end of year appraisal (3x supervisions/annum & 1 appraisal). The deadline date of the 1st April 2024 has been set for all team leaders to hold an RQF of Level 3.</p> <p>Team coordinators will receive supervisions from the registered manger and an external professional who initially trained them in supervisions and is a member of Tutela's developing coaching team. This supervision will be specific to their supervision role for the initial 12 months.</p> <p>Both directors will receive monthly mentoring of 1 hour's duration from an external management/risk management consultant.</p> <p>Further details and deadlines can be found on Tutela's Development plan under section 'L&M SP 7' which will be reviewed and updated at the end of each month.</p>
<p>Area for Improvement 2</p> <p>Ref: Standard 3.10</p>	<p>The Registered Manager must ensure that there is a structured induction programme for staff to follow during the first few months of employment which includes an assessment of competency.</p>

To be completed by: 2 months from the date of inspection (9 February 2023).

Response by registered provider:

Tutela has an induction course that is delivered in two parts and covers the following:

- Being a 'Care Partner' with Tutela
- Our History, Culture, Beliefs and Direction
- Underpinning Psychological Models
- The Science of Safety and Trauma Informed Care
- Autism Spectrum Disorder.
- Learning Difficulties and Common Mental Health Conditions, Personality Disorders and Psychosis
- Self-Harm

A formal induction program is in place for new staff with regular viewpoints in place. Each recruit is guided/supervised through the process by the Team and Client Support Co-Ordinator who liaises closely with the relevant Team Co-Ordinator.

A competency framework and check list is in place for the Team and Client Support Co-Ordinator and team coordinators to use within the induction period and prior to final sign off. The competency framework will continue to be reviewed in supervision.

An induction process for team coordinators has also been designed which include a role specific competency framework.

The signing off of new staff and new team coordinators will be conducted at the end of the 4-week induction period. A mentoring/coaching course is currently being piloted by two team coordinators. The first induction commences 01/04/23.

Further details and deadlines can be found on Tutela's Development plan under section 'L&M SP 1' which will be reviewed and updated at the end of each month.

Area for Improvement 3

Ref: Standard 3.11, 3.12

To be completed by: 2 months from the date of inspection (9 February 2023).

The service needs to clearly identify the statutory and mandatory training required and ensure the provision of specialist training in relation to the categories of care provided by the service. Staff members who hold supervisory / senior positions must either possess or be working towards the appropriate type and level of qualification. Staff training must be completed within agreed timeframes and recorded accurately within a training database.

Response by registered provider:

Tutela has identified the statutory and mandatory training required, this is all covered in staff members care passports which are completed online through the companies outsourced eLearning platform. A further and up to date database sheet with completion dates is currently in progress and will be implemented into our new and upcoming care management software, Tagtronics.

Trauma informed approach training, Level 1, has been initiated and will be rolled out to all staff to complete. Team coordinators will complete Levels 1 and 2. SRols and Mental Capacity training will also be rolled out to all staff in 2023. Dates are being coordinated.

Specific training is also available and has been identified for care/support in relation to the categories of care provided by the service staff pool of external and internal trainers which we work with to deliver this. Members of support/care staff are also encouraged to let their supervisors know about any training they may want to undertake.

Further details and deadlines can be found on Tutela's Development plan under section 'L&M SP 5' which will be reviewed and updated at the end of each month.

Although there is a learning disability module delivered in the induction training a supplementary online course has been identified for care staff to complete as a component of their CPD commitment in 2023.

Bespoke condition/client presentation training continues; an example is a specific 2hr training delivered 20/02/2023 to a team around the principles

	and use of the SPELL framework and working with rumination and emotional de-regulation.
<p>Area for Improvement 4</p> <p>Ref: Standard 4.3</p> <p>To be completed by: 2 month from the date of inspection (9 February 2023).</p>	<p>The Registered Manager must ensure that there is sufficient training in place for staff to identify when accidents and incidents must be reported to the Commission. This should include an understanding of the process for reporting. The intended outcome is that all notifications which must be made to the Commission are made in a timely manner.</p> <p>Response by registered provider:</p> <p>Protocols and guidance have been utilised for reviewing and responding to incidents of challenging behaviour and medication errors. Bespoke training in the appropriate use of ABC tracking charts and completing incident reports is being organised for team-coordinators and office staff to ensure they understand the procedures to follow through-out the process.</p> <p>Training for team coordinators and managers needs to be sourced from the JCC in the reporting of notifiable incidents and a roll out planned, these training dates are yet to be confirmed a deadline of the 28th of April 2023 has been set for this.</p> <p>Further details and deadlines can be found on Tutela's Development plan under section 'L&M SP 2' which will be reviewed and updated at the end of each month.</p>
<p>Area for Improvement 5</p> <p>Ref: Standard 8.2</p> <p>To be completed by: 3 months from the date of inspection (9 March 2023).</p>	<p>There must be a management structure in place which reflects the size of the service, volume and complexity of the care provided.</p> <p>Response by registered provider:</p> <p>This was completed by the registered manager on the 17th February 2023, where the management structure clearly defines roles, responsibilities, and areas of accountability.</p>
<p>Area for Improvement 6</p> <p>Ref: Standard 9</p> <p>To be completed by: 3 months from the date of inspection (9 March 2023).</p>	<p>The Registered Provider and Registered Manager must ensure that there are sufficient governance frameworks in place which is appropriate to the needs, size and complexity of the service. This should include quality assurance, audit, alert systems, guidelines and protocols.</p>

	<p>Response by registered provider:</p> <p>This was completed in February 2023 by the registered manager with guidance from an external management/risk consultant.</p>
<p>Area for Improvement 7</p> <p>Ref: Standard 3.9, 9.3</p> <p>To be completed by: 2 months from the date of inspection (9 February 2023).</p>	<p>There must be at all times a sufficient number of support staff available to meet the needs of care receivers. Staffing resources available must be regularly monitored and measured against the hours of support required with appropriate action taken when deficits are highlighted.</p> <p>Response by registered provider:</p> <p>Recruitment is ongoing and advertisements for support staff are placed on the Gov.je website and various social media platforms including Facebook and Instagram. Care hours are now analysed weekly. Tutela has now met the target set by the JCC to reduce care hours. The Company is now in credit in staff hours available when matched against care hours delivered each week.</p>
<p>Area for Improvement 8</p> <p>Ref: Standard 9</p> <p>To be completed by: 3 months from the date of inspection (9 March 2023).</p>	<p>There must be a written development plan in place for the service which identifies the actions required to improve and maintain safe and effective service delivery, timescales for implementation and individuals responsible for implementation.</p> <p>Response by registered provider:</p> <p>Tutela's Development plan has been completed and is readily available. The Development Plan will be reviewed and updated at the end of each month and will be a live document. A SharePoint link has been offered to the JCC, so they have full visibility of progress. An invitation to attend the monthly review meetings has also been extended to the JCC should they want to attend. Dates for the next 3 meetings have been provided.</p>
<p>Area for Improvement 9</p> <p>Ref: Regulation 5 (2), 6 (1), 8 (1) and Standard 6.5</p>	<p>The service must ensure that there are open and transparent practices in place which ensure that families are appropriately involved and that professionals are consulted when assistance in providing appropriate care and support is required.</p>

<p>To be completed by: with immediate effect</p>	<p>Response by registered provider:</p> <p>One of the Directors is responsible for liaising with families on a regular basis. These contacts will be recorded formally, and any concerns raised by families acted upon in a timely manner. In addition, the Team and Client Support Co-Ordinator will be coordinating client and family reviews to be carried out and at 6 month intervals. Any concerns will be acted upon in a timely manner.</p> <p>Monthly meetings with several key professionals are currently being organised and held by the Team and Client Support Co-Ordinator. These include Highlands College, The Community Adult Mental Health, and Learning Disabilities Teams the Adult Respite Service. A standard has been set within Tutela that all Emails and telephone call from external professionals will be responded within 24hr of the communication being received.</p>
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The full report can be accessed from [here](#).