



**Jersey Care
Commission**

INSPECTION REPORT

TESH Healthcare Jersey Limited

Home Care Service

**Regus
Suite 136 Floor one
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Esplanade
JE2 3AS**

23 March 2023

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 TESH Healthcare Jersey Limited home care service. The service was registered under the Regulation of Care (Jersey) Law 2014 on 19 July 2021 and operates out of Regus office suites in St Helier. The service aims to provide adults with a range of care and support services, ranging from domiciliary services to a live-in care model.

At the time of the last inspection in October 2022, this service had only recently become fully operational. Since then, this service has continued to build slowly and now has thirteen care receivers, with fourteen care workers contracted to deliver the required care and support.

Registered Provider	TESH Healthcare Jersey Limited
Registered Manager	Julie Smith
Regulated Activity	Home Care Service
Conditions of Registration	Maximum number of personal care/ personal support hours to be provided per week is 600. Category of care provided is: Adult 60+ Physical disability and or sensory impairment

Date of Inspection	23 March 2023, 9.35am to 2.45pm
Type of Inspection	Announced
Number of areas for improvement	Six
Number of care receivers using the service on the day of the inspection	Thirteen

The Commission received an application on 25 November 2022 to register a new manager. Julie Smith became the Registered Manager for this service on 3 January 2023.

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.

At the time of inspection, the Registered Manager had only been in their role since 3 January 2023. The Registered Manager reported a limited handover from the previous manager and uncovered several instances of poor document management, which they have been addressing over the last few months.

The last inspection in October 2022 identified two areas of improvement. The service has addressed one area for improvement, with the Commission now receiving notification of notifiable events as per the Home Care Standards. However, fully auditable recruitment processes and personnel records remain an area for improvement.

The Regulation Officer identified a further five areas for improvement during this inspection, which totals six areas for improvement now required for this service.

The records of care staff needed to be improved, which has been recognised by the Registered Manager who has been putting together paper personnel files; however, these still need to be completed. This is an area for improvement.

There was evidence of adequate inductions for care staff on their personnel files, alongside a completed competency checklist. Alongside this was evidence of reflective staff supervision and regular quality assurance observations of care delivery, which the Registered Manager undertakes. These are good areas of practice.

The Regulation Officer viewed a selection of care plans and found them to be of a satisfactory standard.

This service does not currently produce monthly quality assurance reports as required in the Home Care Standards. This is an area for improvement.

The Registered Manager could not provide details of the mandatory training of staff, including the required Level 2 diploma (or equivalent) in adult care, on the day of the inspection. This is an area for improvement.

The Regulation Officer noted that two key positions remain vacant in this service, which would provide crucial administrative support to the Registered Manager. It is imperative that the Registered Provider recruits for these positions and this is an area for improvement.

The Regulation Officer was not satisfied that all complaints and safeguarding referrals had been handled appropriately, with one matter still requiring a disciplinary procedure and resulting decision. This is an area for improvement.

There needs to be a formal process for gathering and recording feedback from care receivers in this service. However, the Registered Manager advised that they seek care receiver feedback verbally on the quality of the care they receive. This is an area for improvement.

This service has a clear and concise Statement of Purpose in place. The Business Plan for this service was satisfactory; however, it is suggested that this is reviewed given the findings of this inspection.

Care receiver feedback gathered as part of this inspection was positive. Equally, the staff spoken to gave positive feedback on the management of the service and they felt supported in their roles.

Overall, the governance arrangements in this service require significant improvement. The Registered Manager has only been in post for a short period but importantly does understand and accept the deficits in this service. The Registered Manager requires support in this task from the Registered Provider. The recruitment of additional administrative staff is imperative in addressing the areas for improvement identified during this inspection.

INSPECTION PROCESS

This inspection was announced and was completed on 23 March 2023. This inspection was announced following a request from the Registered Manager for an earlier inspection to provide them with an overview of the strengths and deficits of the service.

The Home Care Standards were referenced throughout the inspection.¹

This inspection focussed on the following lines of enquiry:

- **Management of the service**
- **Care and support**
- **Choice and safety**

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

Before the inspection visit, all of 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 and spoke with managerial and other staff. The Regulation Officer established contact with three care receivers or their representatives. This contact was made by phone.

The views of one professional who has contact with a number of care receivers in this service were also obtained as part of the inspection process.

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

At the conclusion of the inspection, the Regulation Officer provided feedback to the Registered Manager, which was also followed up with an email on the day of the inspection detailing the areas of improvement identified.

This report outlines our findings and includes areas of good practice identified during the inspection. Where areas for improvement have been identified, these are described in the report and an improvement plan is attached at the end of the report.

INSPECTION FINDINGS

At the last inspection, two areas for improvement were identified and an improvement plan was submitted to the Commission by the Registered Provider setting out how these areas would be addressed.

The improvement plan was discussed during this inspection, and it was concerning to note that insufficient progress had been made in addressing one of the previously identified areas for improvement. This means that the Registered Provider still needs to meet the Standards concerning recruitment processes where the personnel files of care staff are required to be completed.

Important documents such as copies of signed employment contracts and criminal record checks were not evident in the selection of personnel files viewed by the Regulation Officer.

Notably, the Registered Manager had recognised this and has reportedly been addressing this matter over the last month. Care Partner can store all care staff personnel records electronically; however, this system has yet to be used to its full extent.

The Registered Manager demonstrated to the Regulation Officer that vital records such as emergency contact details and care staff addresses were absent. The Registered Manager has undertaken an audit of missing personnel documents and has compiled paper files in the first instance to address this, intending to transfer these to Care Partner once they are complete.

The Regulation Officer evidenced that there has been improvement in notifiable events being reported to the Commission as per the Home Care Standards.

Management of the service

<p>The Standards outline the Provider's responsibility to make sure that where people stay is right for them and safe. There will be a management structure in place, with an integrated organisational and governance framework, which is appropriate to the needs, size and complexity of the service.</p>
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The lack of administrative support and the need for a care coordinator post has been identified by the management in this service. Although these roles have been advertised, the service has not yet been able to recruit to these positions. Given the additional pressures this has placed on the Registered Manager, these roles must be recruited to as soon as possible. The Registered Manager needs to be released from these additional duties to have complete oversight of the service, its development and the need to address the areas for improvement identified in this inspection report. This is an area for improvement.

Care worker rotas are managed through a digital platform called Care Partner. These are emailed directly to staff and there is also the capability to email care receivers or their representatives' details of when and who will be delivering their care. The Registered Manager also demonstrated oversight of care workers' annual leave and plans to provide cover.

The Business Plan for this service was satisfactory but will require annual review to reflect progress against the plan. It would also help the Registered Provider to identify any deficits or barriers to delivering high-quality care and governance.

The Registered Manager needed to be made aware of the need for internal monthly reports as per the Home Care Standards. The Registered Manager must consult with the Registered Provider about who is best placed to complete these reports. This is an area for improvement.

The Registered Manager could not access the service's online training provider portal on the day of the inspection to provide evidence that care staff had completed or refreshed their mandatory training. The Registered Manager assured the Regulation Officer that at least 50% of care staff on duty at any time had the required Level 2 diploma in adult care, as this is a prerequisite of the recruitment process. However, inadequate documentation management means the Registered Manager cannot access copies of all the training certificates. This is an area for improvement.

The Registered Manager has recognised that there is a need for care workers to come together for face-to-face training, as opposed to e-learning. Plans are being developed to undertake some training in group settings and sessions where staff can come together for group supervision and learning.

The administration of the personnel files of care workers requires improvement in this service. The Registered Manager has been addressing this matter and made some progress. However, in the selection of files viewed, key documents were either missing or not completed, such as:

- Criminal Record Check

- Employment contract for care workers
- Emergency contact details of care workers
- Photographic ID
- Proof of home address.

The supervision of care workers is completed regularly in this service. During the quality assurance visits undertaken by the Registered Manager, they complete an observation and written evaluation of the care provided to care receivers. The Regulation Officer viewed a sample of the evaluation documentation and was assured they were suitable for this purpose.

Unfortunately, the Registered Manager only recently became aware of the Government of Jersey Code of Practice for Health and Social Care Support Workers. The Registered Manager is ensuring all care staff have read and understood the principles, expectations and responsibilities under this code of practice. The Regulation Officer was assured that the Registered Manager had taken appropriate action and would rectify the matter quickly, so it is not an area for improvement.

Feedback was sought from three care workers, with the following comments being provided to the Regulation Officer:

'I have adequate training for my role and have supervision every month. If I have any issues, I am provided with support immediately.'

'The manager is lovely; they are attentive to my needs and are just perfect.'

'I am supported by my manager and provided with supervision every three months. I completed all my online training last year.'

The Registered Manager was open and transparent about the strengths and deficits in this service, welcomed the inspection process and saw this as a supportive measure in helping this service address the required improvements.

The Registered Manager has recognised the need to undertake training in areas where their knowledge requires updating; for example, they are enrolled in Safe Recruitment training and plan to enroll in effective supervision skills for care workers training. This is an area of good practice.

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.

All new care receivers receive a pack of documents during the initial planning process to deliver their care package. This pack contains the following and is an area of good practice:

- Copy of the contract of engagement
- Statement of purpose of the service
- Code of Practice for care workers in Jersey
- TESH Healthcare handbook
- Any information leaflets concerning the condition/diagnosis of the care receiver.

The Registered Manager provided an overview of the referral process, the preparation stage before the care package began, and the quality assurance measures to make sure high-quality care is being delivered. The Regulation Officer was assured that adequate preparation takes place before care packages start, and that care workers were regularly evaluated on the care they were providing. This is an area of good practice.

The Regulation Officer reviewed a sample of care plans and found them comprehensive and with regular review. There was also evidence of risk assessment processes in the preparation stage of new care packages, for example, environmental risk assessments.

The Registered Manager evidenced knowledge of the Care Quality Commission (UK regulatory body), quality statements and reflected a duty of care to the care receivers and their families. This is an area of good practice.

The Registered Manager shared a typical induction for new care staff over their first two to three days. This involved a period of familiarisation with policies and procedures, the completion of any training needs and an introduction plan between the carer and care receiver. The Registered Manager also provides shadowing opportunities alongside assessing competency and confidence in delivering the required care. The Regulation Officer reviewed a selection of personnel files, which provided evidence of completed induction competency checklists. This is an area of good practice.

Care staff spoken to as part of the inspection about induction gave positive feedback regarding their induction into this service. They confirmed that induction processes were comprehensive and that induction checklists were completed.

The Registered Manager reported that they do not keep records of feedback from care receivers and their families. However, feedback is sought verbally during regular observation/evaluation visits on the delivery of care, and this is acted upon. There must be a mechanism to record feedback and how this service responded to this. This is an area for improvement.

Feedback was sought from three care receivers as part of this inspection; however, only two responded. Comments about the service they receive from this service were as follows:

'I am very happy with the care I receive and the staff that provide care all know exactly what to do.'

'I see the manager occasionally and anything I say is always taken on board.'

'My carer is very good; they are reliable and well trained.'

'If I have any concerns or complaints, I can ring to office, and they will resolve the issue.'

'XXXX was provided with superb care from their carer; they were lovely and made XXXX very comfortable.'

One professional who has regular contact with care receivers, care workers and the Registered Manager in this service provided the following comments:

'It is a pleasure to deal with Registered Manager and my clients and their families have only positive comments and great feedback. I would say that TESH is very person centred and works with the ethos of putting the client at the centre of all they do.'

Choice and safety

<p>The Standards outline the Provider's responsibility to make sure that people will feel safe and are kept safe. People will be supported, enabled and empowered to be as independent and autonomous as practicable. People's rights will be supported and protected.</p>
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The Registered Manager understands the need for safe recruitment processes and reported that this service undertakes criminal record check updates yearly for all care staff. Unfortunately, due to poor documentation management, the Registered Manager could not assure the Regulation Officer that this had occurred. The Regulation Officer recognised that the Registered Manager had taken steps to address this matter but had yet to complete this process. This is an area for improvement.

The Regulation Officer evidenced this service's comprehensive suite of policies and procedures. Following a complaint, the outcome of a safeguarding process about a care receiver was for a disciplinary process to be initiated. The Registered Manager will be consulting with the Registered Provider on the way forward on this matter. This is an area for improvement.

The management of other safeguarding concerns and complaints has been satisfactory, with evidence of the recommendations from safeguarding processes being actioned.

The Registered Manager reported that none of the care receivers are prescribed controlled medication. In addition, the vast majority of care receivers have the capacity to manage their own medicines. Where care receivers require support, this is occasional prompting or assistance, for example opening medicine bottles. The Registered Manager reported that all staff undertake a Level 2 qualification in medication management, even though this is not a requirement given the level of support and assistance provided. This is an area of good practice.

All care workers in this service are self-employed and contract their services to TESH Healthcare. When viewing the personnel files of the care workers, the Regulation Officer was assured that all care workers had adequate insurance liability arrangements in place. TESH Healthcare Ltd also has appropriate liability insurance arrangements in place.

Care plans viewed by the Regulation Officer evidenced that care receiver choice is respected in all aspects of their care. Care receivers that were spoken to as part of this inspection, reported that their rights were respected and that where they had highlighted issues, these were responded to positively and rectified by the manager.

IMPROVEMENT PLAN

There were six 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 3.5 & 3.6</p> <p>To be completed by: 3 months from the inspection date (23 June 2023).</p>	<p>Recruitment processes and due diligence are carried out for all new employees, and a fully auditable personnel file is available for inspection.</p> <p>Response of Registered Provider:</p> <p>Action plan is in place since March 2023, staff have been notified regarding additional documentation and this includes any new recruited staff.</p>
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<p>Area for Improvement 2</p> <p>Ref: Standard 9.2</p> <p>To be completed by: 3 months from the inspection date (23 June 2023).</p>	<p>The Registered Provider must arrange for a representative to report monthly on the quality of care provided and compliance with registration requirements, Standards and Regulations.</p> <p>Response of Registered Provider:</p> <p>A non-active director is responsible for the overall audits and monthly reports in this service.</p>
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<p>Area for Improvement 3</p> <p>Ref: Standard 3.11 & 3.12</p> <p>To be completed by: 3 months from the inspection date (23 June 2023).</p>	<p>The registered person will make sure that all care/support workers complete and remain up to date with statutory and mandatory training requirements, including a Level 2 diploma in adult care (or equivalent). In addition, the Registered Provider must maintain a training record with copies of training certificates.</p> <p>Response of Registered Provider:</p> <p>The manager ensures all staff have the necessary certificates and updated certification will be completed with the online HB Compliance training</p>
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	and from May 2023 we have now planned practical training for all. New recruits will only become a carer with the level 2 certification evidenced and also completing the HB Compliance learning/training
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<p>Area for Improvement 4</p> <p>Ref: Standard 9.1</p> <p>To be completed by: 3 months from the inspection date (23 June 2023).</p>	<p>The Registered Manager must make sure there is a coherent and integrated organisational and governance framework for this home care service. This will be appropriate to the needs, size and complexity of the service.</p> <p>The appointment of an administrator and care coordinator is essential in providing this framework.</p>
	<p>Response of Registered Provider:</p> <p>We now have in place two administrators, which is making great progress within the framework of the company and supporting the manager accordingly to ensure the company continues to provide essential home service.</p>

<p>Area for Improvement 5</p> <p>Ref: Standard 3.8</p> <p>To be completed by: 3 months from the inspection date (23 June 2023).</p>	<p>The Registered Provider must make sure that the disciplinary procedures in place for this service are acted upon under appropriate timeframes and that outcomes are communicated to the subject of any investigation process.</p>
	<p>Response of Registered Provider:</p> <p>The manager ensures that all areas within the timeframe regarding the procedures of discipline are upheld and communicated and supported accordingly.</p>

<p>Area for Improvement 6</p>	<p>The Registered Provider must make sure that feedback from the people who receive care, from</p>
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<p>Ref: Standard 7.1</p> <p>To be completed by: 3 months from the inspection date (23 June 2023).</p>	<p>their relatives and professionals is responded to positively and action taken as a result will be recorded.</p>
	<p>Response of Registered Provider:</p> <p>The manager has now created a written document for all service users for feedback of service provided which will be given twice a year. All reports will provide areas which need to be addressed if necessary or maintained according to good standards.</p>

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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