



Jersey Care  
Commission

## **SUMMARY REPORT**

**TESH Healthcare Jersey Limited**

**Home Care Service**

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

**23 March 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.

## 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><b>Area for Improvement 1</b></p> <p><b>Ref:</b> Standard 3.5 &amp; 3.6</p> <p><b>To be completed by:</b> 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><b>Response of Registered Provider:</b></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><b>Area for Improvement 2</b></p> <p><b>Ref:</b> Standard 9.2</p> <p><b>To be completed by:</b> 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><b>Response of Registered Provider:</b></p> <p>A non-active director is responsible for the overall audits and monthly reports in this service.</p>
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<p><b>Area for Improvement 3</b></p> <p><b>Ref:</b> Standard 3.11 &amp; 3.12</p> <p><b>To be completed by:</b> 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><b>Response of Registered Provider:</b></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><b>Area for Improvement 4</b></p> <p><b>Ref:</b> Standard 9.1</p> <p><b>To be completed by:</b> 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><b>Response of Registered Provider:</b></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><b>Area for Improvement 5</b></p> <p><b>Ref:</b> Standard 3.8</p> <p><b>To be completed by:</b> 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><b>Response of Registered Provider:</b></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><b>Area for Improvement 6</b></p>	<p>The Registered Provider must make sure that feedback from the people who receive care, from</p>
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<b>Ref:</b> Standard 7.1	their relatives and professionals is responded to positively and action taken as a result will be recorded.
<b>To be completed by:</b> 3 months from the inspection date (23 June 2023).	<p><b>Response of Registered Provider:</b></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>

The full report can be accessed from [here](#).

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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