



**Jersey Care
Commission**

INSPECTION REPORT

4Health Home Care Agency

Home Care Service

**Unit 1, Harbour Reach
La Rue de Carteret
St Helier
JE2 4HR**

22 June 2023

THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014, all services carrying out any regulated activity must be registered with the Jersey Care Commission ('the Commission').

This inspection was carried out in accordance with Regulation 80 of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 (as amended) 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 4Health Home Care Agency. The service is located in St Helier and is close to a GP, pharmacy, and physiotherapy practice. The service provides nursing care, personal care, and personal support to adults with various health conditions requiring support.

The Registered Manager is a qualified nurse with extensive experience and knowledge in health care and is supported by a team of registered nurses, care assistants, and administrative staff; external health professionals also help oversee the governance arrangements.

According to the Statement of Purpose, the service aims and objectives include "to provide skilled care to enable clients to meet their full potential and optimum level of health and well-being". Providing high-quality and efficient care to clients who require domestic and social care to more complex care needs over short or long-term periods is a crucial objective set out in the Statement of Purpose.

Regulated Activity	Home care service
Conditions of Registration	<u>Mandatory</u> Type of care: personal care, personal support, nursing care

	<p>Category of care: adult 60+, autism, dementia care, learning disability, mental health, physical disability and/ or sensory impairment, end of life care</p> <p>Maximum number of hours of care that can be provided in total: more than 2250 hours per week</p> <p>Maximum number of hours that can be provided for nursing care: 30 hours</p> <p>Age range of care receivers: 18 years and above</p> <p><u>Discretionary</u></p> <p>There are none.</p>
Date of Inspection	22 June 2023
Time of Inspection	1.20pm – 4.00pm
Type of Inspection	Announced
Number of areas for improvement	None
Number of care receivers using the service on the day of the inspection	99

The Home Care Service is operated by 4Health Nursing and Home Care Agency Limited, and a Registered Manager is in place. Since the last inspection on March 9, 2022, the Registered Manager has submitted notifications of incidents, accidents, and other events as required by the Regulations and Standards. An updated copy of the service's Statement of Purpose was provided on the inspection day; the service evidenced that this is kept up to date and revised regularly.

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.

The findings from this inspection shows that the service is well organised and managed. The leadership arrangements put care receivers at the heart of the service and ensure that the care is consistently high quality, creating a positive culture. Care receivers, their families, and health care professionals felt assured the

service was safe, effective, and responsive to individual needs. Care receivers said their dignity, privacy, and autonomy were promoted and described the care they receive as compassionate and considerate.

One of the service's strengths was communicating with care receivers, their families, and other relevant stakeholders involved in their care. Staff confirmed good working relationships, and the management responded to concerns. Assessment and care planning arrangements were robust, and plans were personalised to meet care receivers' needs and preferences, and their input into plans was sought.

Staff are recruited safely and provided with training opportunities, supervision, and appraisals. They felt valued by the service and highlighted it was an open, supportive organisation committed to providing good care and support. A solid governance and quality assurance structure was embedded into the service. Quality and safety audits are carried out, which are then acted upon to improve outcomes.

Appropriate policies and procedures are in place, which are available to staff to underpin their practice. Care receivers spoke highly of the quality of staffing provided and felt they were well-trained and motivated.

Evidence taken together shows this service is working hard to provide consistently high standards of care and support; there are no areas for improvement arising from this inspection.

INSPECTION PROCESS

This inspection visit to meet with the Registered Manager at the office was announced and completed on June 22, 2023. Follow-up telephone calls were made to four care receivers, seven family members/ representatives, and five care staff between 26 and 28 June 2023.

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**

Prior to our inspection visit, all of the information held by the Commission about this service was reviewed, including the previous inspection report.

The views of five health professionals were also requested as part of the inspection process; two people provided a response.

Policies, care records, staff files, supervision records, quality monitoring reports, contracts, and complaints were examined during the inspection.

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.

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

INSPECTION FINDINGS

At the last inspection, no areas for improvement were identified that required any follow up on this visit.

Management of the service

The Standards outline the Provider's responsibility to ensure 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.

A team of registered nurses, health care assistants, and administrative staff supports the Registered Manager. The mandatory conditions on registration allow the service to provide more than 2,250 care hours per week; however, the Registered Manager continually monitors the number of hours offered to ensure enough staff are available to manage the service successfully and to meet the level of care provision.

The service employs four registered nurses who oversee aspects of care provided, carry out assessments, review care receivers' care arrangements, and advise care staff where necessary. Feedback from care staff was positive about the support provided by the nurses in the service.

The Registered Manager reports to representatives of the Provider on operational issues regularly so that they are fully aware of matters such as complaints, outcomes of audits, and referrals into the service by way of example. Samples of director reports were reviewed during the inspection. There was evidence of strong and clear leadership in the service, and the Registered Manager was very experienced, skilled, and aware of their legal responsibilities and duty of care towards care receivers.

The Manager spoke of the importance of positive working relationships with external professionals to help improve outcomes for care receivers, which was echoed by the care staff also. One health and social care professional told the Regulation Officer that the service "is very good to work with and they are professional and very skilled,

and this is echoed by other multi-disciplinary professionals likewise". Another commented on the service's professionalism, good working relationships, and ability to problem solve and find solutions to support care receivers to remain at home.

At the time of inspection, ninety-nine care receivers received support from the service, ranging from weekly domestic and social help to 24-hour live-in care. This care provision totalled 3000 care hours provided.

In discussion with the Registered Manager, it was clear they have a very detailed knowledge of care receivers' healthcare needs and showed a solid commitment to maintaining a 'hands-on' approach to their involvement in the service. Various examples were provided by the Registered Manager where they were aware of the increasing complexity of some care receivers' conditions and how they were being cared for.

There was evidence of how staff directly communicate with their colleagues and the Registered Manager about care receivers' welfare and support needs. There was considerable positive feedback about the communication strategies between the service, care receivers, and their families. Representatives told the Regulation Officer that communication and keeping them involved and informed of relevant issues was one of the service's strengths. Care staff said they were always kept up to date with care receiver information and described the ways in which information was shared with them.

The service had received two direct complaints since the last inspection, which the Manager had investigated. The records showed the details of the complaint, the investigation process, and the outcome, which was in line with the service's complaints policy. Information about the complaint's procedure is provided upon admission into the service. Care receivers and their representatives described an openness in providing feedback to the service and consistently told the Regulation officer that they felt empowered to contact the Registered Manager directly in the first instance to raise any concerns if they needed to. One representative said they had brought a couple of issues to the Registered Manager's attention, which was acknowledged and rectified immediately.

There were robust governance arrangements embedded into the service. Monitoring systems were established to audit the safety, effectiveness, and quality of care delivered to care receivers. A sample of completed audits and monthly quality monitoring reports examined, completed internally and by an external health professional, were found to be thorough and analysed to highlight areas for improvement. The Manager demonstrated that the findings from one audit had led to improvements in assessments, which could improve safety for care receivers and reduce the risks of potential harm.

Written agreements provided to care receivers and the invoicing systems were discussed and reviewed; both aligned with the Standards. Where live-in care workers are provided, the agreement clarifies care workers' live-in costs.

Staff told the Regulation Officer they felt well supported by the Registered Manager and were provided regular 1:1 supervision and appraisal discussions. They spoke of a supportive culture within the organisation which was focused on person-centred care. Feedback from care receivers, their representatives, and one health professional highlighted staff were fully committed to providing a quality service.

Care and support

<p>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.</p>

Registered Nurses are responsible for conducting initial assessments once people are referred to the service. They also continually assess to ensure the service can continue to meet their needs. The team of nurses oversees care receivers' health needs and conditions, which can sometimes be wide-ranging and complex. Care staff described the valuable contribution nurses bring in being available and providing advice and support to review care receivers when their health needs dictate. Care receivers' health conditions reflected the care categories in the service's mandatory registration conditions.

Samples of care plans and related records were reviewed. These demonstrated that the service supports care receivers with varying health support requirements. For

example, they contained detailed assessments of nutrition, mobility, and medication plans and were sufficient with up-to-date information to guide staff in providing care. Service reviews are completed regularly, and care receivers and their representatives are involved in the initial and ongoing care planning procedures, as confirmed during discussion.

Care receivers told the Regulation Officer they observed staff writing in the care records, and the care they received was as they had chosen. One representative said that while the care plan was descriptive, the care receiver could exercise choice and control over making changes to the plan, depending on how they were feeling at the time of care intervention. Another representative spoke of the content of their relative's care plan and said that staff took an empowering approach which encouraged the care receiver to challenge themselves and improve their health and well-being. They said the staff team understood the care receiver's needs, increasing their confidence and allowing them to achieve specific objectives.

The service has good links with external health professionals and will refer to appropriate services when needed. One health and social care professional commented that the service quickly identifies changes in care receivers' needs, to which they respond appropriately and timely to ensure a professional review is sought. One health professional informed the Regulation Officer that the service proactively contacts case workers to review care receivers' needs.

The Regulation Officer spoke with care receivers and their representatives to gain insight into their experiences of the service. Overall, they described that the support promoted an excellent quality of life, and the care was exceptional. They said the staff were skilled and well-trained. Some comments included:

“They are just brilliant, the carers are lovely and have made such a difference to X life. X is a million times better which is down to the incredible care, having the right people provided, their training and attitude. We totally have trust in them, they're helpful, thoughtful and kind and have really changed X life for the better” [from a representative]

“I have an excellent relationship with them [the carers], they know exactly what to do and I trust them to do what’s needed. The consistency is important for me and I get the same carers all the time and I’ve built a great connection with them. I actually look forward to seeing them and I’m very happy. It’s never a bother to pick up the phone and call them, I can really count on them anytime” [from a care receiver]

“There’s no problems whatsoever, they’re all super. We’re really happy with them and they are just lovely and caring” [from a representative]

“The staff are excellent and care for X as if she’s a member of their own family. They cook fresh food, the staffing is consistent and they know the care plan inside out. They stimulate X is she is awake and leave her sleep too, and they keep the place immaculate and everything is done as it should be” [from a representative]

“For me it’s working really well, the carers are wonderful and I get the same regular girls. [Name of carer] is my star” [from a care receiver]

“They’re wonderful, friendly and just lovely. They help and they see what is to be done. I think the world of them and they’re all very kind and let me just take my time” [from a care receiver]

One person telephoned the Commission earlier in the year to give an account of their experiences. They told the Regulation Officer that the service always met their needs, had faith and confidence in the staff’s abilities, and had found them to be flexible in their approach.

Choice and safety

The Standards outline the Provider's responsibility to ensure 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.

A sample of four recruitment records were reviewed, relating to staff who had been appointed since the last inspection. The evidence confirmed that pre-employment information and checks had been obtained following the Regulations and Standards.

Criminal records checks had been obtained from the staff member's country of origin, along with evidence of work permits and registration cards. A recruitment checklist was maintained in each staff member's file for ease of reference.

New staff are required to complete an induction, which includes training, shadowing of more senior staff, and familiarisation with the service's policies and procedures. The induction records for one recently appointed staff member confirmed they had been provided with essential training, introduction to care receivers, and information about managing emergencies and competency assessments. This was confirmed by staff spoken with following the inspection. One staff member described having had numerous 1:1 discussions with the Registered Manager during their induction to talk about their role and key objectives and responsibilities.

The training records showed a rolling training programme offered in areas such as moving and handling, dementia awareness, safeguarding, and infection prevention. The service has recently purchased a resuscitation mannequin, and first aid training is provided for all staff. Samples of records showed there are systems in place to validate the effectiveness of e-Learning training that has been completed by staff. Awareness and information about the importance of nutrition and hydration are provided to care workers also. The training folder was examined, highlighting information about healthy, balanced diets, fluid intake, and safe food storage.

Registered Nurses provide training around care receivers' needs in their homes where relevant. The staff described this as valuable and often allowed them to understand individual needs and health conditions comprehensively.

Staff are provided with opportunities to undertake vocational training in health and social care, and at the time of inspection, fifteen care staff had completed a Level 3 award, and three were awaiting completion. Twenty-four staff have a Level 2 award and one pending completion. Twenty-four staff have completed medication training as the Standards require.

The Registered Manager spoke of the benefit of group discussions and team meetings to allow staff opportunities to discuss work-related issues and reflect on their support to care receivers. This was explained about complex care packages where staff routinely meet with the Manager to examine the effectiveness of their interventions.

Care staff may occasionally be required to carry out interventions that are of a nursing nature and have been delegated by a registered nurse. Examples of records to support the delegation were examined, which showed that the registered nurse assesses the competency of staff and fully retains accountability for the delegation. This aligns with the guidance the Nursing and Midwifery Council (NMC) set out.

Samples of policies were reviewed, which incorporated best practice guidance and helped staff focus on the standards expected of them. Staff knew how to access them, and one staff member described the process of raising safeguarding concerns per local procedures.

Staff rosters are provided to care receivers or their representatives to inform them which care workers will visit them. People spoken with confirmed this to be the case, and all care receivers said they knew their care workers well and had built up good relationships with them. The administrator responsible for the staff rostering explained to the Regulation Officer that there is an emphasis placed on the consistency of staffing and, even when additional care is required, tries to allocate the same staff team as far as possible.

Two examples were where care receivers said they had requested a change to their care workers, which was respected immediately. This shows they had a choice over the staff coming into their homes. The Regulation Officer was informed that the service was reliable and nobody had ever not received their visit as planned; care receivers are notified in advance if care workers are running late or unavailable due to unforeseen circumstances.

The service asks for regular feedback on their experience from care receivers and their representatives. Samples of feedback forms examined were complimentary of the service and offered no suggestions for improvements.

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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