



**Jersey Care
Commission**

INSPECTION REPORT

Serene Care Jersey Limited

Home Care Service

**St Andrews Church
St Andrews Park
First Tower
St Helier
JE2 3QP**

7 June 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 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 on the inspection of Serene Care Jersey Limited. It is a home care service registered to provide personal care and personal support to individuals living in their homes. The service's offices are in St Andrew's Church, St Helier. The Registered Person also holds the Registered Manager's position and is supported by a team of support workers who care for people with varying health conditions and needs.

The service was registered in 2021 and has developed steadily since that time to the extent that, following this inspection, the Registered Person made an application to vary the conditions on registration to increase the number of care hours that can be provided.

According to the Statement of Purpose, the ethos of the service is to '*maintain care receivers dignity, privacy, independence, and choice*'.

Regulated Activity	Home care service
Conditions of Registration	<u>Mandatory</u> Type of care: personal care, personal support Category of care: Adult 60+, dementia care, physical disability and/ or sensory impairment

	<p>Maximum number of personal care/ personal support hours that can be provided: 600 per week</p> <p>Age range of care receivers: 19 years and above</p> <p><u>Discretionary</u></p> <p>The Registered Manager of Serene Care Jersey Limited must complete a Level 5 Diploma in Leadership in Health and Social Care by 7 June 2024.</p>
Date of Inspection	7 June 2023
Time of Inspection	10:45am – 3.00pm
Type of Inspection	Announced
Number of areas for improvement	Three
Number of care receivers using the service on the day of the inspection	7

The discretionary condition on the service's registration was discussed, and the Registered Manager confirmed that they are progressing through the Level 5 award and will complete it within the expected timeframe. Since the last inspection, completed on April 5, 2022, the Registered Manager has contacted the Commission to discuss day-to-day support matters that have arisen.

Following this inspection, the Commission received an application from the Registered Provider to vary the conditions of the service's registration. This enabled the service to provide more than 600 hours of care but not more than 2,250 hours per week. The Commission approved this on June 16, 2023. An updated copy of the service's Statement of Purpose was also received.

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.

Care receivers, their relatives, and health professionals hold the home care service in high regard. The Registered Manager and care staff displayed knowledge and

compassion toward care receivers and their circumstances. The service is committed to providing a bespoke individualised care package, and care receivers said they benefitted from a small dedicated staff team which they liked. The ethos of involving care receivers and their relatives is at the heart of the service, and they are encouraged to be involved in how their care needs are to be met and have input into their care planning arrangements.

Samples of care records showed assessments had been completed and families had been involved in the consultation process. Personal plans were detailed and supplemented with photographs to help care workers understand how care receivers want to be supported. Quality assurance checks are in place, and the review process seeks feedback from care receivers and their families on the care and support they receive. Complaints are handled appropriately, and records are maintained. The Registered Manager facilitates support from relevant health professionals to promote and maintain care receivers' health and well-being.

Staff are recruited safely, and they said they felt supported by the Registered Manager and received regular supervision, which helped them in their roles. They described feeling appreciated by their manager and told the Regulation Officer that it was an excellent team to work in. Staff said they frequently worked with the same care receivers, which they valued, and they knew about their needs.

The areas for improvement arising from this inspection include implementing a system to monitor compliance with the registration conditions, providing first aid training, and for staff to have annual appraisals.

INSPECTION PROCESS

This inspection was announced and was carried out by two Regulation Officers and completed on June 20, 2023. The initial visit to the service's office occurred on June 7, 2023, and telephone discussions with care receivers and staff occurred over the following two weeks. The initial visit was announced two days before the inspection to ensure the Registered Manager would be available.

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 the information held by the Commission about this service was reviewed, including the previous inspection report.

The Regulation Officer contacted two care receivers, three family members, and three staff members by telephone. Information from one relative who telephoned the Commission on February 28, 2023, was also considered. The views of four health and social care professionals were also requested as part of the inspection process; three people responded.

During the inspection, records including policies, sample care records, staff files, governance reports and complaints were examined.

After the inspection, the Regulation Officer provided feedback to the Registered Manager and provided written confirmation of the areas for improvement on June 8, 2023.

This report sets out 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.

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, 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 the Registered Manager advised that he had undertaken a training analysis for the staff team, which had identified their qualifications and competencies. There is now a system to monitor when staff refresher training is needed and has been completed.

The Registered Manager described a plan to appoint an assistant manager. In the Regulation Officer's opinion, this would be an essential additional resource in supporting the Registered Manager and in terms of providing a contingency arrangement, in the event that the Registered Manager is unavailable.

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.

One of the findings from the inspection identified a breach of the mandatory conditions on registration. This related to the number of weekly care hours provided; an additional 61 hours per week were delivered, exceeding the registration conditions. This was discussed with the Registered Provider during the inspection, who fully accepted this oversight, and the Regulation Officer considered that this had been a genuine oversight and was not a deliberate or intentional act.

The Commission issued a formal letter on June 14, 2023, advising of the need to comply with Article 13 of the Regulation of Care (Jersey) Law 2014. The Registered Provider confirmed that they understood this requirement and applied to vary the conditions on the service's registration to increase the number of care hours that can be provided. The Commission approved this on June 16, 2023.

The Registered Provider is also the Registered Manager, and other than the care staff employed, there is no additional managerial support. While the Registered Manager is committed and passionate about their service and works hands-on at times, the Regulation Officer was concerned that there is no organisational contingency arrangement to account for any unforeseen event which may leave the Registered Manager unable to carry out their role.

This was discussed during the inspection and the Registered Manager provided an update about the plans to recruit an assistant manager and had identified one person to potentially take on this position. This position would strengthen the team and play an integral role in the organisation, supporting the manager and which would typically fill in for the Manager during their planned and unplanned absence.

Three health and social care professionals commented on the Registered Manager's responsiveness, involvement in providing hands-on support in supporting care receivers and their families, and willingness to contact health professionals for advice when necessary.

Seven care receivers received support at the time of inspection, and their support packages ranged from one hour per day to 24-hour care provision. Evidence from a review of assessment records showed that the Registered Manager completes an assessment of need upon referral into the service, which puts care receivers and their representatives to the fore in the care package design process. Information relevant to care receivers is requested from the referring agency, which enables the Registered Manager to decide whether to provide care and support to the individual.

The service's complaints policy and procedures were reviewed. The service had received one complaint since the last inspection, and the records about the Registered Manager's handling of it were examined. This showed that the complaints policy had been followed, and the complainant was provided with an explanation about the issues raised. Furthermore, the Registered Manager described some improvements implemented due to the investigation of the complaint. This is related to obtaining care receiver feedback more regularly.

One relative told the Regulation Officer they had been informed of and provided with written information about raising a complaint at the outset of their relative's care package being set up. They said they felt they could raise concerns directly with the Manager and expressed confidence that they would be handled appropriately. One person provided an example where the Registered Manager responded immediately to a request to change an aspect of their relative's support needs. All care receivers and their relatives confirmed satisfaction with the care provided and said they had no cause to express concern or raise a complaint.

Written agreements setting out how the service will be provided to meet the needs of the person receiving care, including terms and conditions, payments, and arrangements for ending the agreement, are provided. A sample agreement was reviewed during the inspection, and people who were spoken with confirmed they had agreements in place and understood them.

Samples of monthly quality monitoring reports completed during 2022 and 2023 were reviewed, showing that the Registered Manager has a range of quality assurance checks to ensure the service is operating safely.

Care staff said they received three monthly one-to-one supervision from their manager, and samples of records confirmed this to be in place. Annual appraisals need to be completed consistently, and this is an area for improvement. Three care staff members said they were happy in their work, felt valued by the Manager, enjoyed working for the company and described good lines of communication across the team. Staff were clear about their roles, responsibilities, and reporting systems to their manager.

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>

The Regulation Officer spoke with five people in total who provided positive feedback about the care and support they receive. Comments included;

“It’s excellent, can’t fault it, they’re a brilliant lot. I see the same carers and I feel very involved. I was able to say what I wanted and what was needed and I’m more than happy with everything”

“I’m more than satisfied, they’re so caring and they always go the extra mile. I’ve only got to call and they come. I get the same carer every time and I always know who is coming. I’ve had a few ups and downs and they adapt really well and they are always there when I need them”

“It’s very good and the carers are very nice. I’ve got my own care team and the manager is very approachable. They come on time and I get involved in everything about my care and I say what I want”

“For us, we’ve got no concerns at all and we’re not worried” [from a relative]

“There’s been no problems dealing with the management, we have no issues, the communication is good and it’s been very constructive and they’ve been good at resolving issues. All the carers are very good and we have the same carers all the time. I have access to the care folder and I’ve been fully involved in care planning”
[from a relative]

Following the last inspection, two people who had received support from the service contacted the Commission to give an account of their positive experiences. They commented “they were always respectful of my dignity, I was astonished by the professionalism and attention to detail given and I felt valued and empowered to move forward”. Another person said “I have faith and confidence in their abilities and they are an amazing care provider and they’re so flexible, having guided the family through a very difficult period”.

Each care receiver has a dedicated support team who provides an individualised care package based on preference, choice and need. The Registered Manager described that attempts are made to match care staff to care receivers based on their skills, abilities, and personalities. People said they trusted their care workers and built good relationships with them.

Samples of care records were detailed and provided a good overview of the actions that care workers, needed to take. They reflected care receivers' care and support needs and identified how they would be met. The service uses a paper-based care recording system and records are retained in peoples' homes, and they said they had been fully involved in developing care plans and had access to them. The records noted that reviews had taken place regularly to ensure care accurately reflected ongoing support requirements. Care staff told the Regulation Officer that they make records detailing the outcome of each visit.

The Registered Manager provided an example of one care receiver's care records containing photographs to illustrate the positioning of household crockery items to aid their independence. The attention to detail was significant, and they were considered an invaluable addition to the written records to correspond with the text. This was an example of good practice.

Care staff spoken with were knowledgeable about the care receivers they were supporting; they told the Regulation Officer of their roles and were clear of the Registered Manager's expectations. The Manager said that they periodically visit care receivers' homes to meet with care staff and obtain feedback about their performance so that they can be assured standards are being met.

Feedback from one health and social care professional was complimentary of the service and they reported: "my client's feedback to me that they like the staff allocated to support them and they feel safe and well cared for. The service is flexible in their approach and recognise that people's needs change, they anticipate changing needs and have worked very effectively in developing new approaches and solutions to meet often complex and sometimes challenging circumstances". Another professional said they had always found the carers to be very caring and always do their best to make people feel comfortable and well looked after.

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.

The Registered Manager was able to evidence that staff are recruited safely. A sample of staff files confirmed that all checks are provided before they start work. At the time of inspection, staff had yet to be provided with identity badges, but the manager agreed to address this without delay.

Staff completed an induction and told the Regulation Officer they found it helpful and informative. The induction period involves shadowing the Registered Manager while providing care to care receivers until they feel comfortable working unsupervised. Three staff members' folders were examined, which evidenced their induction programme.

Seven staff have completed a Level 2 vocational award, and two staff are in the process of completing it. Two have achieved a Level 3 award, and four are in the process of completing it. Some staff had completed additional medication administration training as the Standards require, and there is a plan for two staff to start this. Fundamental training is provided in areas such as safe handling, safeguarding, and dementia awareness, for example. Training for staff in local capacity legislation has been arranged.

Specialist health and social care professionals have provided additional training specific to meet some care receivers' needs, and they have also deemed staff competent to complete particular tasks. Because the service supports care receivers with complex health conditions and requirements, the Regulation Officer suggested that all staff are provided with practical first aid training, including choking management. This is an area for improvement.

Care receivers are provided with a staff rota to know who will be supporting them, and all people they spoke with confirmed this happened. Feedback from one person

highlighted that their request to have a change to the staff team had been acknowledged and arranged.

The Registered Manager understood their safeguarding responsibilities, and care staff understood how to report matters of concern to the manager. Referrals are made to health professionals as necessary, and one health professional confirmed that they are contacted frequently by the Manager to advise of care receivers' changing health needs.

Samples of policies were available to guide staff in their work. Staff spoken with knew how to access them and knew the principles of the gift policy and procedures around supporting care receivers with shopping purchases. The Registered Manager is aware of the need to submit notifications to the Commission.

IMPROVEMENT PLAN

There were three 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: Article 13 Regulation of Care (Jersey) Law 2014</p> <p>Regulation 3 (1)(g)</p> <p>To be completed by: with immediate effect</p>	<p>The Registered Provider must devise a system to monitor the weekly maximum care hours that are provided.</p> <hr/> <p>Response of Registered Provider: Our online system Care Planner provides a feature which details the amount of hours provided as a statistic. We have activated this feature and, moving forwards, we will be including a statistical report of the hours provided each week in our monthly report paperwork.</p>
<p>Area for Improvement 2</p> <p>Ref: Standard 3.14</p> <p>To be completed by: within 2 months from the date of inspection (7 August 2023).</p>	<p>The Registered Provider will ensure that all care workers receive an annual appraisal.</p> <hr/> <p>Response of Registered Provider: Staff who have been with us over a year have received their annual appraisal since the inspection. This paperwork is now integrated into the company.</p>
<p>Area for Improvement 3</p> <p>Ref: Standard 4.3, 6.3</p> <p>To be completed by: within 2 months from the date of inspection (7 August 2023)</p>	<p>The Registered Person will ensure that care workers are provided with training in emergency first aid procedures.</p> <hr/> <p>Response of Registered Provider: This improvement area relates to ensuring that each staff member undertakes local, in person, emergency first aid training. At the time of inspection, every staff member did have a type first aid training on their file, however some of these were online courses. Since the inspection we have commenced booking training sessions for staff members, with the view of ensuring every staff member has been enrolled in in-person training. At the time of writing, 2 staff have completed their training, 4 staff are booked to attend a training session within the next two weeks, and dates for the remaining staff are being confirmed.</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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