



**Jersey Care
Commission**

INSPECTION REPORT

Personal Touch Care Services Ltd

Home Care Service

**The Studio
La Chasse
La Rue de la Vallee
St Mary
JE3 3DL**

**Date of inspection
16 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 of the inspection of Personal Touch Care Service Limited.

Regulated Activity	Home care service
Conditions of Registration	<u>Mandatory</u> Type of care: Personal care and personal support. Category of care: Learning Disability, physical disability, old age, dementia care and mental health. Maximum number of hours of care that can be provided: 600 hours per week (Medium). Maximum number of personal care and personal support hours of care that can be provided: 600 per week (combined). Age range of care receivers: 18+
Date of Inspection	16 June 2023
Time of Inspection	09:15 – 12:50
Type of Inspection	Announced
Number of areas for improvement	None
Number of care receivers using the service on the day of the inspection	34
Total number of hours or personal care and personal support being delivered on the week of the inspection	448 hours

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 the inspection were positive. Each of the staffing levels, governance structure and pathway for escalating any issues or concerns, align with the service's Statement of Purpose.

Feedback from care receivers, their representatives and social care professionals who work alongside Personal Touch was consistently positive. The team's person-centred approach and flexibility from initial assessments through to the delivering of ongoing care and support, and the knowledge of staff members, were praised.

Collaborative working within the scope of practice and recognising when to refer to other services are noted as areas of good practice.

Personal Touch takes a proactive approach to hearing the views of care receivers and their representatives and responding to them.

The service meets the Home Care Standards reviewed as part of this inspection.

INSPECTION PROCESS

This inspection was announced and was completed on 16 June 2023. Notice of the inspection visit was given to the Registered Manager eight days before the visit. This was to ensure that the Registered Manager would be available during the visit.

The Home Care Standards were referenced throughout the inspection.¹

This inspection focussed on the following lines of enquiry:

- **The area of improvement from the 2022 inspection**
- **Management of the service**
- **Care and support**
- **Choice and safety**

Prior to our inspection visit, all of the information held by the Commission about the service was reviewed. The information included previous inspection reports, the Statement of Purpose, notifications of incidents, including safeguarding referrals and correspondence regarding the service since the 2022 inspection.

The Regulation Officer sought the views of the people who use the service and their representatives and spoke with the staff working in and alongside Personal Touch including the Registered Manager and service administrator. The Regulation Officer established telephone contact with one care receiver and two care receiver representatives, as well as two care staff and two social care professionals external to the service.

During the inspection process, the Regulation Officer examined care records, policies, audits, training literature and care receiver feedback, including an annual survey, cards and letters.

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

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.

INSPECTION FINDINGS

At the last inspection, one area for improvement was identified. The Registered Provider submitted an improvement plan to the Commission, outlining how this area would be addressed. The area of improvement was for the Provider to develop a policy for the safe handling and storage of care receivers' monies, as required in Standard 4.8, Appendix 2.

The area for improvement and the plan were discussed with the Registered Manager. The Regulation Officer was provided with the policy and procedure that evidenced that the area for improvement has been met in its entirety.

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.

The Statement of Purpose was reviewed and discussed with the Registered Manager regarding the categories of care the service is registered for. It was agreed that minor amendments would be made, and that the Statement of Purpose would be resubmitted to the Commission. The categories of care the service is registered for are, adults 60+, dementia care and physical disability / sensory impairment and mental health.

The organisation structure, staffing levels and qualifications were discussed with the Registered Manager. The Regulation Officer was satisfied that these were appropriate to a medium home care service and aligned with the Statement of Purpose.

The Regulation Officer explored service oversight and line of escalation. Documentation and discussions with the Registered Manager and staff evidenced a clear governance structure and pathway for escalating concerns. Standard 9.3 of the Home Care Standards is met.

The Regulation Officer read three Monthly Provider Reports and discussed the content of these reports with both the Registered Manager and the representative who compiles the reports. It was advised that the content of the reports be reviewed with the team to more fully reflect the quality of the care provided. It was agreed that this will happen with a view towards developing the reports further.

There is a comprehensive 'Employee Handbook'. It covers staff contractual terms and conditions and codes of conduct for care workers. It contains policies and procedures including but not limited to health and safety, safeguarding, medication management, data protection and whistle blowing. It documents the services values of Respect, Care and Compassion and Integrity. The Registered Manager gave examples of how it is used in practice. This meets Standards 1.4 and 3.8 of the Home Care Standards.

The Regulation Officer reviewed the staff supervision records. The framework for supervision was comprehensive and included health and well-being, learning and development, workload and performance and followed up on issues from previous supervision. Supervision was discussed with the Registered Manager, who is aware and working within Standard 3.14 of the Home Care Standards requirements. A care worker gave feedback to the Regulation Officer that the supervision sessions are supportive.

Staff training is delivered in-house. Training covers all statutory and mandatory areas required in Appendix 6 of the Home Care Standards. There was evidence to demonstrate staff had undertaken the training and the required updates. The staff training content was supported by information leaflets that were clearly written and easily accessible to staff to revise the topic. A social care professional highlighted that the team have a good understanding of Capacity and Self Determination (Jersey) Law 2016. The Regulation Officer reviewed the teaching plan and resources for this topic, which evidenced comprehensive training. Training meets Standards 3.11 of the Home Care Standards.

The Registered Manager engaged fully with the inspection. Throughout the inspection, the Registered Manager demonstrated a detailed understanding of the importance of person-centred care and supportive management. They also displayed an awareness of the health and social care services and systems in Jersey and evidenced taking an active role in shaping new models of care.

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 reviewed a sample of care receivers' files. Initial assessments covered an appropriate range of areas and demonstrated the assessor had a holistic approach to care and support. The care plans were easy to follow, detailing the plan of care at each visit. Care summaries demonstrated factual record-keeping. Care records aligned with notifications Personal Touch has made to the Commission; further information about this is detailed later in the report. Care records meet Standard 2.6 of the Home Care Services Standards.

Initial assessments are undertaken by senior staff with appropriate training and inputted into the electronic care record system, 'Care Line'. Care staff described how they are introduced to a new care receiver and informed of their needs. It was explained that there is usually two weeks' notice given to a care receiver that a new

support worker will be supporting them. New staff members have a discussion with a senior staff member about the needs of the care reliever and they are required to read all relevant care records. The first visit is undertaken with the senior staff member and the staff member can request a second supported visit if they feel that this is needed. A care receiver described meeting care staff for the first time and commented that, *“they are all so helpful.”*

Feedback from a social care professional described the team’s care and support approach in supporting care receivers. It was highlighted that the team delivered person-centre care, ensure that personal care needs are met, and work towards supporting care receivers’ independence as far as possible. The feedback positively detailed the team’s responsiveness to referrals, professionalism in negotiating packages of care and in delivering supportive ongoing care. It was evident that Standard 5.2 of the Home Care Services Standards was being met.

The Regulation Officer saw evidence of documentation the team had developed to help communicate care receivers’ health information to the Ambulance Service. Each care receiver has a health file in their home related to ‘Personal Touch’ support. Inside it is a clearly labelled ‘Ambulance Sheet’ which ambulance staff can read and take to hospital in the event of an admission. A fridge magnet in care receivers’ homes identifies ‘Personal Touch’ as the care agency and gives the agency’s contact details. The Registered Manager explained that they had communicated this to the Ambulance Service. It was evident that consent for information sharing had been sought from care receivers. This illustrates a proactive approach to sharing essential information to enable the continuity of care. This is an area of good practice and meets Standards 6.5 of the Home Care Service Standards.

Since the last inspection, Personal Touch has made two safeguarding referrals. Both referrals illustrate that the team recognise the importance of safeguarding and a understanding of when to escalate for wider assessment and support. This is an area of good practice and meets Standard 4.1 of the Home Care Service Standards.

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.

Personal Touch takes a proactive approach to hearing the views of care receivers and their representatives. An annual 'Client Feedback Satisfaction Survey' is undertaken. Care receivers are sent a letter inviting "clients, family members of an advocate" to complete. It asks for levels of satisfaction to be indicated in several areas of care. It invites comments on questions such as "What do our carers do well?" and "Is there anything our carers could do to improve your experience?" Results are collated and responded to if required. The service also has a complaints form that is given to all care receivers. This is an area of particularly good practice corresponding to Standard 3.13, which states that, "People who receive care will be able to raise any issues or concerns about care/support workers."

The Regulation Officer was provided with positive feedback from two care receivers' representatives regarding choice. Feedback related to how the team had supported a change in times and days of care and took their relative on outings if that is what they wanted on the day of support. It was stated "they go the extra mile" and "they go above and beyond." Meeting individual choices and preferences was discussed with the Registered Manager; the approach described was person-centred and equitable.

The Regulation Officer saw records of "spot checks" undertaken every four months by senior staff. Areas reviewed included care receiver's demographic, plan of care and risk assessments, resuscitation status and any equipment if in use. As part of the review, care receivers are asked if they are "happy with the care plan." This practice represented Personal Touch, balancing choice and safety.

Safety was reviewed through the notifications the service had provided to the Commission; there have been 28 notifications from Personal Touch Care Service to the Commission since the last inspection. These included the termination of care

packages, incidences of care receivers reported falls and discharges from hospital to community. Notifications were discussed in detail and the documentation was reviewed.

Some care packages had been terminated as care receivers had moved into residential care. When this was not the case, there was evidence of actions taken by Personal Touch to avoid terminating a care package. These included open communication with the care receiver and family, adjusting care packages, liaising, and referring to other professionals. The Regulation Officer reviewed a copy of the Contract of Agreement between care receiver and the service and was satisfied the service is working within this.

In response to fall notifications, the Regulation Officer saw clear evidence of risk assessments being reviewed, care plans amended, and referrals made when appropriate.

In response to notifications relating to discharges from hospital to the community, the Registered Manager has taken several actions to mitigate the risk of harm and enable safer discharges. This includes joining the Hospital Discharge Steering Group and devising a specific hospital assessment form that Personal Touch staff undertake with care receivers in hospital ahead of discharge. The Regulation Officer noted the approach kept care receivers at the centre of care while recognising the organisation is part of a wider health and social care system.

There is clear evidence that Personal Touch staff report appropriately, take actions to avoid events and respond promptly to events. Standard 4.3 of the Home Care Standard is being met. This represents an area of good practice and the team is working to maintain care receivers' safety.

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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