



**Jersey Care  
Commission**

## **INSPECTION REPORT**

**Boak and Associates**

**Home Care Service**

**4 Jardin de la Chapelle  
Rue au Blancq  
Grouville  
JE3 9HR**

**27 July 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 Boak and Associates. The conditions of registration are set out below.

Regulated Activity	Home care service
Conditions of Registration	<u>Mandatory</u> Type of care: Personal care and personal support.  Category of care: Physical Disability and/or Sensory Impairment and Adults 60+.  Maximum number of personal care / support: less than 112 hours per week.  Age range of care receivers: 18 years and above.  <u>Discretionary</u> None
Date of Inspection	26 July 2022
Time of Inspection	09:00
Type of Inspection	Announced
Number of areas for improvement	None
Number of care receivers using the service on the day of the inspection	Two

Since the last inspection on 10 June 2022 the discretionary condition that was in place for the Registered Manager to complete a Level 5 Diploma in Leadership in Health and Social Care by 27 June 2023 has been removed. The Registered Manager has obtained the required qualification and the discretionary condition was removed on 9 May 2023.

The Commission received an application from the Registered Provider to vary the conditions by which the service is registered. The application was to add Adults 60+ to categories of care and change the age from 19 to 35 to 18 years and above. Both requests were granted on 7 July 2022 and remain in place. An updated Statement of Purpose was submitted to the Commission following this.

## **SUMMARY OF INSPECTION FINDINGS**

The following is a summary of what was found during this inspection. Further information about our findings is contained in the main body of this report.

Overall, the findings of this inspection were positive. The Registered Manager has a clear understanding of her role and responsibilities. The organisation's structure, governance framework and staffing levels are appropriate to the size and complexity of the service. There are a comprehensive range of policies and procedures, and monthly provider reports are compiled in line with Standards.

Feedback was consistently positive from care receivers, their representatives, and professionals. There was clear evidence of individualised care and support and holistic care planning. There were detailed examples of how care receivers were enabled to live a full life and thrive in all aspects of life, and this was evidenced in care records.

Staff had appropriate qualifications to undertake their roles. Staff's knowledge, skill and understanding of supporting people with brain injuries was evident and their approach was committed and flexible. The Regulation Officer observed the team's skills in balancing a care receiver's choice and safety.

## INSPECTION PROCESS

This inspection was announced and was completed on 26 July 2023. Notice of the inspection visit was given to the Registered Manager nine 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.<sup>1</sup>

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 services Statement of Purpose, and correspondence regarding variations in registration and removal of a discretionary condition.

The Regulation Officer sought the views of a person who uses the service, meeting with a care receiver face to face and having telephone contact with a care receiver's representative. The Regulation Officer also met with the Registered Manager and a care worker and gained the views of three professionals external to the service as part of the inspection process.

During the inspection, certificates, policies, procedures, and care records, including care plans and risk assessments, were examined.

At the conclusion of the inspection, the Regulation Officer provided feedback to the Registered Manager.

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

This report outlines our findings and includes areas of good practice identified during the inspection. There are no areas for improvement.

As the service has small number of both care receivers and employees, the Regulation Officer has withheld some details to avoid sharing information that may identify care receivers or care workers.

## **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.

The Regulation Officer spoke to the Registered Manager about their role. They demonstrated a clear understanding of the responsibilities and requirements of the role. They spoke with commitment about supporting care receivers and care workers. They gave examples of working collaboratively with other agencies and professionals, which was later evidenced in feedback.

The Statement of Purpose was discussed with the Registered Manager, who agreed it reflects the service delivery.

The service has a Director and Registered Manager - who is the main contact, Registered Partner - and two care workers. One care worker is employed on a permanent full-time contract and the other on a zero-hour contract. There is external oversight of case management from Case Delegates through quarterly delegate meetings and phone call input approximately every 10 weeks. The structure and oversight represent an organisational and governance framework with clear lines of accountability and staffing levels appropriate to the size and complexity of the service. This met Care Home Standards 3.9 and 9.1.

The Regulation Officer saw evidence of a comprehensive range of policies and procedures. Policies and procedures regarding transport, health and wellbeing and handling of clients' monies had been developed since the last inspection. The transport policy detailed various topics, including insurance, driving licenses, vehicle requirements, parking, and taxis. The Regulation Officer was satisfied that Home Care Standards 1.4, 4.5 and Appendix 2 were met.

The Boak and Associate Director compiles and shares the Monthly Provider Reports with the Registered Manager. The Regulation Officer reviewed April, May, and June 2023 reports. Topics were appropriate to the service and for reviewing the quality-of-service delivery. Each report reflects on a Home Care Standard. For example, the April report reflected on Standard 4, "You will feel safe," and described how care workers were given a copy of the Standards to reflect on risks to the care receiver and themselves. This practice met Standard 9.2.

It was explained that the Director and Registered Manager manage accounting, including invoicing and salaries. The Regulation Officer was satisfied this meets Home Care Standard 8.3. It was discussed that this standard requires certificated copies of detailed accounts to be provided to the Commission, annually. The accounts would be asked for if needed and were not deemed required for this inspection. However, the Commission would expect the service to advise on any financial difficulties impacting service delivery.

There have been no new employees since the previous inspection. Staff have the required qualifications to undertake their roles, meeting Standards 3.12 and 6.3. Staff are registered with the Disclosure and Barring Update Service and annual checks are undertaken. Professional indemnity and liability insurance certificates were displayed and met the requirement of Home Care Standard 8.4.

The Regulation Officer saw evidence of appraisal and supervision records. Staff supervision is undertaken four times a year. This met Standard 3.14 of the Home Care Standards.

The service met the Standards by which the management of the service was inspected.

### **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.

There was evidence of individualised care and support and holistic care planning. The Regulation Officer was informed the ethos of the service is “for clients to thrive.” The language used by the Registered Manager and care worker demonstrated this ethos. The staff spoke on enabling care receivers to live a full life and gave examples of how this has been supported in all aspects of the care receivers’ lives. This practice was evidenced in the positive feedback from a care receiver. They described being supported, listened to, and encouraged by staff. This area of good practice met the requirements of Home Care Standard 5.2.

Care records are electronic. Care plans encompass social, cultural, practical, medical, and functional areas. The team’s knowledge regarding the impact a brain injury may have on function, their understanding of care receivers' needs and commitment to the ethos of supporting care receivers to thrive was demonstrated in the care records. Home Care Standards 2.3 and 2.6 are met.

Care and support are delivered in a wide range of areas. These include supporting, encouraging, and engaging in food shopping and prep, household administration, sports and leisure activities, video call check-ins and travel. The staff provide a listening ear for emotional well-being and a guide for practical issues. The supports marry with the care receivers' communication abilities and are adaptable to the care receiver's wishes, enabling function and stimulation. This further illustrated the team's expertise and commitment.

The service presently supports two clients and hours of care per week are within the services registration. Arguably, the need for professional boundaries is heightened in a smaller organisation with bespoke care packages. Discussion with staff and reviewing of records satisfied the Regulation Officer that the team is aware and maintains boundaries. This met Home Care Standard 2.8.

Feedback from the representative of a care receiver was positive regarding the speed at which the package was implemented, how well it met their relative's needs and the care worker's approach. When speaking of the care worker, it was said, "They were just great."

Feedback from professionals was highly complementary regarding the Registered Manager. They were described as professional, knowledgeable, diligent, helpful and an advocate for care receivers. They are open to sharing knowledge, skills, and policies, "someone I contact for support and advice." They were recognised as someone who worked collaboratively with others for the welfare of the person who receives the care and "a value to Jersey." The professionalism met Standard 6.5.

Care and support Standards by which the service was inspected were met.

### **Choice and safety**

<p>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.</p>
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A care receiver was agreeable for the Regulation Officer to observe a discussion between the care receiver, care worker and Registered Manager. The discussion involved a new activity the care receiver was considering. There was a perfect blend of listening, encouragement, information sharing, negotiation, exploring risks and how to mitigate them. The discussion demonstrated the care receiver being supported to make informed choices and the staff skilfully balancing the care receiver's choice and safety. Home Care Standards 4.7 and 5.1 are met.



It was acknowledged by the Registered Manager that the specialist area of care and commitment to supporting care receivers to thrive in all aspects of life comes with increased risks. The Registered Manager and Regulation Officer explored this in relation to three areas of support. To balance choice and safety, the team undertook the following:

- Worked with the care receiver, as detailed in the previous paragraph.
- Undertook and documented a thorough risk assessment, which the Regulation Officer reviewed.
- Accessed specialist advice for one of the areas of support.
- Developed a comprehensive care plan.
- Ensured that escalation processes were in place.

This represented an area of good practice and met Standards 5.2 and 9.3.

The Registered Manager described a recent incident when they were concerned that a care receiver was at risk of harm. Details of how the Registered Manager advocated for the care receiver, liaised with another agency, respected the care receiver's wishes, and recognised the social context of the event were described. The response illustrated that the safety and wishes of the care receiver were preserved.

There have been no notifications to the Commission since the last inspection. Notifications were discussed with the Registered Manager, who fully understood the requirements and reasons for placing notifications. It is reported there have been no notifiable events. It is acknowledged this is relevant to the size of the caseload.

The Regulation Officer was satisfied the Home Care Standards relating to choice and safety were met, and areas of good practice demonstrated.

## **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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