

Summary Report

Autism Jersey – Adult Services 1

Home Care Service

Century Buildings Patriotic Place St Helier JE2 3AF

28 July and 1 August 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.

There is a strong focus on person-centred practices within the service. This was evidenced in practice by observing care receivers making decisions about their daily living choices and activities. Staff promote choice and independence while ensuring appropriate safety measures are in place. The service will also strive to educate and explore potential risks with care receivers.

Staff were professional and caring in their approach and showed an excellent understanding of their roles and the frameworks they must work within.

Care receivers and relatives provided consistently positive feedback on the service; however, staffing shortages and subsequent reductions in hours of support delivered were highlighted as a concern, which some professionals echoed.

On–call arrangements are impacted by the staffing shortages, which has meant that on-call team members have to provide shift cover in addition to their regular working hours. This has been prolonged, and the negative impacts were raised with the Regulation Officer as a concern.

Training opportunities have greatly improved since the last inspection and staff reported this a real strength of the organisation. Training records are well maintained, with appropriate alerts when updates are required. Work is ongoing in sourcing specialist autism training for the service.

The service was found to have suitable governance arrangements in place, which are appropriate to the needs, size and complexity of the service. However, it was recognised that some review of current structures might be required as the service evolves.

A project is underway to implement a new electronic care planning system. The service wants to take time to ensure that the system is tailored to meet the specific needs of Autism Jersey. In the meantime, existing care planning systems must be kept up to date and reviewed regularly.

Six areas for improvement have been identified as a result of 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.

 Area for Improvement 1 Ref: Standard 3.11, appendix 6 To be completed by: 6 months from the date of inspection (1 February 2024). Area for Improvement 2 Ref: Standard 1.2, 1.3 To be completed by: 5 months from the date of inspection (1 January 2024). 	Additional specialist training is required for support workers who support people living with autism. Response of Registered Provider: Autism specialist training has been delivered to all staff pre-2023. We currently have 7 new starters in 2023 who require the training and 5 sessions have been booked throughout 2024 to ensure the need of those staff members and any other new are met. Welcome packs/agreements should be made available to care receivers and / or their families, setting out the parameters of the support being provided and detailing the responsibilities of Autism Jersey and care receivers / families. Response of Registered Provider: Work has begun to ensure that these are available to supported individuals & their families/carers/guardians where applicable.
Area for Improvement 3	On-call arrangements must be urgently reviewed to ensure staff do not undertake shift work while on-call.
Ref: Standard 3.9, 8.2	Response of Registered Provider:
To be completed by: with immediate effect.	On Call regular shift cover has been reviewed and a plan put in place to steadily decrease this in order to minimise the impact on supported individuals with this support ending on the 3rd December.
Area for Improvement 4 Ref: Standard 3.9, 9.3 To be completed by: 3 months from the date of	Staffing levels are an area of concern as the service cannot consistently meet the requirements of the support packages it has been commissioned to provide. The service needs to review the volume of packages offered to ensure that it is equivalent to the support hours available.

inspection (1 November 2023). Area for Improvement 5 Ref: Standard 2.5, 2.6 To be completed by: with immediate effect.	Response of Registered Provider:A review took place in August of support with gaps in support significantly reduced as an outcome. This includes notice being given/transition support to another provider for one of our supported living packages. This has been added to our Risk Register and RAG status monitored.Up-to-date care plans and risk assessments must always be available to staff and have clear implementation and review dates. Any supporting documentation that staff must be aware of should be referenced in care plans and risk assessments.Response of Registered Provider:Risk Assessments and Care plans reviewed and index of these with review dated added to individuals records.
Area for Improvement 6 Ref: Standard 7.2 To be completed by: 3 months from the date of inspection (1 November 2023).	Complaints policies and procedures must be easily accessible to care receivers and their families and shared when services commence. Response of Registered Provider: Complaints policy updated and added to AJ website together with complaints form. This will also be included in the welcome pack.

The full report can be accessed from <u>here</u>.