



**Jersey Care
Commission**

INSPECTION REPORT

Positive Steps Limited

Home Care Service

**Anderson House
Rue des Pres Trading Estate
St Saviour
JE2 7QN**

6 December 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 Positive Steps Limited. The office is situated in the Rue des Pres trading estate where the service administration work is delivered. The Registered Provider and Registered Manager are the same individual.

In addition to the Registered Manager, the service employs deputy managers, care staff and administration staff to provide the service. The service's Statement of Purpose outlines that the ethos of care is to promote people's physical, emotional and mental wellbeing, and the level and type of support is tailored to each person's needs. The service provides varying packages of personal care and personal support dependent upon individual assessed needs.

Regulated Activity	Home care service
Conditions of Registration	<u>Mandatory</u> Type of care: Personal care and personal support Category of care: Adult 60+, dementia care, mental health, learning disability, autism Maximum number of care hours per week: 2,249 Age range of care receivers: 18 years and above

	<u>Discretionary</u> There are none.
Date of Inspection	6 December 2023
Time of Inspection	12:45 pm – 5.00 pm
Type of Inspection	Announced
Number of areas for improvement	None
Number of care receivers using the service on the day of the inspection	92 (7 were in hospital or in other care services for respite care)

Positive Steps Limited operates the Home Care Service, and a Registered Manager is in place.

The discretionary condition imposed on the service's registration was removed on August 2, 2023, as the Registered Manager provided evidence that they had completed the Level 5 Diploma in Leadership in Health and Social Care.

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 robust and effective management structure in place. The Registered Manager is active in the service, and the management team is well-known to care receivers and their families. They visit care receivers, which allows them to have a good oversight of the service's running. The service retains a consistent management team, and staff are recruited safely, undergo a comprehensive induction and have access to supervision and training.

This service builds good professional relationships with care receivers and ensures they receive individualised care and support. The service is dedicated to providing quality care, and care receivers expressed high levels of satisfaction with the support they are provided with.

They commented favourably on the staff team, said they were comfortable with them, and described their efforts in helping them enjoy the best quality of life possible.

Care planning arrangements are tailored to suit specific requirements, and the service works closely with external health professionals where necessary and upholds their safeguarding responsibilities. Care receivers are supported by consistent teams of care staff, and they confirmed that the service they receive is as they expect and wish for. Care plans focus on care receiver choices in their daily lives, which are detailed and written clearly for staff to follow. Relatives felt well-informed and involved in their relative's care and support decisions.

The service actively monitors its performance, seeks feedback from care receivers and families and strives to develop and improve. The governance arrangements show that the provider and Registered Manager ensure quality is continually improved.

There are no areas for improvement resulting from this inspection.

INSPECTION PROCESS

This inspection was announced and was completed on 6 December 2023. The inspection was pre-arranged with the Registered Manager the week before the inspection date to ensure that they 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**

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

- **Choice and safety**

Before our inspection visit, all of the information held by the Commission about this service was reviewed, including the previous inspection report. All notifications submitted since the last inspection were analysed and provided a focus for discussion during the visit.

The Regulation Officer sought the views of eight care receivers and five representatives and spoke with managerial and other staff. Telephone calls were made, and email correspondence (the preferred method of communication for two care receivers) occurred between 8 and 13 December 2023. One care receiver provided verbal feedback at the Commission's offices on 15 December 2023.

The views of three health and social care professionals were also requested as part of the inspection process, and one person responded. The Pharmacist Inspector visited the service to discuss medication practices with the Registered Manager on November 13, 2023.

During the inspection, complaints, care records, client rosters, staff supervision records, staff personnel records, call log systems, staff training records and the service's training and development plan were examined.

After the inspection, the Regulation Officer provided feedback to the Registered Manager. This report outlines our findings and includes areas of good practice identified during the inspection.

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 provider of the organisation is also the Registered Manager, and a robust and effective management structure is in place. The structure was discussed and explained by the Registered Manager, who is supported by three deputy managers, a client administrator, and a team of care staff, some are classed as senior carers based on their experiences and qualifications. The Registered Manager regularly visits care receivers and their families and has a good oversight of the service.

Care receivers and their relatives were familiar with the management arrangements and told the Regulation Officer they knew how to contact the management team if needed. They also said they were visited by the deputy managers and felt that communication between themselves, the care staff and the management team was effective. Written information about the service is provided when the service starts, which informs people of such arrangements and how to raise concerns or make a complaint.

The Registered Manager monitors the weekly care hours delivered, primarily to ensure the service runs in line with the conditions on registration and to ensure sufficient staff to provide care and support. The service provided just over 2000 care hours per week during the inspection. The service has increased its staffing complement by fifteen additional care staff since the last inspection to ensure adequate staff are available to continue to provide care.

Care packages range from one weekly thirty-minute support visit to 24-hour packages in line with care receivers' assessed needs. The management team described situations where care receivers' needs change, which results in referrals to relevant health and social care professionals to review their needs.

Care receivers' health and social risk factors are assessed and recorded on the home care services management system, which gives a priority rating to guide

decision-making in prioritising visits in the event of service interruption. This system proved extremely valuable when the service had to prioritise care receiver visits during storm Ciaran in early November. The Registered Manager demonstrated the system, which provided an overview of the person's care needs, indicating the priority rating for their visit.

The service has received one complaint since the last inspection, which is unrelated to care provision. The records showed that the complaint was processed per the complaint's policy, and the complainant was informed of the actions taken and the eventual outcome. The service has used the complaint as a reflective tool for staff learning.

Samples of monthly quality monitoring reports were reviewed, showing the service is actively engaged in a robust governance and quality monitoring process, continually improving its performance and ensuring compliance with the Regulations and Standards. Over the year, the approach to quality monitoring has evolved. The later monthly reports indicate that various working practices are identified and reviewed according to the Standards, and action plans are implemented based on the outcomes of the review process.

Care receiver feedback is captured, and adjustments are made accordingly where necessary. One of the monthly reports recorded an example of this, where care receiver feedback was acted upon to meet their expectations and enhance their overall experience. This was an example of good practice.

The service is registered with the Office of the Information Commissioner and has recently contacted them to discuss its data protection responsibilities. The service approaches sensitive data handling cautiously, ensuring security and compliance with data protection practices. Systems are in place to share care receiver information on a need-to-know basis.

The service monitors staff retention and absences to provide insight into the overall stability of the workforce. Fifteen care staff have been recruited since the last inspection; a few have left employment. Comments from the staff team indicated

that they consider the organisation a healthy, supportive environment with employee wellbeing and happiness considered a priority. Staff said “the managers care for the staff, we’re made to feel valued and it’s very open, we all know what’s going on and I feel heard and supported” and “it’s the best company I’ve worked for as they really care about you”.

The Registered Manager described having regular meetings with the managerial staff team, and staff said there were many development opportunities within the 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>

Samples of care records showed that plans were person-centred, detailed, and written for staff to follow in positive, respectful, and meaningful language to care receivers. Care records evidenced how care receivers chose what they liked to do, spent their time, and planned their support arrangements. Support was found to be flexible and adaptable. This was reiterated by relatives, care receivers and one health and social care professional who described the service as responsive and adaptable to changing health needs or social circumstances. Direct feedback from care receivers and their relatives suggested that they were supported to keep well and safe.

Care records showed that care receivers were active with various social and leisure interests. Records included risk assessments as necessary and confirmed communications to health professionals where changing needs were identified. Regular care plan reviews and reassessments resulted in amended care plans, and staff were kept updated where plans were amended or updated. Overall, the Standards concerning care planning were adequately met and showed that aspects of care reflected the care receiver's choice, their dignity was upheld, and opinions were valued.

In addition to care plans, risk assessments and other records maintained for care receivers, the Regulation Officer noted 'all about me' documents and 'hospital passports'. Both comprehensive documents captured essential information for delivering personalised care and support.

The Regulation Officer obtained information from care receivers and their representatives and some of their views about the service included;

“Everybody’s lovely and I’ve got no complaints. I’ve had the same crew for years and they do what I expect them to. I always know who is coming and they come on time and when they should.”

“I applaud them all, they’re absolute angels. They change things at the drop of a hat when we need them, and I’ve got nothing but praise for them. I’d give a big tick for Positive Steps.” [from a relative]

“They’re amazing and certainly not pushy. They’re just nice and very caring and they’re all calm and there’s no pressure to do anything you don’t want to. X has a little group of carers and they’re very good and we’re so happy with everything.” [from a relative]

“They’re just the best, the girls are really good. I know them all and they always come and help me.”

“It’s great, we get on extremely well. I know all of the girls who look after X, and we text each other and they keep me posted. We have a good relationship and they’re all nice and they look after X really well. They keep me updated and I feel the service is great.” [from a relative]

“Our experience is fantastic. The small team have got to know X very well, they’re professional, knowledgeable and they do everything that we ask. X is very happy with them, and they respond very quickly, often at very short notice and we really can count on them to help us out. The on-line care record system is great as I can

see what's happening and we're very happy and pleased with the care." [from a relative]

"They really do care and go above and beyond to help support me. They stepped up when there were emergencies to make sure I was supported."

"I cannot fault the staff at Positive Steps. They always go above and beyond to help where they can and help out at short notice on many occasions. I have always been introduced to new staff, and I feel the staff have really got to understand me."

"I get on with the staff really well and they listen to me. I can have a laugh with them or talk to them about any concerns. They are professional and make sure what needs to be done is done and they work well with other agencies who are involved in my care."

One health and social care professional described the service as very supportive, person-centred and focused on enabling care receivers to do what they can for themselves. They said the service has supported some care receivers with complex needs and has done so with professionalism and compassion.

Discussions with the Registered Manager and four members of staff showed that they have a deep understanding of the care receivers they support and have a strong knowledge about their characteristics and unique circumstances. They described providing a holistic approach to care, considering peoples' emotional and social well-being and mental and physical health.

The service upholds its safeguarding responsibilities to keep care receivers safe from harm, a safeguarding policy is in place, and staff understand how to report concerns appropriately. The service has submitted several safeguarding concerns correctly throughout the year and engaged in the safeguarding process as necessary.

During the inspection, a staff member described a situation where some potential risks to an individual living with dementia had been recognised. The service had

advocated on the person's behalf and worked collaboratively with other agencies to resolve the situation. This was an example of good practice, evidenced by the service operating by its policy. A sample of records was reviewed, which showed the actions and outcomes of safeguarding inquiries had been taken and followed up on by the service.

The management team described the efforts to establish the right care team to meet the care receiver's needs. Care receivers explained they had small groups of care staff with whom they were familiar and knew well. They said that they had constantly been introduced to new staff members before them providing care and support. Feedback from care receivers is used to make adjustments to the team composition where necessary. Feedback provided to the Regulation Officer from care receivers and their relatives about the care workers allocated to them was complimentary.

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 service takes a safe and effective approach to staff recruitment, which was also a finding from the previous inspection. Comprehensive background checks are conducted and well documented. The Regulation Officer was satisfied that recruitment practices align with the Standards. Samples of staff induction records were examined, which showed an overview of policies and procedures, hands-on training and shadowing, fundamental training, and health and safety issues are considered critical components of the induction programme for staff.

One staff member who had started employment with the service since the last inspection described a supportive induction; they felt instantly welcomed and informed of relevant procedures and equipped to support care receivers. They said the management team scheduled regular check-ins to discuss their progress, and they felt the service encouraged staff to express their thoughts. Records were reviewed to evidence staff competencies when shadowing more experienced staff.

Effective communication systems were evident within the teams. The Registered Manager described the various strategies for facilitating effective communication. These included regular team meetings, technology such as secure messaging apps, care plan documentation, care receiver and family involvement and regular check-ins with staff scheduled. The care planning system allows essential information to be shared with those who need to know, and photographs can be uploaded as necessary. This information was seen during a review of a sample of care records.

Care receivers and their families spoken with confirmed that the management team and care staff were easy to talk to and responsive. The care records and discussions with the staff team confirmed that care receivers are fully involved in identifying and specifying their care preferences. One health and social care professional commented favourably on the service's approach to empowering care receivers to make decisions for themselves.

Care staff receive frequent one-to-one supervision with their line manager, and records are maintained. Samples of supervision records were seen, demonstrating opportunities for staff to discuss any concerns or provide feedback on work performance. Twice yearly appraisal reviews are in place.

The Registered Manager showed the system to ensure care receivers receive the care they need according to the established schedule. Home care visits are tracked and provide real-time updates on completed visits and any missed visits, which would be alerted to designated individuals. Care receivers told the Regulation Officer they always received their visits when they expected, knew who would visit them, and were confident to report any missed or late visits if needed. The care planning system provides essential information for staff to access should they need to contact care receivers at short notice.

The deputy managers oversee care receivers' needs and staff practices, allowing them to monitor the quality of care provided to care receivers. They conduct regular reviews with care receivers to ensure their care and support needs remain as set out in their care plans and staff provide care and support as the service expects. The records showed this routinely happens.

The service ensures the staffing complement of the teams is managed appropriately. As part of the assessment process, the deputy managers consider care receiver needs and assess whether the skill mix is adequate through regular team meetings.

Staff can access a range of policies and procedures to aid them in their work. The Registered Manager ensures staff continue to familiarise themselves with relevant policies, and they are subject to ongoing review to identify areas for improvement, evident from one of the monthly quality monitoring reports. Systems are in place to protect sensitive information about care receivers and can only be shared with family members if they consent. The service has submitted notifiable events to the Commission appropriately.

New staff completed the care certificate; a sample of induction records confirmed this. Many staff members have achieved a Level 2 vocational health and social care award, and the deputy managers have completed a Level 4 qualification. Some staff are currently working towards a Level 2, others a Level 3, and two deputy managers are progressing through a Level 5 leadership qualification. The senior care assistants have a Level 3 award.

The training records and training plan show the service is compliant in offering mandatory training and other training relevant to the needs of care receivers. The training and development plan for the coming year shows a variety of training and learning opportunities are offered. The service is moving towards more face-to-face training as they have recognised this type of learning provides more opportunities for clarification and a deeper understanding of the subject matter.

The training programme for the first quarter of 2024 includes autism, infection prevention, stoma care and capacity and end-of-life care. Staff recently attended nationally recognised training in autism and participated in a learning disability conference.

Care staff involved in administering medication have completed Level 3 medication training. Some staff have completed the theoretical component of this training and

are awaiting an assessment by the external assessor. Staff have their competencies checked annually.

The Pharmacy Inspector visited the Registered Manager in November 2023 to discuss medication practices and, on the whole, considered the service to have safe procedures in place regarding the management of medicines.

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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