



**Jersey Care  
Commission**

# **Summary Report**

**Tutela Jersey Limited**

**Home Care Service**

**Ground Floor  
CTV House  
La Pouquelaye  
St Helier  
JE2 3TP**

**15 and 17 November 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.

Overall, there was evidence that progress had been made to address the areas of improvement identified during the March 2023 inspection.

The development plan remains in place, which takes account of the need to establish adequate governance arrangements within the service. Senior staff continues to work towards their vision to implement robust quality assurance processes for their service.

The regulation officers acknowledged that there had been a significant improvement in terms of developing a baseline for the organisation's training requirements. However, it was noted that the information produced needs to be streamlined and monitored effectively. This includes establishing a clear mandatory training plan. During the inspection process, the regulation officers were able to review the service's new training document, which separates mandatory and bespoke training. The regulation officers noted that the organisation is working towards quality training records. However, this work must continue to ensure that all staff comply with the new training requirements. The service has introduced training that was as a result of the learning from a complaint. During discussions with the care receiver and their family, it was reported that this training positively impacted the care receiver's satisfaction.

The regulation officers reviewed ten personnel folders, and recruitment practices were found to meet the requirements of the Home Care Standards, with the Registered Manager having a clear understanding of the principles of safer recruitment. This was identified as an area of good practice.

The regulation officers received feedback from care receivers, staff, and professionals. Overall, the feedback was positive, and it was noted that there was an improvement in communication and response when needs or issues were identified. However, there were concerns raised in relation to staff turnover and management.

The service has a new IT system called Care Live Line, which can manage all the care receivers' and staff's records. The regulation officers had an opportunity to review several areas that this system covers. Overall, the new informatic technology is being introduced to the team, with evidence of robust support and training provided to the staff. The system provides the team with alerts that prompt them to act without delay. An example is a renewal for Significant Restriction on Liberty (SRoL) and a renewal for Disclosure and Barring Service (DBS).

The care plans showed a good understanding of care receivers' needs and were reflective of individual wishes and preferences. They also demonstrated a close involvement with care receivers, and there was evidence that they promoted care receivers' independence skills while ensuring they were equipped with the skills to manage the everyday challenges of living in their own home.

The Provider demonstrated a commitment to continue improving the service and recognised the importance of this.

Three areas for improvement were identified during this inspection; two remain in place from the last inspection in March 2023.

## 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><b>Area for Improvement 1</b></p> <p><b>Ref:</b> Standard 3.14</p> <p><b>To be completed by:</b> 3 months from the date of inspection (17/02/2023).</p>	<p>The Registered Service needs to ensure that all support workers are routinely given opportunities to discuss and identify issues through formal supervision and appraisal which meets the minimum requirements of the Home Care Standards.</p> <hr/> <p><b>Response of Registered Provider:</b></p> <p>We have been extremely pro-active with the progression of supervisions, both staff and clinical, organisation of yearly staff appraisals, scheduled and organised up until February 2025.</p> <p>Support and Supervisions sessions are continuous and are now planned throughout 2024 to 2025.</p> <p>The schedule will be followed, and results will be reviewed and addressed in the next audit planned for October/ November 2024 time, however staff are able to meet any key worker or senior management as and when required.</p> <p>Staff also have access to free therapy and counselling should they wish to accept, which a number of staff currently access.</p> <p>All supervisors are given full training to ensure their competency and additional supervision for the supervisors is given for the first 12 months to ensure they are fully supported.</p> <p>Tutela have also identified 3 more additional Level 3 staff members to conduct and hold supervisions and plan to increase this figure throughout 2024.</p> <p>All staff will be guaranteed a minimum of 4 supervisions and an appraisal yearly, of which will comply with the JCC regulations and standards of best practice.</p>
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<p><b>Area for Improvement 2</b></p> <p><b>Ref:</b> standard 4.3 and Appendix 7</p> <p><b>To be completed by:</b> 2 months from the date of inspection (17/01/2023).</p>	<p>The Registered Service must notify the Commission of the incidents, accidents, or other events that have posed or may pose a risk of harm to care receivers as the Commission identifies in the standards.</p> <p><b>Response of Registered Provider:</b></p> <p>The level of JCC notifications have been addressed and all staff have received refresher training on how to complete the process and submit notifications as and when they feel a requirement or necessary.</p> <p>Tutela has fully transitioned to Careline Live, which has an alert facility and flags the main dashboard.</p> <p>An alert is then immediately flagged to the main office where upon immediate action is taken and the commission would be notified in a timely manner, conforming to standards.</p>
<p><b>Area for Improvement 3</b></p> <p><b>Ref:</b> Standard 8.2 and 9.1</p> <p><b>To be completed by:</b> with immediate effect.</p>	<p>An organizational structure must be in place that reflects the size of the service, volume, and complexity of the care provided.</p> <p>The structure must also provide appropriate management oversight for all service areas.</p> <p><b>Response of Registered Provider:</b></p> <p>Although Tutela have an existing chart with written guidelines, we accept this could be more simplified and an easier chart for the explanation of the structure of the company and management allocation oversight for service users and staff.</p> <p>As this was an immediate action, we have created a new Organisational Chart and submitted a copy to the JCC of which is a more simplified version and easier to follow.</p>

The full report can be accessed from [here](#).