



**Jersey Care
Commission**

INSPECTION REPORT

Island Home Care

Home Care Service

PO Box 714

Jersey

JE4 0PU

19 and 28 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 Island Home Care. The offices is situated in a commercial area of St Helier with ample parking for staff and visitors. The agency facilitates a range of support packages across the Island.

| Regulated Activity | Home Care Service |
|---|--|
| Conditions of Registration | <u>Mandatory</u> Type of care: personal support Category of care: dementia, autism, mental health, substance misuse, adults 60+, physical and/or sensory impairment, learning disability Maximum number of personal support hours to be provided per week: 2250 Age range of care receivers: 17 years and over <u>Discretionary</u> None |
| Dates of Inspection | 19 and 28 December 2024 |
| Times of Inspection | 9am to 2:30pm and 10:30am to 12:30pm |
| Type of Inspection | Announced |
| Number of areas for improvement | Three |
| Number of care receivers using the service on the day of the inspection | 40 |

The Home Care Service is operated by 1st Choice Island Home Care Limited and there is a registered manager in place.

Since the last inspection, the Commission has received confirmation from the Registered Manager that they have completed a level 5 qualification in management and leadership. Consequently, the discretionary condition on the service's registration was removed on 12 December 2023.

An application to increase the maximum number of hours the service can provide from 600 to 2250 per week was received on 27 April 2023 and was granted on 10 May 2023.

One further application to temporarily vary the age range was received on 18 December 2023. The purpose of the application was to provide support for a pre-determined period for one care receiver. The variation was approved on 21 December 2023.

The Statement of Purpose was reviewed as part of the inspection process and was found to reflect the services provided. The Registered Manager identified and acknowledged some minor amendments, and an updated Statement of Purpose was submitted within one week of the inspection visit.

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, the findings of this inspection were positive. The Registered Manager and team members engaged fully in the inspection process, ensuring that all requests for information and records were met.

Feedback received from care receivers, family members and professionals was consistently positive. Common themes included the professionalism of the Registered Manager and staff team and the demonstration of a person-centred approach to care. This was evidenced in the observations undertaken by the Regulation Officer.

The service showed a willingness to work collaboratively with key stakeholders to promote positive outcomes for care receivers, with staff conveying that they felt fully supported in assisting individuals to achieve their agreed goals.

Comprehensive assessment and care planning systems, which are regularly reviewed with care receivers and their representatives, were evident. Individual needs, wishes, and preferences are reflected. The service sources training to support the delivery of care; however, it was noted that some progress is required in ensuring that appropriate training is in place for each category of care that the service is registered to provide.

Governance arrangements were found to be adequate; however, it was identified that some improvements were required concerning the management of complaints, safer recruitment practices and the recording of governance checks.

There are three areas of improvement as a result of this inspection.

INSPECTION PROCESS

This inspection was announced and notice of the inspection visit was given to the Registered Manager before the visit. This was to ensure that the Registered Manager would be available during the visit. The inspection took place on 19 December 2024 and was facilitated by two regulation officers. A follow-up visit occurred on 28 December 2024 with one regulation officer in attendance.

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**
- **Choice and safety**

Before our inspection visit, all of the information held by the Commission about this service was reviewed, including the previous inspection reports.

The Regulation Officer sought the views of the people who use the service and or their representatives and spoke with managerial and other staff.

Feedback was provided by three care receivers, two of whom were visited in their homes. Three family members were contacted, and all agreed to share their experiences of the support provided by Island Home Care.

The views of eight staff members were sought, with four agreeing to provide feedback.

The views of six professionals were also requested, with two agreeing to share their experiences of working with the service.

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

Records, including policies, staff recruitment, training logs, incidents, care records, supervisions and induction arrangements, were examined during the inspection.

At the conclusion of the inspection visit, the Regulation Officer provided initial feedback to the Registered Manager; this was followed up with final written feedback on 12 January 2024.

This report outlines our findings and includes areas of good practice identified during the inspection. Where areas for improvement have been identified, these are described in the report, and an improvement plan is attached at the end of the report.

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.

Island Home Care's Statement of Purpose describes the aims of the service as follows:

- To provide quality 24-hour Home Care Services
- Offer the best conditions possible for our staff
- To offer an effective, individual and truly person-centred service
- To support and care for adults with tailored programmes that match their needs whether they are determined by mental ill health, physical disability, 60+, Dementia or co-existing conditions
- To help our clients lead meaningful lives and to increase their opportunities to build a life in the community.

At the time of inspection, the service provided 1594 hours of support weekly to 40 clients. Services range from three hours weekly to provide social and leisure Opportunities, to 24-hour support packages. A total of 51 staff are employed by the service.

Island home care has grown significantly since the last inspection. The Registered Manager is supported by a care manager, finance manager, team leaders and care staff. The current staffing levels and structure adequately meet the needs of existing care receivers and the required support levels.

The Regulation Officer explored plans for future growth with the Registered Manager, identifying that this should be matched with developing a management structure and governance framework, which reflects the size of the service and the volume and complexity of the care required. One area identified where enhancements must match service growth is the development of robust paperwork and record-keeping systems, such as audits, interview records and assessment documentation. This was acknowledged by the Registered Manager, who has put plans in place to develop current practices.

The Registered Manager described the recruitment of staff with the right qualifications, aptitude, and skill sets as difficult but feels that the compensation package offered has assisted in attracting candidates to available roles.

All recruitment records are stored electronically, a sample of which was reviewed for staff employed in the last 12 months. All necessary documentation was found to be in place. It was noted that interview notes need to be recorded in more detail to match the criteria set for interview meetings. This was acknowledged by the Registered Manager, who took steps to improve practice between inspection visits. It was further noted that some contracts had commenced before all safe recruitment checks were completed. This is an area for improvement.

The service has a robust induction workbook for new employees, which is given to staff in conjunction with the employee handbook and the code of practice for health and social care support workers in Jersey. The induction handbook covers four main areas.

- Protecting patients and other people
- Ensuring the health, safety and security of yourself, others and the workplace
- Working with others
- Working and developing in your role.

A senior staff member monitors progress, and the inductee has regular opportunities to reflect on how they have applied their learning in practice.

Training logs were reviewed and discussed with the Registered Manager. All mandatory training requirements for the service were found to be met. Many courses are undertaken through online learning. Other courses, such as first aid and manual handling, are classroom-based sessions.

Training in relation to the categories of care for which the service is registered to provide was discussed. The Registered Manager explained that securing appropriate training placements can be "challenging"; however, there was a recognition that some additional training is required for specific categories of care, and a plan was being formulated to address this. Employees generally felt that the training offered by Island Home Care was beneficial, and comments included:

"Regular and updated training is offered to all employees."

"Continuous education is offered; we are now in the process of changing from e-learning to face-to-face, which I prefer."

Supervision and appraisal are in place for all care staff. Supervision sessions meet the required minimum standard of four times a year, as set out in the Home Care Standards. Appraisals are undertaken on an annual basis. A sample of records were reviewed during the inspection. Supervision sessions are solution-focused and allow staff to discuss concerns and explore potential outcomes.

The service reported receiving one complaint since the last inspection. A review of the evidence determined that the service had not followed the procedures set out in the complaints policy when the complaint escalated from informal to formal, a point acknowledged in discussions with the Registered Manager. This is an area for improvement.

Generally, there are opportunities for care receivers and relatives to raise any concerns on an informal basis, and this was confirmed during feedback, with confirmation that they feel able to raise issues and have confidence they will be listened to. The Registered Manager plans to introduce a complaints log to ensure that progress and outcomes can be tracked more readily.

Samples of monthly quality monitoring reports were reviewed, showing a robust overview of the service to ensure compliance with the Regulations and Standards. For example, the November 2024 report explored the service's performance against Standard 3 of the Home Care Standards. Actions are identified, together with a review of the previous month's actions.

The service demonstrated a range of other systems that contributed to the overall governance framework. The Registered Manager shared audit information on medication, client and staff feedback, staffing resources and care package reviews.

The Registered Manager shared that regular spot checks are undertaken by senior staff, but they are not formally recorded and do not follow a structured format. All audits undertaken must be recorded with a clear understanding of the criteria for review. This is an area for improvement.

The Regulation Officer reviewed the risk escalation procedures for the service, which provide clear guidelines for staff when risks are identified. The procedure also details the responsibilities of staff members and the management team. During feedback, staff confirmed they felt empowered to raise any risk-related concerns.

Staff also reported that they feel valued and respected. It was highlighted that the conditions of service, for example, pay scales and duty rotas, allowed staff to achieve a positive work-life balance. Some of the comments are captured below.

"The manager is very supportive in my practice and respectful of my role."

"The culture in the organisation is very open, and the communication is very effective."

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.

The assessment process was found to be reflective of the standards set within the Statement of Purpose. The service will receive a copy of the referrer's assessment. The service then performs an initial assessment to ascertain the care receiver's wishes and aspirations and ensure that care needs can be appropriately met.

Welcome packs and client handbooks are made available to all new care receivers. Information about the service, such as relevant contacts and out-of-hours support, care planning processes, the care team and giving feedback, is included. A contract agreement is also given to care receivers when services commence, which provides details of fees, cancellation and termination periods.

Two regulation officers examined a sample of care receivers' files during the first inspection visit. All care plans were detailed, demonstrating a person-centred approach and respecting individual wishes and preferences, confirmation of which was provided during feedback with care receivers and relatives and evidenced in the care plans. One professional commented, *"Island Home Care respects clients' individuality and preference; care plans are carefully tailored to their unique needs, ensuring their dignity is always upheld"*. Files also included risk assessments where appropriate.

There was evidence of regular reviews, which included the involvement of care receivers and relatives. Reviews are carried out at intervals that match the needs of care receivers or when there are changes in need.

The service recognised its limitations and the scope of practice that the team must work within. There was evidence of appropriate referral to key agencies when changes in need were identified.

Indeed, collaborative working was recognised as a key strength by some professionals.

"This agency is very open and honest, and client focused. We have multi-disciplinary team meetings when required, and I can pick up the phone any time and request their input / support with no hesitation."

"[The Registered Manager] is very proactive, very easy to work with. We adjust, implement risk assessments and care plans together and he respects and listens to me."

The Registered Manager demonstrated a good understanding of their responsibilities concerning delegated tasks. Appropriate training had been sourced and implemented. There was also evidence of ongoing monitoring and review by relevant professionals.

The Regulation Officer visited two care receivers' homes to obtain feedback and observe care delivery. Staff were praised for their warm and friendly approach and recognition of care receivers' rights, need to remain as independent as possible, wishes and preferences. Interactions between staff and care receivers were considered respectful, friendly and fun.

High levels of satisfaction were reported by staff. Some of the feedback received is recorded below.

"Island is the best company that I have worked in a long time, I feel very happy, I am enjoying and feel happy to get up in the morning to go to work."

"I have not experienced any employer and their team in my career who demonstrate such care and compassion for both clients and their carers'."

"I have only experienced that care and support of clients have been carried out in ways that meet the individual with compassion, dignity, and respect."

"Island Home Care is always willing to listen to feedback and address concerns promptly and openly."

Care receiver and relatives' feedback was also captured during the inspection process.

"I have an allocated care coordinator that I see for an hour and a half every week to make sure that I feel supported and feel that I'm getting the care I need."

"I am so grateful for the care that I receive from island home care and could not fault it. They're always there for you."

"We have nothing but praise and respect for Island Home Care. They have been a fantastic support to us and both our parents."

"I am extremely grateful for their wonderful services; I would absolutely recommend them to any other parent, company, person, etc, who were looking for a reliable company to provide care to their loved ones."

"No issues, I work very closely with them, we discuss things out."

"Xxx is wonderful; we got on straight away. They always phone me on the morning before we go out to check everything is okay."

"I get on very well with Xxx. I have no complaints, but if I did, I would not hesitate to raise them."

Choice and Safety

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| 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. |
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The service has a safeguarding policy which references local policies and organisations. All staff have undergone safeguarding training. There was evidence that safeguarding alerts have been raised where appropriate.

The Registered Manager reported that two Significant Restriction of Liberty (SROL) authorisations were in place. All applications and authorisations had been appropriately notified to the Commission, and the Registered Manager demonstrated an awareness of processes for renewal of SROL.

The Registered Manager also provided evidence of records of best-interest decisions made on behalf of care receivers who lack capacity in certain aspects of their life. Decisions are always taken with the care receiver and/or family members based on the individual's wishes and preferences. Where potential risks are highlighted, the service adopts a positive approach which promotes independence where possible.

One professional noted, *"The clients get to interview their carers' and pick them accordingly with their preferences and it was exactly what my client needed. This was the right approach at the right time for this client."*

One care receiver spoke of the effort that had been taken to ensure that they were matched with staff that could appropriately facilitate their activity choices. Others spoke of the consideration given to maintaining their interests and hobbies.

Individual communication needs are considered, and appropriate adaptations are made. Examples include the use of social stories and large print materials for those who require them.

The service seeks feedback from care receivers on an annual basis. The results of the most recent survey were positive, and the Regulation Officer viewed some samples. Any comments relating to individual care were addressed with the care receiver and the appropriate adjustments made, for example, a request for more appropriate support times.

There are also plans to undertake a staff survey in 2024, which an external agency will facilitate.

There is a suite of policies and procedures which support staff in their roles, promote best practice and promote appropriate standards. The Regulation Officer viewed a sample that included health and safety, money and property, complaints, safeguarding, whistleblowing, and lone working. The content was robust, referencing key legislation and supporting agencies where appropriate. The staff handbook has a section on 'miscellaneous policies' designed to provide additional support when carrying out their role. One example is a policy for maintaining professional boundaries with colleagues and care receivers.

A review of medication management confirmed an up-to-date medication policy is in place. All staff undertake initial in-house medication training with appropriate follow-up in practice to check and record competency. Competency checks are then repeated on an annual basis. Staff progress to the Level 3 Regulated Qualifications Framework (RQF) in medication administration. Evidence of regular medication audits was also found.

At the time of the inspection, it was noted that several staff were awaiting enrolment in RQF courses. This is due to the increased recruitment in 2023 and several staff still undergoing induction. The Registered Manager reported that several staff have been identified to commence RQF qualifications in spring 2024.

The service will support fire safety checks for care receivers living independently, with the Registered Manager confirming that risk assessments are in place.

A review of notifications submitted to the Commission confirmed that the service knows the submission thresholds. The Registered Manager confirmed that they refer to the notification guidance issued by the Commission to determine the requirement for submission. One example was given whereby, following a serious concern being raised, the team was able to work with multi-disciplinary colleagues to provide reassurance that all possible risks had been mitigated, and a joint decision was made regarding future support.

The service has a lone working policy which details the responsibilities of both the employer and employees and details the need for appropriate risk assessments to be in place where required.

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.

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| <p>Area for Improvement 1</p> <p>Ref: Standard 7.2</p> | <p>The service must ensure that all complaints / concerns received are managed in line with their complaints policy.</p> |
| <p>To be completed by: with immediate effect.</p> | <p>Response of Registered Provider:</p> <p>Our procedure for addressing complaints at Island Home Care is integrated into our client agreements, with copies readily available upon request. While we seldom receive any complaints annually, we've implemented a comprehensive complaints/concerns log. This enables us to offer a formal complaints process should any concerns arise, ensuring that every issue is well documented and addressed, whether through formal or informal channels.</p> |
| <p>Area for Improvement 2</p> <p>Ref: Standard 3.6</p> | <p>The Registered Manager must ensure that contracts of employment do not commence before all safe recruitment checks are completed.</p> |
| <p>To be completed by: with immediate effect.</p> | <p>Response of Registered Provider:</p> <p>We recognise that our reference logs and contract start dates lacked clarity and that a few did not meet timeline criteria. To rectify this, we've put in a reference log to document all enquiries, commencement dates, and alternate contingency plans/risk assessments for instances where not all references are not able to be verified. (For example, when a company has closed and no longer contactable). It's worth noting that, in the majority of cases, Island Home Care obtains more references and checks than those mandated by standards. This approach will ensure that we maintain accurate evidence of reference requests, phone calls, and other pertinent information.</p> |
| <p>Area for Improvement 3</p> <p>Ref: Standard 9.4</p> | <p>Any audits and governance checks which are completed by the service must be recorded with a clear understanding of what is being measured during such checks.</p> |
| <p>To be completed by: 1 months from the date of inspection (28 January 2024).</p> | <p>Response of Registered Provider:</p> <p>Island Home Care conducts routine spot checks and care package reviews, which are recorded and dated within our care software. However, this recording did</p> |

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| | <p>not outline all the tasks that we undertook as part of those reviews. In response to this feedback, we have developed a comprehensive care package review form that precisely outlines the parameters of these routine evaluations, ensuring clarity and consistency in our review processes.</p> |
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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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