



**Jersey Care  
Commission**

## **INSPECTION REPORT**

**Complete Individual Home Care  
(CI Home Care)**

**Home Care Service**

**Suite 3  
Longueville Road  
St Saviour  
JE2 7SA**

**27 March 2024**

## 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 Complete Individual Home Care. The service is situated in the parish of St Saviour and is available island wide. The aims of the service are to “facilitate independent living at home for as long as their clients wish”.

Regulated Activity	Home Care Service
Mandatory Conditions of Registration	Type of care: Personal care and personal support Category of care: Adult 60+, dementia care, physical disability and/or sensory impairment, mental health Maximum number of combined personal care and personal support: up to 2250 care hours per week Age range of care receivers: 18+
Discretionary Condition of Registration	None

Date of Inspection	28 March 2024
Time of Inspection	09:00 to 14:05
Type of Inspection	Announced
Number of areas for improvement	None
Number of combined personal care and personal support delivered on the day of the inspection	268 hours

The Home Care service is operated by Evergreen Homecare Services Ltd, and there is a Registered Manager in place.

Since the last inspection on 29 June 2023, the Commission received notification that the Registered Manager had successfully completed the Level 5 Diploma in Leadership for 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.

Complete Individual Home Care has been registered with the Jersey Care Commission since 2019.

The company offers both hourly and live-in care packages across the island. This service has a group of loyal, hard-working staff who the managers feel should be looked after and rewarded for their work.

They do this by offering competitive pay rates, bonus's and presenting the staff with thoughtful gifts throughout the year. The inspection was completed at Easter, and the office had a table full of easter eggs and baked goods for all the staff to enjoy.

This home care service has a clear organisational structure which was evidenced during feedback. The staff, care receivers and relatives spoke very highly of the managers and said that they are "*always accessible and will go out of their way to sort any issues out*".

Policies relevant to the service are in place, updated regularly and adapted to include Jersey legislation. Staff have access to all the policies and procedures through their personal Care Line Live mobile devices issued by the company.

The service follows safe recruitment procedures. This was evidenced through viewing five recruitment files. New staff are supplied with an induction booklet and induction plan which they follow for 16 weeks. During that time, they complete their mandatory training, have formal supervisions regularly and read the staff handbook which includes policies on gratuities, sickness, conduct at work, appearance, key safe procedures, and the Care Line Live mobile devices. Staff expressed satisfaction at the in-depth recruitment and induction process and felt supported by management.

Staff training is of high importance to this company to keep both the care receivers and the staff safe. This was demonstrated during the inspection.

Initial assessments are undertaken before a care receiver is offered a package of care encompassing a health assessment, capacity, advanced decisions to refuse treatment along with do not attempt resuscitation (DNACPR) wishes.

Care plans viewed were of a high standard, individualised, comprehensive, and updated on a six-monthly basis or more frequently as care receivers' needs change. Care receivers' goals and personal wishes, need for specialised equipment, supported activities were agreed and documented.

There were no areas for improvement from this inspection.

## INSPECTION PROCESS

This inspection was announced and was completed on 27 March 2024. Notice of the inspection was given to the Registered Manager one week before the visit to ensure they were 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:

- **Is the service safe?**
- **Is the service effective and responsive?**
- **Is the service caring?**
- **Is the service well-led?**

Prior to our inspection all the information held by the Commission about this service was reviewed, including the previous inspection report, Statement of Purpose, notifications, and correspondence.

The Regulation Officer gathered feedback from four care receivers and/or their representatives. They also had discussions with the service's management and other staff. Additionally, feedback was provided by two professionals external to the service.

As part of the inspection process, records including policies, care records, duty rotas, training matrixes and monthly quality reports were examined.

At the conclusion of the inspection, the Regulation Officer provided feedback to the Registered Manager both verbally and later by email.

This report sets out our findings and includes areas of good practice identified during the inspection.

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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/>

## INSPECTION FINDINGS

At the last inspection, no areas for improvement were identified and there were none at this inspection.

### **Is the Service Safe**

Emphasising the importance of creating a safe environment so care receivers are protected from avoidable harm, with a focus on policies and procedures.

The safety of both staff and care receivers is priority to this care agency. This is evidenced by up-to-date risk assessments covering health and safety and regular audits. Care receivers have risk assessments in place for falls, lifting equipment, nutrition, and mental health. These were viewed by the Regulation Officer and noted to meet the Home Care Standards.

The service's Statement of Purpose was viewed as part of the inspection and an updated one was requested to reflect that the Registered Manager had gained the Level 5 diploma in Leadership for Health and Social Care. This was received by email.

This well-established service aims to keep care receivers at home for as long as possible and will supply packages to suit individual needs. They supply hourly as well as live in packages. They work collaboratively with other professionals to minimise risks and meet the needs of care receivers. This was confirmed during feedback and corresponds with the Statement of Purpose.

One professional spoke about how they had jointly worked together to minimise challenging behaviour for one care receiver and how the managers were thoughtful of the staff team and their wellbeing. They also liked that although the care records are online there are paper copies in all the care receiver's homes for other professionals to have access to.

All staff employed by the company are given personal 'Care Line Live' mobile devices upon successful recruitment. The devices use a cloud-based system so that any changes to rotas are in real time, the staff scan in and out of visits, and can access the care plans and update the notes. These devices are secure and cannot be accessed without a personal log in.

The service utilises an online provider to create their policies and procedures. The Deputy Care Manager then updates the policies. A selection of policies were viewed during the inspection and were found to be up to date, reviewed on a regular basis and in-line with Jersey legislation. To ensure the policies are read by the staff team, a reading list is put on all the staff teams personal Care Line Live mobile devices and the managers can see who had read the policies and how long it took them to read. They also have a "policy of the month" initiative.

In accordance with the Statement of Purpose, staff do not carry out delegated tasks unless they have been assessed and deemed competent by a Registered Nurse. This is on an individual basis and only when deemed necessary. Each care receivers care plan details what the staff team can do and what they cannot do when delegated tasks form part of the care receivers needs. Managers confirmed they will carry out spot checks and ask questions to ensure delegated tasks are not being carried out inappropriately. At the time of inspection, no delegated tasks were required.

### **Is the Service Effective and Responsive**

Assessing the organisation of the service so that care receiver's needs are respected and met.
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To establish what package of care is required, an initial assessment is carried out by a manager with the prospective care receiver, any family representatives, and their Social Worker. Once the care plan and financial arrangements have been agreed upon and signed off, a start date is set. A new package of care is reviewed at one month, three months and six monthly thereafter.



The company uses an online audit platform to carry out regular audits. These ensure compliance with the policies and promote safety. Medication Administration Records (MAR) are audited monthly, and these were documented in the monthly quality reports as “good”.

An area of good practice identified was monthly “time” audits, where the managers monitor visits to ensure all care is delivered within the time frame agreed.

Documented evidence showed that one care package was recently increased due to visits becoming increasingly longer and tasks were not being completed due to time constraints.

Care receivers and their representatives are encouraged to provide feedback every month about their care in strictest confidence using a paper form. Any feedback is then discussed at senior meetings once a month and the information disseminated to the care teams.

The staff team are given the opportunity every quarter to give feedback through an anonymous online survey. This is also achieved through regular supervisions and staff meetings.

The managers send out a quarterly newsletter to all staff as a reminder of upcoming events, celebrations, promotions, and any changes to existing policies.

Notifications of incidents or accidents to the Commission were discussed with the managers. These were found to be appropriate to the service and it was noted that staff were quick to respond to care receivers’ health needs.

A review of three separate monthly quality reports demonstrated that they are applying the standards to the formatting of the report which includes results of audits, client and staff reviews, incidents and notifications, complaints, health and safety, quality assurance and actions to take forward. This meets the standards.

## Is the Service Caring

Evidencing fundamental aspects of care and support are provided to care receivers by appropriately trained and competent staff.

The managers create and update care plans every six months with input from the care receivers and their relatives or relevant professionals. The Regulation Officer viewed eight care records. These evidenced personal preferences, capacity status, goals, advanced decisions to refuse treatment, resuscitation status, support plans, and appropriate risk assessments. All the care plans viewed clearly state what care package has been agreed upon and contained comprehensive plans of how the care is carried out. It was reassuring speaking to staff and care receivers that continuity of care is important; therefore, care receivers have the same staff caring for them. This allows a rapport to be built between care receivers and staff. In exceptional circumstances the managers will inform the care receiver of a change of carer prior to the scheduled visit.

Staff training is completed using a blended approach of both face to face and online. All staff have completed RQF Level 3 in medication administration and have their competencies assessed by senior staff who have completed their Gold Medication training. A competency booklet was developed by a local training company for the service. Annual fire training incorporates people's homes, and each care receiver has a Personal Emergency Evacuation Plan (PEEP).

The Regulation Officer was advised by the managers that staff cannot be booked in for shifts on Care Line Live if they are not up to date with mandatory training. The online system has a red, amber, green (RAG) rating to alert managers and staff of their training status. On reviewing the training records, it was reassuring to see evidence of the online system in operation.

The appropriate supervision and appraisal of staff contribute to the quality of care, professional development, compliance, and overall well-being of both care staff and the individuals they support. A sample of supervisions were viewed and found to meet the standards.

## Is the Service Well-Led

Evaluating the effectiveness of the service leadership and management.

It was evident throughout the inspection that this service is well led, and the leadership team have good oversight of all the care packages. Spot checks are carried out regularly and the managers are very accessible to both staff and care receivers.

Effective communication was highlighted as a critical strength by staff, care receivers and relatives. The managers were complimented for their willingness to make themselves available to care receivers and relatives and their responsiveness when any issues or concerns were raised.

Feedback from care receivers and representatives was positive:

*“All of the carers are first class.”*

*“We wanted to increase the package and the managers were very flexible and did it for us.”*

*“The carers know what they are doing, I trust them 100% and I am so well looked after.”*

*“Nothing to improve about the agency, they are there to make money, but I feel they are friends.”*

*“Time keeping is excellent the staff are well trained and very pleasant.”*

The supportive management team was a dominant feature in all the feedback received from care receivers and staff.

There is a comprehensive complaints policy and process to follow should the need arise. Both staff and care receivers were aware of how to make a complaint.

New staff are given an induction booklet and induction plan which they follow for 16 weeks. During that time, they complete their mandatory training, have formal supervisions regularly and read the staff handbook which includes policies on gratuities, sickness, conduct at work, appearance, key safe procedures, and the Care Line Live devices. Staff expressed satisfaction at the in-depth recruitment and induction process and felt supported by management.

Feedback from staff was positive:

*“Company are always happy to look into extra training.”*

*“Got a good induction to be a live in carer, lots of training and really well organised.”*

*“This company is amazing, great support from the managers. I have never heard any negative comments about the managers or company from care receivers or staff.”*

The results of this inspection are indicative of good management, leadership, and support is shown to the staff team. There was evidence that the whole team care for all the care receivers and strive to meet all their needs in a friendly professional manner.

## **IMPROVEMENT PLAN**

There were no areas for improvement identified during this inspection and an improvement plan is not required.

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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