

Summary Report

Blue Turtle

Home Care Service

La Maison Du Canal La Rue Des Nouettes St Ouen JE3 2GZ

20 March 2024

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.

Feedback from care receivers and relatives strongly commends the service, particularly for creating a warm and welcoming atmosphere. The feedback highlighted a care setting that is respectful and empathetic and ensures that care receivers feel secure, supported, and valued.

The Regulation Officer found evidence of effective collaboration with external health and social care professionals, guaranteeing that individuals receiving care have prompt access to specialised intervention as necessary.

The service presents a good understanding of the model of management in the home care context. However, there are areas within governance that require refinement to provide a robust and proportionate framework that aligns with home care standards and is appropriately tailored to the legislative context of Jersey. This adjustment is crucial to ensure the service operates in compliance with regulatory requirements and delivers high-quality care. During the inspection process, a meeting was held with the care provider, where an agreement was made that the service would remain the same size in order to focus on the implementation of the appointed areas for improvement.

This inspection has identified seven key areas requiring enhancement, referring to the development of risk assessments, the improvement of safe recruitment practices, and the alignment of the statement of purpose with operational realities.

Additionally, there is a need to align care plans with the care delivered, by making sure that regular reviews are undertaking with the involvement of the care receivers and their families. Conducting supervisory sessions effectively, revising policies to reflect local legislation and ensure their accessibility, and implementing training based on critical evidence to uplift care quality are also essential steps towards improvement.

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	The Registered Provider must ensure that the home
	care service fully enhances its recruitment
Ref: Standard 3; Appendix	procedures to align with regulatory standards.
4	Response of Registered Provider:
	A new policy is now in place to ensure compliance with
To be completed by:	the standards.
Immediately	

Area for Improvement 2	The Registered Provider must notify the Commission of any incidents, accidents, or potential risks to care
Ref: Standard 4.3;	receivers, as outlined in the Home Care Standards.
Appendix 7	Response of Registered Provider:
	Reporting protocols have now been enhanced to report incidents more effectively.
To be completed by:	incluents more effectivety.
Immediately	

Area for Improvement 3	Personal care plans must evidence the involvement
	of care receivers in decisions making processes and
Ref: Standard 2.1; 2.6;	be regularly reviewed to capture changes in needs,
Appendix 3	wishes and preferences.
	Response of Registered Provider:
To be completed by:	Personal plans have been updated to demonstrate
Immediately	coproduction. Plans are audited and reviewed monthly with care receivers.
	with care receivers.

Area for Improvement 4	The Registered Manager must ensure that all staff
	members are adequately supported through regular
Ref: Standard 3.14	feedback and supervision sessions.
	Response of Registered Provider:
To be completed by: One	A regular supervision and appraisal format is now in
month from the date of	place.
inspection (20 April 2024).	

Area for Improvement 5	The service needs to adjust current operational
	policies to ensure they are based upon local
Ref: Standard 9.3;	legislation and are accessible to everyone.
Appendix 2	Response of Registered Provider:
	Blue Turtle Care policies are being adjusted to align
To be completed by:	more closely with local legislation.
Three months from the	
date of inspection (20 June	
2024).	

Area for Improvement 6	A clear training and development programme must be in place for all staff and must be evaluated
Ref: Standard 3.11;	regularly.
Appendix 6	Response of Registered Provider:
To be completed by:	Our training matrix has been enhanced to meet the standards set out by Jersey Care Commission.
Three months from the	
date of inspection (20 June	
2024).	

The full report can be accessed from here.