



**Jersey Care  
Commission**

## **Summary Report**

**The Care Collective Limited**

**Home Care Service**

**Suite 30  
4 Wharf Street  
St Helier  
JE2 3NR**

**19 and 20 June 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.

Care receivers who were spoken with felt that the service met their needs and expressed overall contentment with the care and support provided. They described positive relationships with the staff team and appreciated the consistency and familiarity of the staff. However, some care receivers reported that the timings of their carer visits were unpredictable, causing uncertainty in planning their days.

Staff are recruited safely, and the Registered Manager maintains regular contact with care receivers, overseeing the care provided. Care receivers noted that the manager occasionally offers direct, hands-on care and is approachable and responsive to their needs. Despite this, the Commission has received complaints about the service's unreliable and inconsistent communication, an issue that was raised both before and during the inspection.

The service must address several areas for improvement to consistently meet the required Standards, particularly relating to the safe management of the service, ensuring care receivers are provided with explicit written agreements and making invoices clear and legible to demonstrate the hours of care and support provided. Staffing rosters must be detailed, and visits to care receivers must occur consistently, with them fully informed of the visit schedules. The complaints process must be transparent and made available, and a record of all complaints received must be retained. Records must be retained and available for inspection.

New staff must complete a structured induction programme. Care staff must complete medication training as the Standards require, and their competency must be checked at least annually. Appraisals must be carried out. The care planning process must be strengthened and improved. Assessments should be completed in response to evolving needs when there are adjustments in the amount of care provided, and care receivers must be involved in their care planning arrangements.

The service has provided updates on changes to its processes, which included the launch of a new Home Care management system, which will support several critical areas such as staff rostering, invoicing, care planning and a care receiver portal. These changes are welcomed by the Commission and should address many of the areas for improvement identified in this inspection report. However, as these changes are relatively recent and not yet fully embedded, the Commission is not able to demonstrate sustained improvement and better outcomes for care receivers. To address this, a focused inspection will be conducted later in 2024 to ensure that this service is on a path of improvement.

## IMPROVEMENT PLAN

There were twelve 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 1.3</p> <p><b>To be completed by:</b> two months from the date of inspection (20 August 2024)</p>	<p>The registered provider must ensure that care receivers are provided with a written agreement which states how the service will be provided to meet their needs.</p> <hr/> <p><b>Response of the Registered Provider:</b></p> <p>We acknowledge that there was a shortfall in this regard and following the identification of this, all service agreements were issued, signed and returned so this area for improvement was addressed prior to the deadline listed. We have also reviewed processes for the issuing of contracts and amended them to prevent this from happening again. We look forward to evidencing this on the commissions return later this year.</p>
<p><b>Area for Improvement 2</b></p> <p><b>Ref:</b> Standards 2.1, 2.5</p> <p><b>To be completed by:</b> with immediate effect</p>	<p>The registered provider must ensure that initial assessments are carried out, and regularly reviewed and revised as necessary.</p> <hr/> <p><b>Response of Registered Provider:</b></p> <p>Whilst initial assessments were already routinely carried out for all clients being onboarded prior to commencing care, we recognise the need for more thorough evidence of all that was discussed. Where we previously relied on paper-based notes to supplement the assessment carried out on our care</p>

	<p>management system, we are now using digital notes to supplement the more thorough assessment on our new care management system which makes notes more readily accessible and easier to upload onto client's profiles for more efficient data storage.</p> <p>This system also makes it clearer to identify reviews and updates made to assessments and care plans. This system was already being set up at the time of the inspection visit and was partially evidenced whilst the inspection was still active and has been functional since the inspection which we will be able to evidence on the commission's return later this year.</p>
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<p><b>Area for Improvement 3</b></p> <p><b>Ref:</b> Standards 1.3, 8.3</p> <p><b>To be completed by:</b> with immediate effect</p>	<p>The registered provider must demonstrate transparency and clarity in its invoicing procedures, and this should be linked to the care workers times so that accurate calculation can be made. Payment methods must be clear on the invoices.</p>
	<p><b>Response of Registered Provider:</b></p> <p>The new care management system also addresses this as it links the rostering features to the financial features (invoicing and payroll) and is automated meaning that these processes no longer rely on human interaction to process. This system was already being set up at the time of the inspection visit and was evidenced whilst the inspection was still active and has been functional since the inspection which we will be able to evidence on the commission's return later this year.</p>

<p><b>Area for Improvement 4</b></p> <p><b>Ref:</b> Appendix 3 Home Care Standards</p> <p><b>To be completed by:</b> with immediate effect.</p>	<p>The registered provider must ensure that staff rosters are available, and legible to reflect full staff names, dates, and times of their shifts. They should also reflect the location and activity of all workers. The arrangements for on call support must also feature within the staffing roster.</p>
	<p><b>Response of Registered Provider:</b></p> <p>We recognised that this was an area to address prior to the inspection and had begun the setup of this prior but were unfortunately unable to evidence its functionality at the time of the inspection. Also, it is regretful that a previous system that we used was unable to be reviewed at the time of inspection and we have since recovered those records for retention as required.</p> <p>The new system is used through an app that carers use on their company issued phones and the visits on the roster is linked to the profile of the staff member assigned, the profile of the client and times.</p> <p>The system also uses a google maps integration for ease of use and further clarity on the exact positioning of the client's home. This was partially evidenced whilst the inspection was active, and we look forward to evidencing prolonged use of this during the commissions return later this year.</p>

<p><b>Area for Improvement 5</b></p> <p><b>Ref:</b> Regulation 5(2) Standard 6.2</p> <p><b>To be completed by:</b> with immediate effect</p>	<p>The registered provider must demonstrate continuity of care and ensure visits to care receivers are punctual and in line with the agreed and invoiced times.</p>
	<p><b>Response of Registered Provider:</b></p> <p>The new system described above more efficiently creates alerts for late or missed visits and this is monitored on a daily basis to immediately address any potential issues in punctuality and attendance. This was already being set up at the time of the inspection visit and was evidenced whilst the inspection was still active and has been functional since the inspection which we will be able to evidence on the commission's return later this year.</p>

<p><b>Area for Improvement 6</b></p> <p><b>Ref:</b> Standard 6.1</p> <p><b>To be completed by:</b> two months from the date of inspection (20 August 2024)</p>	<p>The registered provider must ensure that care receivers are provided with a list of workers who will be providing care/support to them. The person receiving care should receive a copy of staffing arrangements in advance, so that they know who to expect and when.</p>
	<p><b>Response of Registered Provider:</b></p> <p>During an initial assessment we routinely ask the client whether or not they would like to have a staff rota and the majority response that we had received was that they did not wish for this but as previous mentioned in area for improvement two, we have improved our processes for documenting such meetings which will be able to evidence this preference where this is not wanted. Where this is</p>

	wanted, we will now be liaising with the client as to their preferred method of delivery.
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<p><b>Area for Improvement 7</b></p> <p><b>Ref:</b> Regulation 9 (1)(3) Standards 2.3, 2.5, 2.6</p> <p><b>To be completed by:</b> two months from the date of inspection (20 August 2024)</p>	<p>The registered provider must ensure that care receivers are fully involved in developing their care plans which detail how their needs will be met based upon their goals, aims and preferences. They must have access to their plans.</p>
	<p><b>Response of Registered Provider:</b></p> <p>As per area for improvement two, we have made investments in new systems that aid in more thorough documentation as we acknowledge that although we always ensure to put our clients at the centre of their care and involve them in the development of their care plans, this has not been sufficiently documented. This was already being set up at the time of the inspection visit and was partially evidenced whilst the inspection was still active and has been functional since the inspection which we will be able to evidence on the commission's return later this year.</p>

<p><b>Area for Improvement 8</b></p> <p><b>Ref:</b> Regulation 23(2) 23(3)(a) Standard 2.7</p> <p><b>To be completed by:</b> with immediate effect</p>	<p>The registered provider must maintain care and other service records for at least five years, which must be available for inspection by the Commission at any time.</p>
	<p><b>Response of Registered Provider:</b></p> <p>In reference to the records for the care receiver for whose record we have not been able to store as we</p>



	<p>were unable to recover them from the client's home. The records at the time were paper based which we addressed last year and changed to digital systems.</p> <p>The newest system that was already being implemented at the time for the inspection, further addresses this point and is much clearer and more thorough. It also makes the retention of client's documentation more concise as it is now also stored in one place in a more user friendly system. This was partially evidenced to the commission whilst the inspection was still active and continued functionality can be evidenced on the commissions return later this year.</p>
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<p><b>Area for Improvement 9</b></p> <p><b>Ref:</b> Standard 3.10 Appendix 5 Home Care Standards</p> <p><b>To be completed by:</b> two months from the date of inspection (20 August 2024)</p>	<p>The registered provider must evidence that care workers complete a structured induction programme.</p>
	<p><b>Response of Registered Provider:</b></p> <p>We acknowledged that our induction records required improvement and since the inspection we have built out a custom, purpose-built cloud-based system to allow for easier access for those assessing and inputting data and improves data retention and review. This new system also allows for better access to records between senior colleagues supporting with the induction process. We look forward to evidencing this on the commissions return later this year.</p>

<p><b>Area for Improvement 10</b></p> <p><b>Ref:</b> Standard 3.14</p> <p><b>To be completed by:</b> two months from the date of inspection (20 August 2024)</p>	<p>The registered provider will ensure that appraisals will be carried out annually.</p>
	<p><b>Response of Registered Provider:</b></p> <p>We acknowledge there was a shortfall with a few members of staff in this regard. Appraisals were largely undertaken in the weeks following the inspection and will be scheduled for the same time every year to ensure these are a priority moving forward. We provided evidence to the commission whilst the inspection was still active and look forward to evidence continued practice during our inspection next year.</p>

<p><b>Area for Improvement 11</b></p> <p><b>Ref:</b> Standard 6.7 Appendix 8 Home Care Standards</p> <p><b>To be completed by:</b> two months from the date of inspection (20 August 2024)</p>	<p>The registered provider will ensure that staff who administer medication complete appropriate training and have their competency to do so checked on at least an annual basis.</p>
	<p><b>Response of Registered Provider:</b></p> <p>All staff that administer medication had a minimum of a level 2 qualification in medication administration with several holding a level 3 qualification in medication administration. We are in the process of the applying for spaces for those staff without the level 3 qualification to be enrolled in the course run by the hospital but the speed at which this can be actioned depends on spaces on the upcoming courses and additional resources. This is a priority of ours and is being addressed as efficiently as possible.</p>

<p><b>Area for Improvement 12</b></p> <p><b>Ref:</b> Standard 7.2</p>	<p>The registered provider will ensure that the complaints procedures are detailed and made known to care receivers. The service must keep a written record of complaints in line with the Standards.</p>
<p><b>To be completed by:</b> two months from the date of inspection (20 August 2024)</p>	<p><b>Response of Registered Provider:</b></p> <p>Whilst there was a summary of the complaints policy in client's files that are kept in their homes which they all had access to, we have since amended this to include more information and to be more explicit and in keeping with the full company policy and procedure. Additionally, similarly to our new induction system, we have since built out a custom, purpose-built cloud-based feedback and complaints register system to allow for easier access to records between senior colleagues when reviewing and addressing feedback submitted and improves data retention. We look forward to evidencing this on the commissions return later this year.</p>

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