

INSPECTION REPORT

Able Community Care Limited

Home Care Service

Office 3
Bethlehem Centre
La Rue des Buffes
St Mary
JE3 3DE

18 November 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 Able Community Care Limited. The provider is located in Norwich, England, with the local office situated at Bethlehem Church, St Mary.

Regulated Activity	Home Care Service
Mandatory Conditions of	Type of care: Personal care and personal
Registration	support
	Category of care: Adult 60+, dementia care,
	physical disability, mental health, learning
	disability
	Maximum number of combined personal care
	and personal support hours: 2250
	Age range of care receivers: 18 years and above

Discretionary Condition of	The Registered Manager must complete a Level
Registration	5 Diploma in Leadership in Health and Social
	Care Module by 3 May 2027

Date of Inspection	18 November 2024
Time of Inspection	9:30 – 13:00
Type of Inspection	Announced
Number of areas for	Five
improvement	
Number of care receivers	14
using the service on the day of	
the inspection	

The Home Care service is operated by Able Community Care Limited, and there is a Registered Manager in place.

The discretionary condition on the service's registration was discussed. Initially, the Registered Manager was completing the RQF Level 5 – Diploma in Leadership and Management for Adult Care through an online platform, but this method did not align with their preferred learning style. As a result, they have now enrolled with a local provider, where they can attend in-person teaching sessions and receive direct support.

Since the last inspection on 7 September 2023, the Commission has received an updated copy of the service's Statement of Purpose. This was submitted to the Regulation Officer prior to the inspection.

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.

The inspection of Able Community Care revealed shortcomings in care risk assessments, which lacked detail and alignment with care plans, gaps in staff supervision and medication competency assessments. While environmental risks were well-documented, care-related sections and response plans for medication risks were insufficient.

The service's referral process begins with the UK office, followed by in-person assessments conducted by the Registered Manager in Jersey. Enhancements are needed to better integrate assessments, care plans, and risk management strategies, ensuring carers receive clear and comprehensive guidance. Training in Jersey's Capacity and Self-Determination Law 2016 is a key improvement area to ensure compliance. Additionally, Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) records should be linked to care plans to provide clear and accurate emergency guidance respecting care receivers' wishes.

Able Community Care provides personalised, one-to-one support, empowering care receivers to direct their care routines and maintain independence. Carers may occasionally drive care receivers' vehicles, enhancing community engagement and social connections. While classified as an introductory service in the UK, Jersey Regulation of care Law 2014 recognises Able Community Care as a home care provider, requiring regulatory compliance.

Gaps in formal staff supervision and appraisals persist, limiting accountability and workforce support, highlighting an ongoing need for improvement.

The service has policies supporting care delivery, including whistleblowing, safeguarding, complaints, and incident management.

The Registered Manager ensures monthly visits to care receivers for feedback and supports new carers with in-person guidance during handovers. Policies cover care quality, health and safety, and regulatory compliance, while communication tools like email and WhatsApp enable connectivity.

INSPECTION PROCESS

This inspection was announced and was completed on 18 November 2024.

Notice of the inspection visit was given to the Registered Manager five days before the visit. This was to ensure that the Registered Manager would be available during the visit.

The Home Care Standards were referenced throughout the inspection.¹

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

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

As part of the inspection process, records including policies, care records and incidents were examined.

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

At the conclusion of the inspection, the Regulation Officer provided feedback to the Registered Manager. 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, three areas for improvement were identified, and the Registered Provider submitted an improvement plan to the Commission setting out how these areas would be addressed.

The improvement plan was discussed during the inspection, and it was concerning to note that insufficient progress had been made in addressing all identified areas for improvement. As a result, the registered provider still needs to meet the required standards:

- 1. Formal monitoring, review, and recording of live-in care workers' performance, providing opportunities for staff to discuss their roles.
- The provider has yet to ensure that someone other than the Registered
 Manager reports monthly on the quality of care provided and compliance with
 regulations; this responsibility continues to be carried out solely by the
 Registered Manager.
- 3. The Registered Provider was also unable to demonstrate that live-in care workers who administer medication are assessed for competency.

Currently, the service still needs to have a plan in place to address these issues.

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 inspection of Able Community Care highlighted concerns about the comprehensiveness and application of risk assessments in care planning. The Registered Manager is responsible for conducting initial risk assessments when meeting care receivers. While environmental factors are comprehensively addressed in these risk assessments, the sections about care were noted to be brief.

Upon reviewing care receivers' files, the regulation officer found that the risk assessments lacked sufficient detail and did not align with care plans in mitigating identified risks. This discrepancy was discussed with the Registered Manager, who acknowledged the issue and committed to reviewing and improving the care risk assessment process. The goal is to ensure that risks are identified and effectively addressed in care plans, providing actionable guidance for staff supporting care receivers.

Home Care Standard 4.6 requires that appropriate risk assessments be conducted and recorded and informed actions be taken to manage risk. Although Able Community Care performs risk assessments, the findings must be adequately integrated into detailed care plans to guide risk management. This constitutes an area for improvement.

An area identified for improvement is the need to update the documentation used in the assessment and care planning process. The current paperwork would benefit from enhancements to ensure better integration between the initial assessment of needs, the development of detailed care plans, and the implementation of risk management strategies. Updated processes should provide carers with comprehensive and clear guidance on meeting the individual needs of care receivers, identifying potential risks, and managing those risks effectively through detailed care plans. These improvements would better equip staff with the necessary information to deliver high-quality, safe, and personalised care.

Able Community Care is a home care service that provides live-in carers for care receivers. The carers travel from the United Kingdom to the island and stay with care receivers, rotating their shifts to ensure continuous support. This rotation includes a 24-hour overlap to facilitate a smooth transition between outgoing and incoming carers. The duration of rotations varies based on the care receiver's preferences or the carers' commitments, ranging from one week to six or eight weeks.

Contracts stipulate that carers must receive a two-hour break during the day and eight hours of undisturbed sleep at night. A night carer is required if the care receiver's needs prevent this.

Recruitment checks and training oversight are managed centrally by Able Community Care's office in the UK. On the day of inspection 14 care workers from Able Community Care were in placement. The regulation officer reviewed electronic contracts between care receivers and Able Community Care and found them appropriately stored. There was also evidence of safer recruitment checks having been carried out.

Able Community Care has robust processes to ensure staff remain updated with mandatory training. This is monitored centrally by their UK office, which enforces a strict policy: carers whose training is not current are not permitted to work. This system ensures that all staff meet essential training requirements before providing care.

During the inspection, it was identified that although staff complete medications training this is not then followed up with specific competency assessments related to medication administration. This presents a significant area for improvement, as competency evaluations are required to meet Home Care Standards and ensure that caregivers administer medication safely and effectively.

Discussions with the Registered Manager revealed gaps in the documentation of medication-related care plans for those care receivers who self-administer medication. Specifically, there is a need for detailed care plans outlining how staff should respond if a care receiver experiences an adverse drug reaction.

Comprehensive care plans addressing medication administration to guide staff in managing potential risks. By also implementing medication competency assessments and strengthening care plans, The Service can enhance its receivers' safety and quality of care. This will also ensure alignment with best practices in medication management.

Is the Service Effective and Responsive?

Assessing the organisation of the service so that care receivers needs are respected and met.

The process of assessing new referrals to Able Community Care begins with the Central Office in the UK, which receives the referral and collects relevant background information. Following this, the Registered Manager in Jersey conducts an in-person assessment with the care receiver and, where appropriate, their family members to evaluate specific needs and circumstances.

There was evidence of collaboration with other organisations, including Family Nursing and Home Care, GP practices, and Hospice services. This partnership approach ensures that care receivers can access a broad range of support and expertise.

The Registered Manager demonstrates a strong understanding of the referral processes for various services and brings valuable experience in working alongside other professionals. This knowledge enhances the service's ability to coordinate care effectively and ensures that care receivers benefit from integrated and comprehensive support tailored to their needs.

Staff are required to be trained in the Capacity and Self-Determination (Jersey) Law 2016, an essential piece of local legislation guiding care practices. While the Registered Manager has previous training in this area from another role, this training has not been updated since assuming the current position.

The Registered Manager demonstrated a good understanding of Significant Restrictions on Liberty safeguards and their applicability to care receivers. However, training in Jersey-specific legislation is essential for staff arriving from the UK to ensure compliance and appropriate care delivery; this is an area for improvement.

Able Community Care maintains records of DNACPR decisions, which are kept in the care receiver's home. However, a gap exists in how these records are integrated into care planning.

The DNACPR records are not linked to the care plans, resulting in a lack of clear guidance for staff responding appropriately when a DNACPR decision applies. Potential uncertainty during emergencies may result in actions that do not align with care receiver's wishes.

A relative of someone who uses the service has said:

"The care that we receive is wonderful. The staff who are placed with us are generally very well trained and able to cope with a range of circumstances. Any time we have had a slight issue, it has been dealt with efficiently and effectively. I would recommend Able Community Care to everyone."

A professional who has worked with the service said:

"Able Care were able to risk assess and confirm that they were able to facilitate the care package with one live in carer."

Is the Service Caring?

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

The Registered Manager provided examples of how Able Community Care delivers personalised care. The service supports care receivers on a one-to-one basis in their homes, ensuring a tailored approach that respects individual preferences and promotes autonomy.

Care receivers have complete control over how they wish their care to be delivered. This includes deciding on daily routines, preferences, and activities, allowing them to maintain a sense of independence and dignity.

Carers can often be insured to drive care receivers' vehicles to enhance independence further. This enables care receivers to engage in community activities and maintain social connections, improving their quality of life.

As previously stated, Able Community Care's operational model identifies the organisation as an introductory service rather than a home care service, with its staff classified as self-employed. However, under the Regulation of Care Law (Jersey) 2014, the service is considered a home care provider requiring regulatory compliance. This distinction has significant implications for staff management and service standards.

Despite being identified as an area for improvement in the previous inspection, formal staff supervision and appraisals still need to be implemented. Although the Registered Manager conducts unannounced checks while carers work in Jersey, these do not meet the Home Care Standards, which require structured and documented supervision and appraisals. This issue requires immediate attention to ensure staff receive structured support and oversight.

The Registered Manager, has been in post since May 2024, has yet to receive formal supervision. This is an additional concern, highlighting the need for structured oversight and professional development for all levels of staff.

A care receiver who uses the service said:

"The Registered Manager is lovely, I can't complain about anything, having these carers has meant I can remain at home."

Feedback from a professional who worked along the service said:

"I have found the carers very caring and dedicated to their role often going above and beyond in an appropriate client centred way. I have found that the benefits of live-in care are tremendous enabling individuals to remain in their own homes."

Is the Service Well-Led?

Evaluating the effectiveness of the service leadership and management.

Able Community Care has a whistleblowing policy, which the Regulation Officer reviewed before the inspection. This policy is available to both staff and care receivers and provides transparent, detailed guidance on how to raise concerns.

The Registered Manager actively engages with care receivers by visiting them approximately once a month. During these visits, the manager enquires about the quality of care delivered and allows care receivers to voice any concerns or feedback.

Able Community Care primarily emails staff with important information, such as updates, policies, and procedures. This ensures that all staff members are kept informed of any changes or new developments within the service. In addition to email communication, a WhatsApp group is utilised for staff to stay connected socially. This platform allows carers to communicate with one another, offering a support network.

When a new carer arrives in Jersey, the Registered Manager takes an active role in supporting them. The manager meets with the new carer in person, to facilitate a proper handover and provide guidance in their role. This personal support helps to ensure that new staff are equipped with the information and confidence needed to deliver high-quality care from the outset.

The Registered Manager provided the Regulation Officer with policies and procedures that guide Able Community Care's operations. These policies cover a range of areas to ensure that the service is delivered in accordance with regulatory requirements and best practices.

The policies include an introduction and statement of purpose, which outlines the service's aims and objectives and specifies the types of care provided. The documents also clarify who the service helps and the care needs that are addressed.

In addition, policies related to carers and quality assurance cover staff roles, training, and performance to ensure that care quality and staff development are maintained. Health and safety guidelines are also included, ensuring safety protocols are in place for both staff and care receivers.

The policies offer guidance on client personal care, provide instructions on delivering care, and support carers in their responsibilities. Safeguarding vulnerable adults is addressed, with procedures in place to protect care receivers from abuse or neglect.

The complaints and compliments policy ensures that care receivers and staff have a transparent process for providing feedback or raising concerns. Additionally, the whistleblowing policy outlines how staff can report safety, ethical, or operational concerns. A policy on serious incidents provides procedures for reporting, managing, and reviewing significant events during care delivery.

The service provides information on who to report to for staff working in Jersey, ensuring communication and accountability. Policies also cover recording medication and the process for 24-hour handovers between staff during rotation to maintain continuous care.

The service guides travel arrangements for carers coming to and from the island as part of the rotation schedule, ensuring smooth transitions and consistency in care.

Care staff are adequately trained in critical areas for safe and effective care.

Training topics include health and safety, fire safety, equality, diversity and human rights, infection prevention and control, manual handling, food hygiene, safeguarding adults, medication administration, and first aid.

The Registered Manager explained that care staff are responsible for acquiring their own training, which is delivered online. The training is typically renewed every three years to keep staff updated on essential care practices.

A care receiver said:

"Before each one (staff member) arrived I was sent an introductory pack on each of them with a photograph. This pack gave details of their qualifications and experience together with other personal information about them. I was also given the contact details of each one so that I could speak with them prior to confirming that they would be a good fit for us."

IMPROVEMENT PLAN

There were five 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 person will ensure that all care/support workers are given regular opportunities to discuss their role and identify any issues through formal supervision and appraisal.

Ref: Standard 3.14

Response of Registered Provider:

To be completed by:

three months from the date of inspection (18 February 2025) Our Registered Manager on the island will carry out a monthly visit to enable careworkers to discuss their role or any issues they are experiencing and will complete a yearly appraisal with each carer. Stacey already visits clients and carers regularly.

Able Community Care has a 24 hour on call service where a careworker can communicate with one of three care managers and if necessary Stacey will be contacted by them.

The care manager on the mainland is readily available to communicate with during office hours. He already does this on a daily basis...

Ref: Standard 9.2 The Registered Provider must ensure a representative, other than the Registered Manager, reports monthly on the quality of care provided and compliance with Regulations. Response of Registered Provider: A Care Manager on the mainland will be completing this task each month.

Area for Improvement 3	The Registered Provider must ensure that live-in care
Ref: Standard 6.7	workers who administer medication are assessed as
	competent annually following completion of
	medication training.
	Response of Registered Provider:
	The Registered Manager will be able to assess our
To be completed by:	careworkers yearly. Care workers currently all have
three months from the date	medication certification which is updated yearly but
of inspection (18 February	we are in the process of upgrading their qualifications
2025)	as per JCC requirements.

Area for Improvement: 4	Care/support workers will be appropriately trained
	and competent in Capacity and Self Determination
Ref: Standard 6.3	Law Jersey (2016)
To be completed by: six	Response of Registered Provider:
months from the date of	
inspection. (18 May 2025)	Care workers will be asked to carry out this training
, , , , , , , , , , , , , , , , , , , ,	and complete by 18th May 2025.

Area for Improvement: 5	A registered person must, in consultation with the
Ref: Regulation 9	service user or, if applicable, the service user's
	representative, prepare a written plan, known as the
	"personal plan," setting out how the service user's
	health, safety and welfare needs are to be met
	Response of Registered Provider:
To be completed by:	Our care plans are detailed and updated yearly or
three months from the date	more often if health changes occur. Stacey will
of inspection (18 February	ensure a written personal plan is in place for each
2025)	client.

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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