

Summary Report

Able Community Care Limited

Home Care Service

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

18 November 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.

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.

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

Ref: Standard 3.14

To be completed by:

three months from the date of inspection (18 February 2025) 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.

Response of Registered Provider:

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...

| Area for Improvement 2 | The Registered Provider must ensure a |
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| | representative, other than the Registered Manager, |
| Ref: Standard 9.2 | reports monthly on the quality of care provided and |
| | compliance with Regulations. |
| | Response of Registered Provider: |
| To be completed by: | |
| three months from the date | A Care Manager on the mainland will be completing |
| of inspection (18 February | this task each month. |
| 2025) | |

| Area for Improvement 3 | The Registered Provider must ensure that live-in care |
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| | workers who administer medication are assessed as |
| Ref: Standard 6.7 | competent annually following completion of |
| | medication training. |
| | Response of Registered Provider: |
| To be completed by: | The Registered Manager will be able to assess our |
| three months from the date | careworkers yearly. Care workers currently all have |
| of inspection (18 February | medication certification which is updated yearly but |
| 2025) | we are in the process of upgrading their qualifications |
| | 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 |
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| | service user or, if applicable, the service user's |
| Ref: Regulation 9 | 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 |
| To be completed by: | Response of Registered Provider: |
| three months from the date | Our care plans are detailed and updated yearly or |
| of inspection (18 February | more often if health changes occur. Stacey will |
| 2025) | ensure a written personal plan is in place for each |
| | client. |
| | |

The full report can be accessed from here.