



**Jersey Care
Commission**

INSPECTION REPORT

Tranquil Home Care Ltd

Home Care Service

**La Frotique
La Pulente
St Brelade
JE3 8HG**

Date of Inspection

18 December 2024

**Published:
04 February 2025**

1. 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 to monitor compliance with the Law and Regulations, to review and evaluate the effectiveness of the regulated activity and to encourage improvement.

2. ABOUT THE SERVICE

This is a report of the inspection of Tranquil Home Care Ltd and there is a registered manager in place.

Registration Details	Detail
Regulated Activity	Home Care
Mandatory Conditions of Registration	
Type of care	Personal care and personal support
Categories of care	Adult 60+, dementia care, physical disability and/or sensory impairment, learning disability and autism
Maximum number of care hours per week	600
Age range of care receivers	18 years and above
Discretionary Conditions of Registration	
None	
Additional information	
The Regulation Officer conducted an introductory visit to the service 02 August 2024	

3. ABOUT THE INSPECTION

3.1 Inspection Details

This inspection was announced and notice of the inspection visit was given to the Registered Manager seven days before the visit. This was to ensure that the Registered Manager would be available during the visit.

Following the inspection, an updated copy of the service's Statement of Purpose was submitted. The Regulation Officer reviewed the Statement of Purpose as part of the inspection process, and it was found to reflect the service provided.

Inspection information	Detail
Dates and times of this inspection	18 December, 08:15-15:10
Number of areas for development from this inspection	None
Number of care receivers accommodated on day of the inspection	Eight
Date of previous inspection:	4 April 2023
Areas for development noted in 2023	None
Link to previous inspection report	IR-Tranquil-Home-Care-20230404-complete.pdf

3.2 Focus for this inspection

This inspection focused on these specific new lines of enquiry:

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

4. SUMMARY OF INSPECTION FINDINGS

4.1 Progress against areas for development identified at the last inspection

At the last inspection, no areas for improvement were identified.

4.2 Observations and overall findings from this inspection

During the inspection process, the Registered Manager was found to be very professional, organised, caring, and compassionate about the service they provide. The Registered Manager ensures structure to the care provided to care receivers, including the initial assessment, regular reviews of care plans and well-being visits in the home.

A care receiver shared:

“They are all marvellous (carers and registered manager), do their job well, and so polite and have no complaints what so ever.”

During the inspection process the Regulation Officer met with the majority of the staff team who were found to be knowledgeable, experienced and well-trained for their roles.

Since the last inspection, three new employees have joined the team, and an example of a comprehensive induction package was seen. The staff team has completed its annual mandatory and statutory training, and two members of the senior management team are currently studying toward their Level 5 Diploma in Health and Social Care.

Staff consulted provided positive feedback about working for the agency and expressed that they feel valued and supported by the Registered Manager. The carers emphasised how they value the teamwork and shared that all the staff support one another and work well together.

The Registered Manager shared they have a:
“Great team and works well.”

The Regulation Officer was impressed by the Registered Provider/Registered Manager’s attention to detail and commitment to upholding the service’s ethos, which includes making each day a little bit easier and helping individuals achieve their optimum health and well-being.

5. INSPECTION PROCESS

5.1 How the inspection was undertaken

The Home Care Standards were referenced throughout the inspection.¹

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection report from 4 April 2023, reviews of the Statement of Purpose, variation requests and notification of incidents.

The Regulation Officer gathered feedback from two care receivers and attempts were made to speak with two care receiver representatives. They also had discussions with the service's management and other staff.

Additionally, three professionals external to the service were contacted for feedback and one responded.

During the inspection the Regulation Officer was fortunate to visit care receivers in their homes to witness the administration of medicines by competent carers.

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

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

At the conclusion of the inspection, the Regulation Officer provided feedback to the Registered Manager. This report sets out our findings.

5.2 Sources of evidence

The sources of evidence reviewed as part of this inspection are listed in Appendix 1.

6. INSPECTION FINDINGS

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.

A sample of personnel files was reviewed during the inspection process, and the Regulation Officer saw evidence of safe recruitment practices. All expected records were seen, including a job description and application form. A list of interview questions and answers was available, and there is a plan for a senior management team member to conduct future interviews with the Registered Manager. Also included is a completed staff competency assessment for medication management and a staff competency framework that evidenced shadowing completed and sign-off for demonstrating desired skills such as communication and delivering person-centred care. There is a three-month probationary period, and in the staff contract, the number of hours a care receiver is employed to work, and their pay rate is evident. Pay rates are increased in line with the increase in long-term care benefits.

On day one of employment, a new staff member commences a 12-week induction period.

Carers are provided with a staff handbook that introduces their role, contains information such as expected standards of conduct and performance, and covers challenging poor practices referenced in the Whistleblowing policy.

The handbook includes a section regarding a carer's role in preventing transmission of infection. During the home visits attended by the Regulation Officer, it was pleasing to observe good compliance with infection, prevention, and control measures. All carers have been provided with a bag that contains gloves, wipes, and aprons.

Inductees must also complete a safeguarding adult's workbook, which the Registered Manager reviews with the carer, and discussions held to ensure understanding. The booklet is very detailed, and the Regulation Officer suggested the addition of a formal sign-off to include the completion date and signature to evidence that the discussion has been conducted, the same as the staff handbook. An example was provided where working collaboratively with a representative of a care receiver averted a safeguarding concern.

The agency is well-staffed to accommodate the number of current care packages. The Registered Manager shares a challenge that is shared across the sector: It has been difficult to recruit suitably qualified staff to expand service provision safely. A new qualified member of staff will join the team in 2025 with a remit to include upskilling of the team in end-of-life care and mental health support.

During the home visits attended by the Regulation Officer, medication provided to care receivers was observed, and safe practices followed. This was also an observation made by a healthcare professional and fed back to the Regulation Officer. This includes the storage of the medication in a locked box and a date to discard a medication written on the box. The Registered Manager checks the medications in the home once a month and includes a review of the Medicine Administration Record (MAR) to gain assurance that it is accurately completed.

It was evident that consideration of safety in the homes visited was paramount as there were clear passages to aid safe mobility and signs that reminded care receivers to dial 999 in the event of a fall or in an emergency, which were located near their phones.

Personal Emergency Evacuation Plans (PEEPS) have been created and individualised to meet the needs of each care receiver in the event of a fire in their home.

Risk assessments are updated at least every three months, and some examples of completed risk assessments include self-neglect, falls, and the environment. Consideration of staff welfare within the risk assessments was evident.

Rotas and the visit schedules are accessible on a mobile phone application, which carers can access. The application registers when the carer arrives and leaves a home visit and includes the tasks required to be completed at each visit. As the rota is a rolling rota, continuity of carer is provided to the care receivers. Carers do not receive paid breaks and, until recently, were not paid for travelling time between home visits. However, all current care packages are within close proximity. It has recently been introduced that carers are paid for a shift, including travelling time at weekends. A staff member shared that they hoped this would be expanded to include during the week as when providing one-hour visits, the unpaid travel time accrues. Each staff member has every other weekend off, and the deputy manager and the Registered Manager can cover staff shifts where required, as they do not have their own caseload.

A concern was logged within the compliments and complaints folder, and the required action was recorded. Since the last inspection, the Commission has not been notified of any complaints about the service, and the service has notified the Commission of any reportable incidents.

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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The Registered Manager conducts initial assessments for care packages and a contract signed by both parties before the care package commences. The contract is transparent and includes the personal care and support to be provided, the allocated visit schedule, fees and contract termination.

The Registered Manager shared that they have weekly meetings with families to “*Ensure everything is running smoothly*”, and care receiver representatives are updated via WhatsApp with any issues, sometimes as frequently as daily.

A personal care and support diary is maintained in the home so that the care receiver representatives can see how their family member has spent their day.

A feedback survey is disseminated to care receivers and their representatives twice a year. The survey is extensive and covers all aspects of the Home Care Standards. The Regulation Officer was shown examples of completed surveys, including the questions posed and the responses provided. Examples of these are:

Do you consider the service to be safe? “*Yes, care is absolutely amazing!*”

Do you consider the service provided by Tranquil Home Care Ltd to be effective? “*Yes, they provide above normal care.*”

Do you consider the service provided by Tranquil to be caring? “*Yes, all the carers are fantastic, caring and considerate to all our requirements.*”

Are they responsive? “*100%. They are all amazing.*”

“*The manager is considerate and always polite.*”

“*The service is very well led and professional.*”

It is commendable that communication between the agency, care receivers, and their representatives is readily accessible in many forms.

The Registered Manager visits all the care receivers personally two to three times a week to ensure they are well cared for and to check the well-being of the staff. Once a month, during a visit, money provided for shopping is reconciled with the receipts.

A care receiver shared:
“*I am very satisfied and thankful for the help.*”

In the office, there is a folder accessible to all staff containing contingency plans for unforeseen events, such as the unplanned absence of the Registered Manager and steps to follow in an emergency situation. In the event that electronic care records cannot be accessed, a paper copy of each care receiver's care plan is also kept in the folder and updated regularly in line with updates made at care plan reviews. It is commendable that the folder exists, is maintained and is accessible to all staff.

Is the service caring?

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

During the review of a care plan as part of the inspection process, it was evident that the care receiver had been involved in determining their care needs and preferences to achieve their desired goals and outcomes.

The care plan included a section titled '*About me*' which was very informative. Care receivers' important information, such as their preferred name and do not attempt cardiopulmonary resuscitation (DNACPR) status, is documented and accessible to the care team via their phone application. The Registered Manager described advanced care planning conversations with care receivers and reported that care receiver's often express their desire to remain in their own home.

A professional shared:

"From the care plans in place, I have felt the staff have gone above and beyond to try and keep clients in their own homes."

A list of prescribed medications and information detailing the medical condition being treated are included. During the home visits, a carer was able to inform the Regulation Officer what drugs they were administering for a condition.

It was recommended by the Regulation Officer that "*No known allergies (NKA)*" be recorded rather than not acknowledging allergies at all when there is no allergy.

The care plans were found to be very comprehensive, and if a new member of staff joined the team, they would understand their role and responsibilities. Care plans are updated every three months and earlier if required.

Daily care records are documented by carers, and examples include any medication given and activities completed. The provision of healthy, nutritious meals is a priority of the agency, and the benefits to the care receiver were shared. The Registered Manager shared how proud they and the team are of cases where care receivers' health and well-being have been transformed once the agency has commenced providing care and support.

A professional shared:

"They have problem solved to provide personal care and a safe and clean environment to clients who are resistant to the support."

It was clear to the Regulation Officer that person-centred care is provided to the care receivers, and an example of this was a board in a care receiver's home containing the photographs of carers and their names for the care receiver to refer to.

The shift rota adopted works on a four-week rolling rota, where all full-time staff, due to their shift pattern, have one week off a month. Staff feedback they like knowing the rota as it supports their work/life balance, and low rates of staff sickness could be attributable to the rota.

The team also has a work WhatsApp group chat to support communication.

This can include policy updates, and an example was given where the chat was used for an emergency involving a staff member, which resulted in a rapid response from colleagues.

A carer shared:

Their role is "rewarding" and there is "always someone on hand if support is needed".

The Registered Manager asks staff for feedback concerning their role and working for the agency, and staff shared that they could speak openly and make suggestions.

Is the service well led?

Evaluating the effectiveness of the service leadership and management.

The Registered Manager shared an extensive training package for staff, which gives them the assurance that their staff have the knowledge and are well equipped for their role. A blended approach to training is provided within the rota allocation.

A sample of policies reviewed were all in date, and the Registered Manager explained that they review all the policies at least annually and sooner if they become aware of new best evidence-based practice. It was recommended during the inspection and acknowledged by the Registered Manager that reference be made to the local Multi-Agency Adult Safeguarding Policy within the agency's safeguarding policy. Staff shared that there are two policy folders, one in the office and one in the home, to which all carers work have access.

The Registered Manager promotes mutual respect amongst the team and, when required, has conducted difficult conversations that have led to a satisfactory outcome.

Company pool cars are provided for staff to use and are located near to the office. This means staff who do not own a car but hold a driving licence are not discriminated against working for the agency.

Feedback from staff confirmed they receive quarterly supervision meetings with a senior management team member that allows them to share experiences, raise concerns, and request any care receiver-specific training.

A comprehensive supervision record seen as part of the inspection process included supportive advice from the Registered Manager to the carer. Appraisal and supervision meetings are held confidentially in the office where staff are encouraged to share innovative ideas for practice.

A team member shared that staff meetings are held online monthly and during the evening, which staff are paid to attend. This provides another avenue for information sharing.

Prior to the inspection, a number of documents were requested, including a sample of monthly provider reports. The reports were completed by the Registered Manager or trainee deputy manager and found to be open and transparent. Feedback received, both constructive and positive, was documented. Each month, the agency has a different quality assurance focus, and an example of this is the management of foot care.

The Registered Manager is very considerate of their staff, and staff wellbeing is a high priority. There is an open-door policy, and staff and care receivers recently enjoyed a Christmas lunch together.

The Registered Manager expressed to the Regulation Officer their appreciation of the staff team, and staff described the Registered Manager as being accessible, kind, accommodating, and approachable.

A staff member shared:

“Since working for Xxx, it has put my faith back in care.”

DEVELOPMENT PLAN

There were no areas for development identified during this inspection and a development plan is not required.

Appendix 1 – Sources of Evidence

New key lines of enquiry	
Focus	Evidence Reviewed
Is the service safe	<p>Policies including:</p> <ul style="list-style-type: none"> • Administration of Medication Policy and Procedures • Complaints and compliments for service users • Disciplinary Policy and Procedures • Grievance Policy and Procedures • Medication Errors and Near Misses' Policy • Safeguarding Policy and Procedures • Whistleblowing Policy <p>Staff training matrix</p> <p>Feedback from professionals, carers, care receivers and their representatives</p> <p>Care records</p> <p>Staff competency workbook</p> <p>Medication assessment</p> <p>Staff handbook</p>
Is the service effective and responsive	<p>Care records</p> <p>Feedback from care receivers</p> <p>Feedback from professionals external to the service</p>

Is the service caring	Observation Feedback from care receivers Care records
Is the service well-led	Audit Discussion with staff Staff rota Monthly provider report

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for development 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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