



**Jersey Care
Commission**

Summary Report

We Care Community

Home Care Service

**Regus Suite 115, Floor 1
Liberation Station
St Helier
JE2 3AS**

14 and 19 February 2025

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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.

This was the first inspection of the service since its registration, and overall, feedback from care receivers was highly positive. They expressed that the staff team provided effective care, as they expected and wished for. They described being introduced to their workers in advance and felt well cared for and supported by them. Discussions with the Registered Manager showed a detailed knowledge of care receivers' needs and requirements. The manager articulated their vision for the service and their commitment to its ongoing development.

Several areas for improvement were identified from this inspection, all acknowledged and understood by the Registered Manager. These included the need to evidence safer recruitment practices and to provide staff with a structured and comprehensive induction programme. Although some records indicated that staff competency assessments had been carried out, the induction process fell short of meeting the Standards overall. Supervision and appraisals have not yet been implemented. While the Registered Manager and staff team confirmed that regular discussions occur, the Standards require formal supervision and appraisals to be carried out.

Although a range of training has been provided to staff through e-Learning, there is a need to ensure that all mandatory training is provided, some of which should include face-to-face training and in-depth dementia training to align with the service's registration category. The Registered Manager has identified the potential of two staff members and supported their application for a Level 3 vocational award in health and social care. A range of policies, pre-admission assessments, and care plans were available and reviewed; they all needed strengthening to meet the required Standards.

The staff team shared positive feedback about working for the service and felt appreciated, and happy in their work.

Several good examples were provided of the service ensuring consistency in care staff, providing written information about the service, and maintaining effective communication with care receivers and their representatives.

IMPROVEMENT PLAN

There were seven areas for improvement identified during this inspection. The table below is the Registered Provider's response to the inspection findings.

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| <p>Area for Improvement 1</p> <p>Ref: Standard 3.6, (Appendix 4 Home Care Standards Regulation 17 (5) To be completed: with immediate effect</p> | <p>The registered provider must ensure all staff are subject to safe recruitment practice in line with the Standards.</p> <p>Response by registered provider:</p> <p>We care will conducting comprehensive background checks, such as obtaining criminal record checks and references, to verify the candidate's integrity and history and commitment to safeguarding and promoting the well-being of those in our care.</p> |
| <p>Area for Improvement 2</p> <p>Ref: Standard 3.10 Regulation 17 (4) To be completed: by 19 April 2025</p> | <p>The registered provider must demonstrate that all care workers complete a structured induction programme, which will assess their competence to work in the service.</p> <p>Response by registered provider:</p> <p>An induction programme is currently being developed to ensure that all new staff members receive comprehensive training and support as they begin their roles. The programme will cover essential topics, including organizational policies, safeguarding procedures, health and safety guidelines, and specific responsibilities related to their positions. To ensure accountability and compliance, records of each individual's participation in the induction programme will be maintained. These records will be securely stored and regularly reviewed, helping to track completion and ensure that all staff members have received the necessary training to perform their roles effectively and in line with organizational standards.</p> |

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| Area for Improvement 3 Ref: Standard 3.11 Regulation 17 (4) To be completed: by 19 June 2025 | The registered provider must ensure that all care workers receive the identified mandatory training for their roles, and in line with the categories of registration. |
| | Response by registered provider: We will ensure that face to face training will be provided for all staff to ensure they have the necessary skills, knowledge, and understanding to perform their roles effectively This training will cover essential areas, such as safeguarding, health and safety, first aid, dementia equality and diversity, and specific job-related competencies. Additionally, ongoing professional development opportunities will be offered to help staff stay up-to-date with best practices, new regulations, and any changes in their roles. |

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| Area for Improvement 4 Ref: Standard 2.1 Regulation 8 (3) To be completed: by 19 April 2025 | The registered provider must ensure that initial assessments identify care receivers' preferences, needs, and wishes and information in line with the Standards. |
| | Response by registered provider: We care will ensure that all relevant information about individuals is gathered and accurately documented before any formal assessment or intervention takes place. ensuring that assessments are tailored to the individual's specific circumstances, allowing for more effective and appropriate decision-making and for future evaluations or follow-ups. |

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| Area for Improvement 5 Ref: Standard 2.3, 2.6, 4.7 Regulation 8, 9.1 To be completed: by 19 April 2025 | Care plans and risk assessments must be implemented to demonstrate how risks are identified and managed, and care planning arrangements must meet the Standards. |
| | Response by registered provider: We will ensure detailed care plans reflect a person-centred approach, ensuring that all aspects of an individual's needs, preferences, and goals are fully understood and considered. We care services, will 16 meet the individual's needs, whether they relate to health, emotional well-being, daily activities, or personal goals demonstrating that the person has been actively involved in its development. |

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| <p>Area for Improvement 6</p> <p>Ref: Standard 1.4 Regulation 5</p> <p>To be completed: by 19 June 2025</p> | <p>The registered provider must ensure that a range of policies, specific to Jersey legislation and practices, are available and accessible to people receiving care and others.</p> <p>Response by registered provider:</p> <p>We will ensure that a comprehensive range of policies, tailored specifically to Jersey legislation and local practices, are developed, regularly reviewed, and readily accessible to individuals receiving care, their families, and other relevant stakeholders. These policies are designed to uphold the rights, safety, and well-being of all service users, and are made available in formats that are easy to understand and access, promoting transparency and informed decision-making.</p> |
| <p>Area for Improvement 7</p> <p>Ref: Standard 3.14 Regulation 17 (4)(c)</p> <p>To be completed: by 19 April 2025</p> | <p>The registered provider must ensure that care workers receive regular opportunities to discuss their roles through formal supervision and appraisal.</p> <p>Response by registered provider:</p> <p>Supervision and appraisal for staff will be carried out regularly to ensure continuous professional development, maintain high performance, and support the well-being of all employees. The supervision process will provide staff with one-on-one sessions to discuss their roles, receive feedback, set goals, and address any concerns or challenges they may face. Appraisals will be conducted on an annual or bi-annual basis, offering a more formal review of staff performance. Both supervision and appraisals will be documented, with records retained to track progress over time.</p> |

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