



**Jersey Care  
Commission**

## **Summary Report**

**Serene Care Jersey Limited**

**Home Care Service**

**St Andrews Church**

**St Andrews Park**

**First Tower**

**St Helier**

**JE2 3JA**

**Inspection Date**

**26 and 27 November 2025**

## 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.

### **4.1 Progress against areas for development identified at the last inspection**

At the last inspection, five areas for development were identified and a development plan was submitted to the Commission by the Registered Provider, setting out how these areas would be addressed.

The development plan was discussed during this inspection, and it was positive to note that four out of five of the developments had been made. This means that there was evidence of:

- Parameters for the use of 'as required' medicines advised and authorised by health care professionals.
- Skills and tasks are to be performed by care/support workers under an individual (person specific) delegation.
- The management structure reflects the size of the home care service and the volume and complexity of care provided.
- Each care/support member is aware of, supported and trained to fulfil their responsibilities within the governance arrangements including access to all of the policies. The policies include a creation and review date.

While some progress has been made in addressing sufficient staffing levels, further work is required. This will be discussed in more detail in the main body of the report.

Areas for development will now be referred to as areas for improvement.

### **4.2 Observations and overall findings from this inspection**

Since the last inspection, new employees have joined the staff team, some bringing considerable experience. A team leader role has recently been introduced to champion dignity, choice, and independence while promoting strong teamwork and clear communication.

Management support has also been strengthened, with the addition of a company secretary and a role dedicated to overseeing staff recruitment and training. It is evident that each member understands their own responsibilities as well as those of others, and they work effectively together. The regulation officers found the service to be well-organised, with robust governance structures in place.

With the increase in staff numbers, it was reported that employees no longer exceed 48 working hours per week, in compliance with the Standards. The Regulation Officer reviewed the rota and confirmed this, except in cases where full-time staff attend mandatory or specialist training. On these occasions, hours worked exceed 48 per week. Rotas remain an area for improvement.

The staff training matrix was reviewed and confirmed that all staff are compliant with mandatory training and training specific to the categories of care provided.

Recruitment files were reviewed and found to be well-organised, containing all necessary documentation. However, some processes still required strengthening. Safe recruitment remains an area for improvement.

A sample of policies was reviewed and confirmed to have been updated this year. Policies are accessible to carers via a mobile application, with core policies also available in the homes.

During the inspection process complimentary feedback regarding the Registered Managers leadership skills, communication, professionalism, approachability and support was received from care receivers, their representatives, the staff team and a health care professional external to the service.

The Regulation Officer observed person-centred care delivered with dignity and respect by kind, caring, and compassionate carers.



A care receiver representative:

They made such a massive difference.



A care receivers' representative:

They are all very good. A cracking bunch. They have gone above and beyond.

## IMPROVEMENT PLAN

There were two 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 3.6</p> <p>Regulation 17</p> <p><b>To be completed:</b> with immediate effect</p>	<p>All safer recruitment employment checks must be completed prior to workers commencing employment.</p>
	<p><b>Response by the Registered Provider:</b></p> <p>Serene Care Jersey recognises that isolated gaps in recruitment documentation occurred due to an administrative misunderstanding.</p> <p>With immediate effect, all safer recruitment checks are completed and verified before any staff member commences employment.</p> <p>An amended recruitment sign-off is now confirmed by management prior to agreeing a start date, ensuring full compliance.</p>
<p><b>Area for Improvement 2</b></p> <p><b>Ref:</b> Standard 3.9</p> <p>Regulation 17</p> <p><b>To be completed:</b> by 30/04/2026</p>	<p>The Registered Manager must ensure that there are sufficient staff employed to cover absences due to staff training to guarantee care/support workers will not work more than 48 hours per week unless under extraordinary circumstances on a short-term basis only.</p>
	<p><b>Response by the Registered Provider:</b></p> <p>Serene Care jersey recognises that attendance at mandatory and specialised training must not result in staff exceeding the 48-hour weekly working limit, except in exceptional circumstances.</p> <p>To address this, mandatory and specialised training will be planned on identified weeks where the individual is rostered below 48 hours.</p> <p>Completion dates (for online mandatory training) are now proposed and coordinated by management, rather than managed independently by staff.</p>

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