



**Jersey Care
Commission**

INSPECTION REPORT

Complete Individual (CI) Home Care

Home Care Service

Suite 3

Longueville Business Centre

Longueville Road

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JE2 7SA

Inspection Dates

18 and 19 March 2026

Date Published

16 April 2026

1. THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014 ('the Law'), 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 CI Home Care. The home care service is operated by LV Care Group and there is a registered manager in place.

Registration Details	Detail
Regulated Activity	Home Care Service
Mandatory Conditions of Registration	
Categories of care	Adult 60+; dementia care; physical disability and/or sensory impairment; mental health
Maximum number of care hours each week	2250 hours
Age range of care receivers	18 years and above
Discretionary Conditions of Registration	
None	
Additional information	
A new Registered Provider took over the service on 12 January 2026. As part of the transition, the provider integrated members of its existing home care staff team and transferred several care packages from its established home care service. This resulted in an expanded workforce and an increase in the number of care packages being managed.	
A revised Statement of Purpose was submitted to the Commission to reflect the changes to the Registered Provider.	

As part of the inspection process, the Regulation Officer evaluated the service's compliance with the mandatory conditions of registration required under the Law. The Regulation Officer concluded that all requirements have been met.

3. ABOUT THE INSPECTION

3.1 Inspection Details

This inspection was unannounced in order that the Regulation Officer could assess everyday practices without preparation. Additionally, due to the new Registered Provider takeover, the Regulation Officer wanted to ensure the transition between providers has been handled safely and effectively.

The Registered Manager and Deputy Manager were available to facilitate throughout the inspection.

Inspection information	Detail
Dates and times of this inspection	18/03/2026 09:00 – 16:50 19/03/2026 08.30 – 12.15
Number of areas for improvement from this inspection	None
Number of care hours on the week of inspection	1664.5 hours
Date of previous inspection Areas for improvement noted in 2025 Link to the previous inspection report	10 April 2025 None RPT CI Inspection 20250410.pdf

3.2 Focus for this inspection

This inspection included a focus on these specific 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 improvement identified at the last inspection

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

4.2 Observations and overall findings from this inspection

The management team remained focused on business as usual throughout the recent takeover, continuing to work efficiently, stay organised, and offer consistent support. Their efforts ensured that day-to-day operations ran smoothly, resulting in minimal disruption for both care receivers and staff during the transition.

The service's Statement of Purpose was reviewed as part of the inspection process and was found to accurately reflect the current practices and service delivery in place.

Supervision and appraisals meet the Standards, with compliance monitored through a matrix. Staff reported receiving regular, useful supervision and said the management team are approachable and available for support when needed.

New staff complete a tailored induction that covers essential training, organisational orientation, and supervised shadowing to build practical skills. Competencies are checked to ensure safe practice, regardless of prior qualifications. All new employees then progress through a structured probation period with clear goals and staged pay increments.

The service provides a strong blended training programme, using in-house equipment for practical simulation and external providers for specialist subjects. With the previous in-house trainer no longer in post, the service is working to train new staff to deliver practical sessions such as moving and handling.

Meal preparation is included in some care packages, with staff completing a weekly meal planner alongside each care receiver to record their preferred foods and meals.

The service supports staff development by helping new staff gain Level 2 qualifications and, through supervision and appraisals, identifying opportunities for further progression and specialist training.

5. INSPECTION PROCESS

5.1 How the inspection was undertaken

The Home Care and Support in the Community 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, reviews of the Statement of Purpose, safeguarding referrals and notification of incidents.

The Regulation Officer gathered feedback from 3 care receivers and 4 of their representatives. They also had discussions with the service's management and received feedback from other staff members. Additionally, feedback was requested from three professionals external to the service, and two responded.

As part of the inspection process, records including policies, care records, and monthly quality assurance reports were examined.

At the conclusion of the inspection visit, the Regulation Officer provided feedback to the Registered Manager and Deputy Manager and followed up in writing by email on 18 March and 31 March 2026.

This report presents our findings from the inspection and outlines the range of observations made. Throughout the report, we may highlight any areas of good practice identified, along with suggestions where practice could be strengthened or further enhanced.

¹ All Care Standards can be accessed on the Commission's website at <https://carecommission.je/>

5.2 Sources of evidence.

New key lines of enquiry	
Focus	Evidence Reviewed
Is the service safe	Employee files Recruitment policy Competency assessment/Induction Training matrix Supervision and appraisal matrix Risk assessments Feedback Administration of medicines policy and procedure Staffing policy Adult support and protection policy
Is the service effective and responsive	Risk assessments Feedback Written agreements (contracts) Complaints, suggestions and compliments policy Staff surveys Care receiver surveys Audits and spot checks Care records
Is the service caring	Initial assessments Supervision and appraisal Feedback Training Personalised care plans
Is the service well-led	Feedback Policies and procedures Staff retention Organisation structure Monthly reports Staffing rotas Supervision and appraisal matrix

6. INSPECTION FINDINGS

Is the service safe?

People are protected from abuse and avoidable harm.

The Regulation Officer reviewed several staff files, which demonstrated that safe recruitment procedures had been fully adhered to prior to each staff member commencing employment. The files showed evidence of completed Disclosure and Barring Service checks, the sourcing and verification of two references, and the successful completion of an interview process, confirming that appropriate safeguarding and vetting measures were in place.

All new staff complete a structured induction period that includes mandatory training, an introduction to company policies, and a general orientation to the organisation. During this time, staff also shadow colleagues across a range of care visits to gain practical insight, and competency assessments are completed to ensure they are confident and safe in their roles. Induction programmes are tailored to each individual, taking into account their previous experience, skills, and qualifications. For example, if a new staff member already holds a Level 3 medication qualification, they will still complete a competency assessment to verify that their knowledge and skills remain current.

Individual risk assessments are carried out for care receivers whenever potential risks are identified, ensuring that their specific needs and circumstances are fully considered. These assessments help staff understand how best to support each person safely, outlining any measures or adjustments required to reduce risk and promote wellbeing.

Staff who administer medication are required to hold a Level 3 medication management qualification, and their competencies are reviewed annually. These assessments are carried out by the management team using a comprehensive competency framework that covers all forms of medication administration, including tablets, ointments, and liquids. Alongside direct observation, the assessment also includes a knowledge check to ensure staff remain safe and confident in their practice.

The service uses a blended approach to transport for carers. A fleet of vehicles is available for staff who are unable to use their own cars. For those who do use their personal vehicles, checks are carried out to ensure they have appropriate insurance and that their vehicles are roadworthy. Additionally, carers may use a care receiver's vehicle if this is the care receiver's preferred option. In such cases, appropriate safety checks are completed, including verification of insurance, maintenance, and overall suitability for use.

The service delivers a robust training programme using a mix of online and face-to-face learning. While some practical training, such as moving and handling, was previously delivered in-house by a trained staff member, the service is now working to upskill other team members to take on this role. They have access to equipment, including a profile bed and hoist, which enables realistic simulation and role-play during training. For more specialist subjects, such as dementia and palliative or end-of-life care, the management team makes use of local external training providers.

Health and safety for both staff and care receivers is actively managed through a service-wide risk register, which helps identify, understand, and mitigate potential risks. This is supported by clear health and safety policies and procedures, alongside a regular programme of audits, such as medication and record-keeping checks, to ensure safe practice and continuous improvement.

Is the service effective and responsive?

Care, treatment, and support achieves good outcomes, promotes a good quality of life and is based on the best available evidence.

The service was required to integrate a number of care receivers and staff from another home care service belonging to the new provider. This transition was managed sensitively, with careful consideration given to how the changes might affect staff. To support a smooth and confident handover, the management team arranged shadowing sessions for both sets of staff and care receivers. This enabled everyone involved to observe different ways of working, meet the new clients, and begin building positive working relationships from the outset. Service continuity has been successfully maintained for care receivers using the service.

The service is managed effectively, underpinned by an overarching philosophy of quality and continuous improvement. A programme of regular audits throughout the year ensures that practices and procedures are consistently reviewed, with learning from any findings used to strengthen service delivery. In addition to this, the Registered Manager maintains a comprehensive risk register, providing clear oversight of potential risks to the service and ensuring that timely actions are taken to address them. This structured approach supports a well-governed, forward-looking service that remains committed to safe, high-quality care.

Monthly reports are consistently produced, providing a clear and concise oversight of the service. The Regulation Officer reviewed three months' worth of these reports, which included key areas of operational monitoring such as staffing levels, training and supervision compliance, and recorded accidents and incidents. Audit activity was also summarised, with brief overviews of outcomes and any actions taken. Overall, the monthly reports are informative, offer a useful snapshot of operational performance, and support effective governance by highlighting trends, risks, and areas requiring attention.

Initial assessments are completed by the management team alongside the care receiver and, where appropriate, their family members. These holistic assessments consider social, cultural, and religious beliefs, as well as the individual's health, wellbeing, and physical needs. Personal preferences, including likes and dislikes, are also incorporated to ensure care planning is tailored and person-centred.

The service uses an electronic system to manage monthly staff rotas. The Registered Manager explained that if a staff member has not completed their mandatory training, the system automatically prevents them from being added to the rota. This immediately alerts the management team to the compliance issue, prompting swift action and reminders for the staff member to complete the outstanding training.

Is the service caring?

Care is respectful, compassionate, and dignified. Care meets people's unique needs.

The Regulation Officer reviewed a sample of care plans and found them to be appropriate, detailed, and clearly individualised to each care receiver's needs. Care plans reflected personal preferences, routines, desired outcomes, and the specific level of support required. They demonstrated a good understanding of each person's circumstances, the plans were regularly reviewed and updated to ensure they remained current and responsive to any changes in the care receivers' health, abilities, or personal wishes.

Feedback from care receivers and their relatives highlighted that staff are considerate, respectful, attentive to the wishes of care receivers, and sensitive to privacy and dignity.

For some care receivers, meal preparation forms an important part of their care package. A weekly meal planner is completed in partnership with the care receiver, ensuring their food choices, dietary preferences, and nutritional needs are fully captured. This approach supports personal choice, promotes independence, and helps staff provide meals that are both appropriate and aligned with the individual's wishes.

The service actively promotes the learning and development of its staff. Individuals who join the service without existing qualifications in health and social care are encouraged and supported to complete a Level 2 qualification in this field. Through regular supervision sessions and annual appraisals, the service works with each staff member to explore their ambitions and identify opportunities for progression, including undertaking a Level 3 qualification or any specialist training that may enhance their skills and professional development.

Staff supervision and appraisals are compliant with the Standards and are monitored through a supervision and appraisal matrix. Staff members confirmed that they receive regular supervision, describing it as a valuable opportunity to discuss their roles, raise any concerns, and share good practice. Feedback also highlighted that the management team make themselves readily available for debriefs and informal conversations when needed, particularly if issues arise at short notice. This approach supports an open, supportive culture and ensures staff feel well-guided and listened to.

The service provides several live-in care packages, each supported by strong and consistent oversight for both care receivers and staff. A dedicated live-in care package manager makes regular visits to each package to ensure that everyone is satisfied and that no concerns have arisen. Staff reported feeling extremely well supported by the designated manager, noting that they always receive their daily breaks on time. They also highlighted that if there are any disruptions to their overnight breaks, the package is promptly reviewed, and additional support is put in place. This responsive approach helps maintain staff wellbeing and ensures high-quality, person-centred care.

The Regulation Officer reviewed copies of the written agreements provided to care receivers when their package of care is initiated. The agreements clearly set out what individuals can expect from the service, including the terms and conditions, payment arrangements, and the processes for making changes to or ending the agreement. Overall, the documentation was clear, transparent, and reflective of good practice.

Is the service well led?

The leadership, management and governance of the organisation assures delivery of high-quality care, supports learning and innovation, and promotes an open and fair culture.

The management team have kept business as usual throughout the recent takeover, maintaining their trademark efficiency, organisation and supportive approach. Despite the significant changes taking place behind the scenes, they worked hard to ensure that day-to-day operations continued smoothly, providing as little disruption as possible to both care receivers and staff.

Care receivers and their family members were kept fully informed about the change of provider and, where applicable, the change in care provider for those that had moved from the new provider's previous home care service. The Registered Manager and Deputy Manager carried out one-to-one visits with care receivers who might have found it more difficult to understand the changes from a written letter alone. These visits ensured that communication was clear, and questions could be answered directly.

With two services coming together, the management team have been careful not to make immediate or complete operational changes. One example of this is the introduction of electronic records. Historically, the service has used paper records, while the merged service has been operating electronically. To avoid overwhelming the current team, electronic records will be introduced gradually. For now, all staff are using paper records to maintain cohesive working practices across the service.

It is anticipated that when everyone has settled into the new structure, the transition to electronic records will be implemented in a planned and supportive way.

A 24-hour on-call system is in place to support both staff and care receivers when situations arise outside of usual working hours. This ensures that guidance, reassurance, and timely decision-making are always available, helping to maintain continuity of care and respond promptly to any concerns or unexpected events.

New care packages are carefully assessed by the management team to ensure the service can meet each individual's needs safely and effectively. Staffing levels, along with the skills and experience of available staff, are considered when matching carers with new care receivers. A staff rota policy and procedure are in place to support this process, helping to ensure that sufficient numbers of suitably qualified and competent staff are available at all times.

There is a comprehensive incident management and complaints process in place, providing clear guidance on reporting, recording, and responding to concerns. Staff are encouraged to report all incidents, regardless of their perceived significance, to ensure transparency and support continuous learning and improvement. This proactive approach helps the service identify emerging patterns, manage risks effectively, and maintain high standards of safety and quality.

The service has a comprehensive suite of policies that are regularly reviewed and updated. Following the transition to a new provider, who already operated an established home care service, the governance arrangements are currently being integrated. This integration process includes aligning policies, care records, and employment contracts.

What care receivers and their relatives said:

The carers help me with what I can no longer do. They are excellent, everyone who comes are excellent.

I couldn't say enough about my carer Xxx goes above and beyond and is always very professional.

So far, they are absolutely superb.

The service is proactive, very accommodating, and I cannot recommend highly enough.

The consistency of carer is great, this has allowed my Xxx to get to know the carer and become comfortable with Xxx.

I am very happy with the carers that I have, they support me with whatever I ask, I couldn't ask for any better care.

The care is very thoughtful.

Staff feedback:

The live in care manager is brilliant, extremely supportive. Xxx calls to see all the live in packages every week. Xxx ensures if we have any issues they are sorted out.

I was very well supported by the managers and my colleagues when I initially started.

Xxx is always there for me both professionally and personally. I have never felt genuine care and support from any other company I have worked for.

There is a strong and growing focus on continuous learning and development.

A professional's view:

CI home care management and staff went above and beyond, with staff working in some challenging situations, helping to ensure the safety of our client.

In terms of communication and responsiveness, I would say that they are excellent communicators. The agency have been easy to get hold of.

IMPROVEMENT PLAN

There were no areas for improvement identified during this inspection and an improvement plan is not required.

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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