



**Jersey Care
Commission**

FOCUSED INSPECTION REPORT

The Care Collective Limited

Home Care Service

**Suite 30, 4 Wharf Street
St Helier
JE2 3NR**

6 July 2026

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27 August 2026**

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 (as amended) to monitor compliance with the Law and Regulations, to review and evaluate the effectiveness of the regulated activity, and to encourage improvement.

1. ABOUT THE SERVICE

This is a report of a focused inspection of The Care Collective Limited. The home care service is operated by The Care Collective Limited and there is an interim manager in place.

Registration Details	Detail
Regulated Activity	Home care
Mandatory Conditions of Registration	
Categories of care	Adult 60+, dementia care, physical disability/sensory impairment, end of life care, learning disability, autism, mental health.
Maximum number of care hours per week	600 hours per week
Age range of care receivers	18 years and above
Discretionary Conditions of Registration	
None	
Additional Information	
Interim manager in place	

3. ABOUT THE INSPECTION

3.1 Inspection Details

This inspection was carried out without prior notice. It was undertaken in response to information that had been brought to the Commission's attention regarding alleged unsafe practices.

Two regulation officers were present for the inspection visit.

Inspection information	Detail
Date and time of this inspection	6 July 2026 10:00 – 10:35
Date of previous inspection	9, 10 April and 7 May 2026
Areas for improvement noted in 2026	Five
Link to previous inspection report	RPT_CC_Inspection_20260507.pdf

3.2 Focus for this inspection

This inspection was a focused inspection in response to information brought to the Commission's attention, which suggested there may have been breaches to Regulations and Standards. Therefore, in line with its responsibilities under the Regulation of Care (Jersey) Law 2014, the Commission proceeded to carry out this inspection.

4. SUMMARY OF INSPECTION FINDINGS

4.1 Areas of Improvement identified at the last inspection

At the last inspection undertaken on 9, 10 April and 7 May 2026, five areas for improvement were identified, and an improvement plan was submitted to the Commission by the Registered Provider, setting out how these areas would be addressed within the timescales set out within the report. The areas for improvement were:

- The Registered Provider must ensure all documentation relating to care plans, risk assessments and assessment tools are reviewed and updated on a regular basis and updated in care receivers home folders.
- The Registered Provider will ensure that all care staff complete and remain up to date with mandatory training and additional training to meet the mandatory conditions of registration.
- The Registered Provider must report monthly on the quality of care provided and compliance with registration requirements.
- The Registered Provider must ensure regular audits and spot checks are completed to review the quality of the service and identify risks early.
- Registered persons will ensure that all care staff are given regular opportunities to discuss their role through formal supervision.

To ensure there is clear evidence that the required improvements have been made, the following actions were identified:

- The Provider must submit written confirmation to the Commission when all the areas of improvement have been achieved. This would be required by 30 July 2026.
- The Regulation Officer would then complete a focused follow up inspection later in the year to ensure compliance.

4.2 Observations and overall findings from this inspection

The Commission received intelligence on 5 June 2026 relating to allegations of poor management oversight and the level of skills, qualifications, and training of staff delivering care. Further correspondence was received by email on 8 June 2026.

The evidence viewed and collected during the inspection visit identified that there was insufficient management oversight of the service by the Interim Manager and that some staff were undertaking care duties without holding the required training and qualifications.

The Regulation Officers identified two breaches of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 (“the Regulations”) which are discussed in detail within the inspection findings of this report.

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

As part of the inspection process, records including duty rotas for the months of April and May 2026 and carer communication notes pertaining to two care receivers were viewed and copied. The inspection visit was facilitated by the office administrator.

As the Interim Manager and Registered Provider were not present, an email was sent on 6 July 2026 to the Registered Provider to advise of the purpose of the visit.

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

A further email was sent to the Registered Provider on 13 July advising that a focused report would be written highlighting some areas of concern, which would be followed by an invitation to attend the Commission to discuss the findings and discuss any necessary steps.

5.2 Sources of evidence.

Focus	Evidence Reviewed
Carrying out personal care and personal support as a non-carer	Copies of duty rotas for April and May 2026 Carer communication notes specific to two care receivers for April and May 2026.
Direct care hours	Copies of duty rotas for April and May 2026

6. INSPECTION FINDINGS

The Commission received intelligence that an individual employed in a non-care role was undertaking care duties without the required qualifications or having received appropriate training, as defined by the Home Care and Support in the Community Standards. Evidence obtained during the inspection substantiated this concern and confirmed that the staff member had provided personal care and/or personal support to five care recipients over a two-month period.

The evidence demonstrated that the individual routinely undertook duties falling within the definitions of personal care and personal support, despite there being no evidence that they had received the requisite training or had been assessed as competent to perform these tasks. This represents a failure by the provider to ensure that staff were suitably trained, competent and supported to carry out the duties assigned to them. It also shows that staff are undertaking duties that fall outside of their job descriptions.

As a result, the provider exposed care recipients to a foreseeable risk of unsafe or inappropriate care and failed to maintain effective workforce governance arrangements to ensure that care was delivered by appropriately qualified and competent personnel. The Provider has failed to meet regulatory obligations in relation to the employment, qualifications, training and oversight of staff. This constituted non-compliance with Standards 5.7, 5.8, 6.3, 6.4 and 6.7, Regulation 17 of the Regulations.

The Regulation Officer also reviewed the duty rotas for the Interim Manager and identified that, in addition to working an excessive number of consecutive days during April and May, the Interim Manager completed almost 338 hours of direct care work. On several days, the interim manager completed 15 hours of care. This would have left limited time available to undertake managerial responsibilities, a matter that had previously been discussed during the annual inspection, almost three months earlier.

“Leadership within the service requires strengthening, with the Registered Provider needing a more consistent presence and the Interim Manager requiring greater clinical oversight.”

It is concerning to note that Interim Manager was regularly rostered in the direct delivery of care, reducing the time available to fulfil their management responsibilities and maintain effective oversight of the service, despite the identification of five areas for improvement at the most recent inspection.

This constituted non-compliance with Standard 1.2 and Regulation 5 of the Regulations.

Since its registration with the Jersey Care Commission, the home care service has experienced periods of improvement alongside recurring operational challenges. A significant factor affecting the consistency of the service has been changes in management arrangements, which have impacted continuity of leadership, strategic direction, and operational oversight. While improvements have been identified at various points, these have not always been consistently sustained over time. Inspection evidence indicates that fluctuations in management and governance arrangements have, at times, affected staff confidence and the service's ability to

embed and maintain improvements. As a result, the service's performance since registration has varied, with progress not always maintained during periods of organisational change.

IMPROVEMENT PLAN

There were two areas for improvement identified during this inspection in addition to the five from the annual inspection on 9, 10 April and 7 May 2026. The table below is the Registered Provider's response to the inspection findings.

Area for Improvement 1 Ref: Standard 1.2 Regulation 5 To be completed: by 18 August 2026	The Registered Provider must ensure the Interim Manager provides a consistent focus upon the management and leadership duties required to ensure effective oversight of the service by ensuring that a minimum of 5 hours per working day is committed to management duties. These hours should run concurrently in order that the Interim Manager may fully focus on their role as a leader. The hours must also be documented in order that a clear record of the tasks completed and time spent by the Interim Manager may be evidenced. Response by Registered Provider: The Registered Provider has made an offer of employment to a permanent Registered Manager who shall take over from the Interim Manager. The intended Registered Manager's contract of employment is due to start on 2 September 2026. Their job description is to provide management duties.
Area for Improvement 2 Ref: Standards 5.7, 5.8, 6.3, 6.4 and 6.7	The Registered Provider and Registered Manager must ensure that all care duties are delivered by staff that have the appropriate induction, skills, training and experience to undertake their role. Care staff must not work outside their scope of professional competence or job description.

Regulation 17 To be completed: by 18 August 2026	Response by Registered Provider: The Registered Provider considers that the Commission's findings are not justified by the sources of evidence and are refuted in full by the evidence provided by it. The Care Collective invites the Commisison to remove Area for Improvement 2 from this report in its entirety.
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The Commission considers these findings to be a breach of the regulations and standards and is concerned by the risks posed to care recipients. Given the nature and extent of the non-compliance identified, further action under the Commission's Escalation and Enforcement policy is being considered.

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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