

INSPECTION REPORT

Atlantic Security Community Services Ltd

Home Care Service

Roslyn Farm Rue de Douet St Ouen JE3 2HN

18 August 2020

THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014, all providers of care homes, home care and adult day care services must be registered with the Jersey Care Commission ('the Commission').

This inspection was carried out in accordance with Regulation 32 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.

ABOUT THE SERVICE

This is a report of the inspection of Atlantic Security Community Services Ltd ("Atlantic"). Atlantic was registered under the Regulation of Care (Jersey) Law 2014 on 19 November 2019. Atlantic is registered to provide nursing and personal care/personal support to people living in their own homes. Atlantic, as described in its Statement of Purpose, provides a service to individuals living in their own homes in the event of requiring a response to an emergency. The Statement of Purpose also describes the provision of bespoke packages of personal care in addition to the use of technology to enable care receivers to remain independent at home.

At the time of inspection, Atlantic was no longer providing the full range of services as described in the Statement of Purpose which includes the provision of nursing, personal care or personal support. The service provided to most care receivers, except for one, consists of a 'responder service' which is one whereby care receivers activate an alarm which will be responded to. This was described, during the inspection as a less intensive type of home care service and would be provided infrequently to care receivers, dependent upon their requests for assistance.

Registered Provider	Atlantic Security Community Services Limited
Registered Manager	Anna Minihane
Regulated Activity	Home Care Service
Conditions of Registration	Maximum number of personal care/ personal support hours to be provided per week is 600 Maximum number of nursing care hours per week is 38 Age range of care receivers is 18 years and above Category of care provided is Old age Dementia care Physical Disability Seizures – 24-hour monitoring

	The registered manager must complete a Level 5 Diploma in Leadership in Health and Social Care by 19 November 2022.
Date of Inspection	18 August 2020
Times of Inspection	10am - 12 midday & 1pm - 3.30pm
Type of Inspection	Announced
Number of areas for	Four
improvement	

The home care service is operated by Atlantic and the registered manager is Ms Anna Minihane. Mr Robert Jackson and Ms Anna Minihane are the directors and shareholders of Atlantic. At the time of this inspection, Mr Jackson was the only person who was operationally involved in the service. There were 116 people receiving a service from Atlantic. One hundred and fifteen people are in receipt of the responder service only and one care receiver's service consists of daily social and personal care support.

SUMMARY OF INSPECTION FINDINGS

This was the first inspection carried out since Atlantic was registered to provide home care services and was announced. Whilst it was the first inspection, the Commission had issued an Improvement Notice on 2 July 2020 based upon information that had been provided by Ms Minihane as the registered manager and a director of Atlantic, and Mr Jackson as a director of Atlantic. The inspection focused upon the eight action points highlighted in the Improvement Notice.

The findings from this inspection show insufficient evidence of compliance with the matters outlined in the Improvement Notice, which is mainly attributed to the breakdown in relationship between the directors of Atlantic, and the impact of that on Ms Minihane's role as registered manager. The Commission is not assured, based on the evidence provided, the service is operating in line with its Statement of Purpose and meeting Regulations and Standards. The directors and registered manager's failure to put in place a suitable management arrangement has the potential to place care receivers at risk. This is an area for improvement that requires immediate action and will be kept under close review.

Improvements must also be made so additional qualified staff can support Mr Jackson to ensure care receivers' needs can always be met. The retention and storage of care receivers' care records also needs to be improved upon in order to comply with the Standards and Regulations.

INSPECTION PROCESS

An inspection of Atlantic was planned to take place in March 2020. However, due to the Covid-19 pandemic this was postponed. In the interim, the Commission

requested on 14 April 2020 that Atlantic provide written information about the operation and management of the service. In response, Ms Minihane as a director and the registered manager, and Mr Jackson as director, indicated that they were experiencing enduring difficulties in managing almost all operational aspects of the business due to the breakdown in their working and professional relationship.

Further communication was initiated by the Commission on 28 April 2020 to both directors to seek an assurance that the service was meeting Standards relating to safeguarding; safe recruitment and staffing; care planning and management of complaints. Ms Minihane and Mr Jackson provided separate responses to demonstrate how these areas were being managed by Atlantic.

These responses did not provide the necessary assurances regarding the safe operation of the home care service and further communications to Ms Minihane and Mr Jackson were forwarded by the Commission on 29 May 2020. This set out the Commission's serious concerns about the safe operation of the service.

Subsequent information submitted by Ms Minihane and Mr Jackson did not provide the Commission with an assurance that the service was being managed in accordance with Regulations and Standards. As a result, the Improvement Notice was issued on 2 July 2020.

The Improvement Notice was served in accordance with Regulation 34 of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018. The Improvement Notice set out the Commission's concerns that Regulation 5(1) of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 had been contravened.

Regulation 5(1) requires that, 'The registered persons must ensure that the regulated activity is conducted so as to make proper provision for care receivers in respect of their health, safety and welfare and that the particular needs of each care receiver are identified and met'.

The Commission was, at the time of issuing the Improvement Notice, not assured that proper provision was being made for care receivers and that there were risks to their safety and wellbeing. The Commission outlined eight areas of concern and the actions to be taken by the registered persons to provide assurances of compliance with the Regulations. Ms Minihane and Mr Jackson were advised that an inspection of the home care service would be undertaken to confirm compliance with the Regulations.

The timescale for compliance with the Improvement Notice was 24 July 2020. The Commission received a range of written submissions from each director on or before this date. These submissions were reviewed and taken into account when preparing for this inspection.

In addition, a significant body of information has been submitted to the Commission in the months prior to the inspection from each director. This has highlighted the challenges and difficulties each director has experienced carrying on the home care service.

Due to the ongoing Covid-19 situation, this inspection was undertaken at the Commission's offices in St Helier. Ms Minihane and Mr Jackson were offered and accepted the opportunity to meet with Commission staff separately and the inspection took place over a morning and an afternoon session.

Each section of the inspection was identically formatted in that Commission staff commenced each discussion by explaining the purpose, process and content of the Inspection. The discussion was structured by discussing each of the eight requirements in turn with the findings as below,

INSPECTION FINDINGS

Action point 1

The Commission must be provided with a written plan setting out how each registered person will improve the working relationship in order to promote the safety of care receivers. The plan should make reference to the responsibilities of persons carrying on a regulated activity, as outlined in the Regulation of Care (Jersey) Law, 2014.

Ms Minihane and Mr Jackson confirmed that in recent months there have been and continue to be significant difficulties in their professional, working relationship. Written correspondence has been submitted to the Commission over the course of recent months in which they both highlight the challenges in trying to jointly provide a home care service. Written submissions have evidenced a lack of joined-up or coordinated way of working.

In response to the Improvement Notice, both parties have indicated that the working relationship has deteriorated to a point where it is unlikely to be redeemed. Neither party envisage any prospect of the business relationship improving.

Both directors have confirmed that their business relationship should terminate although at the time of inspection, there was no identified plan of how or when this might be achieved. This inspection identified that several actions as outlined above, have not been complied with. There are insufficient management arrangements in place to ensure that the service is either safe, is appropriate to meet care receivers' needs or is consistently monitored. The Commission is particularly concerned that care receivers could be adversely affected as a result of these matters.

Consequently, the Commission concludes that Atlantic and its registered manager is unable to demonstrate that appropriate action has been taken to address this area of the Improvement Notice. It is therefore not possible to confirm compliance with Regulation 5(1).

The registered persons must ensure that the home care service's management arrangements are reviewed and improved upon without further delay.

Action point 2

The registered persons to confirm to the Commission that they will cease any activity that hinders the performance of the registered manager's duties. The registered manager is required to report to the Commission on a fortnightly basis to confirm whether any such issues persist.

The registered manager confirmed that she has been unable to adequately carry out her role as she cannot remotely access the home care service's information or communication systems. The registered manager also confirmed that she had not visited some care receivers since January 2020, had no knowledge of new care receivers and that currently she has no awareness of how many people are receiving support due to an inability to access records.

Access to the service's information systems and records was discussed with both Ms Minihane and Mr Jackson and it was evident that they differed in their views in this regard. This inspection could not establish that the registered manager could or had accessed the service's information and recording systems. Fortnightly updates in this regard had not been forwarded to the Commission by the registered manager.

The registered manager confirmed that she is not able to fulfil her registered manager role and that she otherwise cannot meet all her professional obligations on account of the breakdown in her professional relationship with Mr Jackson. The registered manager advised Commission staff that she believed that care receivers have not been provided with her contact details. She assessed that this represents a high risk to care receivers. The registered manager confirmed that the service's website does not refer to her name or to her role as registered manager. She also advised the Commission by letter of 19 April 2020 of her concerns about limited clinical oversight of care receivers' health needs due to the difficulties she was experiencing fulfilling her role as registered manager.

The registered manager advised that she could not confirm if any new care receivers had started to receive a service and that she had not been involved in any initial assessments of care receivers' needs. The registered manager identified this initial assessment as part of her managerial responsibility which she cannot fulfil and one that she believes should not be undertaken by Mr Jackson as this would be outside of their agreed scope of responsibility.

Mr Jackson reported he has been on call and available to provide a response service to care receivers for 196 days (as of 24 July 2020) and continues to do so. This he stated, was due to the registered manager's absence and he has continued to offer a response service to care receivers' requests for support. Mr Jackson indicated a commitment to operating the home care service in accordance with the Standards and Regulations; the areas for improvement that would be necessary to achieve this were discussed during the inspection with a particular focus on staffing and management arrangements.

From the evidence provided by Ms Minihane and Mr Jackson, significant improvements are needed to ensure effective management arrangements are in

place. The registered persons have failed to demonstrate how the registered manager's duties can be met consistently. The Commission cannot be assured of effective operational management and administration matters implemented to achieve compliance with the Improvement Notice of 2 July 2020.

Action point 3

The registered persons must provide the Commission with details, including evidence, of any fitness to practise concerns.

The Commission has not been provided with evidence of any fitness to practise concerns. The responsibilities of the registered persons to refer concerns to regulatory bodies was discussed during the inspection. There was no evidence provided during the inspection of any referrals made to professional regulatory bodies.

Action point 4

The registered persons must carry out a full review of invoicing from the date of registration for all care receivers. The registered persons to provide a particularised account of any instance of overcharging that has taken place and advise the Commission as to how the issue will be addressed with the individuals affected.

During a telephone call with the Commission on 12 June 2020, the registered manager expressed concerns that several care receivers had been inappropriately charged for the services provided to them. The Commission advised that as this was a potential safeguarding matter, the registered manager should follow the home care service's safeguarding protocols. Subsequently, an alert was raised by the registered manager with the safeguarding team at the end of June 2020 in respect of concerns that some care receivers may have been incorrectly invoiced and charged for services received. Mr Jackson confirmed in his written submission that he had not been provided with the details of individual care receivers the safeguarding concerns related to.

The registered manager advised Commission staff that due to her lack of access to necessary financial information, she had been unable to comply with this action. The registered manager also said it was her understanding there are inaccuracies with aspects of the accounting records showing invoices being overstated, understated, duplicated or not included in the accounting system.

In order to comply with the action as above, Mr Jackson confirmed he had access to and had reviewed all of the invoices generated, and he had identified that some care receivers had been over and undercharged for the services provided by Atlantic. Where care receivers had been overcharged, an assurance was provided to the Commission that this been rectified, and care receivers reimbursed. The system for generating invoices has been reviewed to minimise the risk of further over or undercharging. Mr Jackson confirmed that due to the breakdown in the relationship

with the registered manager, information has not been shared in a timely manner between both parties which may have contributed to some care receivers being over and undercharged.

The Commission is satisfied with the actions taken in this regard.

Action point 5

Both registered persons to confirm to the Commission that no further unnecessary restrictions will be placed on access to information

Ms Minihane and Mr Jackson offered different views as to whether access to information associated with the service is available to them. The registered manager advised certain documents relating to operational aspects of the service, such as financial records and information about care receivers has not been shared and provided to her. Mr Jackson advised Commission staff that the registered manager has full access to all company information from the registered office. The registered manager confirmed having had to send documents and procedures to Atlantic by registered post.

The availability of care records for inspection at all times was discussed with Ms Minihane and Mr Jackson. Ms Minihane, as registered manager, confirmed that she had retained some care records and had not returned these to the registered premises. This is concerning as it poses a risk to the security of these personal care records. These care records should be returned and retained in the service's registered offices and be available for inspection purposes; this is an area for improvement.

Action point 6

The registered persons must undertake a review of all care receivers' assessed needs to determine whether the correct level of support is being provided to them with any gaps or shortfalls identified to be referred to Health and Community Services. The registered persons must review rostering systems and develop an action plan to address any staff shortages

The registered manager advised Commission staff that she had no awareness of how many care receivers are currently receiving a service from Atlantic, nor how many staff are employed. The registered manager confirmed that she was aware of one individual who is in receipt of personal and social support and made a recent visit to that person's home to review their care records and seek their views of the service provided. The registered manager does not have information pertaining to the number and frequency of call out visits, staff recruitment or training.

Mr Jackson confirmed responding to a limited number of call out visits to care receivers, for example two or three per week and confirmed he is solely providing this service. Mr Jackson also confirmed that he provides support by telephone and is available to address any maintenance issues arising from the responder service devices that have been issued to care receivers. The Commission considers the on-

call arrangements and responsibility of only one person to respond to care receivers as excessive and that this has the potential to pose a significant risk to care receivers. The Statement of Purpose sets out the aim of the service to provide a consistently reliable service. The sustainability of the current arrangements were discussed with the registered person during the inspection. Commission staff outlined a range of concerns including how any unplanned or unforeseen unavailability of the registered person would impact on the safety and wellbeing of care receivers. Arrangements must be put in place to ensure that there are adequate numbers of suitably skilled and experienced staff to meet the needs of care receivers. These arrangements should take account of the Covid-19 situation and should include a contingency plan.

Action point 7

The Statement of Purpose should be reviewed and submitted to the Commission

The Standards for home care outline the registered provider's responsibility to ensure that the Statement of Purpose is kept under regular review and submitted to the Commission when any changes are made. The Standards also outline the registered person's responsibilities to demonstrate the home care service operates in accordance with its Statement of Purpose and only people whose assessed needs can be met are cared for and supported.

The Statement of Purpose provided to the Commission for the purpose of registration described the provision of personal care, nursing care and a 24 hour call out responder service to care receivers. Within the Statement of Purpose, Ms Minihane was identified as the registered manager of the Service.

The Statement of Purpose described the staffing arrangements to include two registered nurses during the day and on call overnight including weekends. It also set out the process for personal bespoke plans being implemented for all clients following an assessment by nurses in the team and the provision of personal care. A revised Statement of Purpose was provided to the Commission by Mr Jackson in response to the Improvement Notice of 2 July 2020.

During the inspection, both Ms Minihane and Mr Jackson described the personal care aspect of the service as no longer being provided and confirmed that there are no nurses employed within the service, except for the registered manager, who is no longer operationally involved.

During the Inspection, the registered manager advised Commission staff that she was unaware of the revisions and changes that had been made to the Statement of Purpose that was provided by Mr Jackson.

The registration status of the service was discussed with both registered persons during the inspection. It was established that the current 'clients' were either consistently in receipt of personal care / personal support (one), or in receipt of a service that included the assessment and review of their needs and access to personal care / support, as required. It was agreed that the service continues to

operate as a home care service and as such, must operate in accordance with the Regulations and Standards and in line with the service's Statement of Purpose.

Mr Jackson advised of his wish for Atlantic to continue operating the home care service and to provide a responder service to care receivers who call for assistance which may be at any time throughout the day or night. On this basis, the service's Statement of Purpose must be revised to ensure that it sets out clearly the range and nature of services being provided going forward. The Statement of Purpose should clearly identify the management arrangements and the numbers of staff available to meet the needs of care receivers.

This is a further area for improvement.

Action point 8

The safe recruitment policy must be reviewed to ensure it meets the requirements identified in the Standards for Home Care. A full review and audit must be carried out to ensure all staff employed since the service was registered have been recruited safely. Any gaps in safe recruitment practices must be rectified. The recruitment process for newly recruited members of staff must evidence a safe approach to recruitment is undertaken

The safe recruitment of staff is an important element of contributing to the overall safety and quality of service provision. The Standards and Regulations set out the provider's responsibility to ensure that there are at all times suitably recruited, trained and experienced staff available to meet the needs of care receivers.

Evidence from both Ms Minihane and Mr Jackson confirms recruitment of staff has not been in accordance with the Standards. Both directors contend it was the other's responsibility to ensure staff were recruited safely. The registered manager, in her written submission to the Improvement Notice confirms having had no access to staff recruitment documents since December 2019. She states she has not been involved in the recruitment of staff therefore is not able to confirm staff have been recruited safely.

The Statement of Purpose states staff are required to have an enhanced Disclosure and Barring Service (DBS) check before starting work. Confirmation was provided of gaps in the recruitment process for 11 staff employed to work within the service. The examples included: one staff member commencing unsupervised night duty in advance of references or criminal records check being provided; other instances of care staff working in advance of references and criminal records check being provided; one member of care staff under 18 years of age being employed and rostered onto night duty and another instance where only one reference was returned.

The failure to safely recruit and supply staff to work in care receivers' own homes without the necessary checks put in place, has the potential to place care receivers at risk. The registered provider and registered manager must ensure any outstanding information required to evidence a safe approach to recruitment is

followed up and obtained without further delay. Commission.	This will be kept under review by the

IMPROVEMENT PLAN

There were four areas for improvement identified during this inspection. The table below is the registered provider's response to the inspection findings.

Area for Improvement 1 Ref: Regulation 20 (3) (4) Standard 1.1	The service's Statement of Purpose must be reviewed and amended to make clear the range of services being provided and submitted to the Commission within 28 days of the revision.
To be completed by: with immediate effect	Response by registered provider: Click or tap here to enter text.
Area for Improvement 2	The registered provider must put in place appropriate management arrangements to ensure that the
Ref: Regulation 5(1)(2)	service is conducted so as to make proper provision for care receivers and managed in a way that is
To be completed by: with	consistent with the Statement of Purpose.
immediate effect	Response by registered provider: Click or tap here to enter text.
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Area for Improvement 3 Ref: Regulation 17(4)	The registered provider must ensure that there are at all times suitably qualified and competent staff to meet the needs of care receivers.
Standard 3.9	
	Response by registered provider: Click or tap here to enter text.
To be completed by: with immediate effect	

Area for Improvement 4

Ref: Regulation 23(1)(2)(3) Standard 2.7

To be completed by: with immediate effect

The registered provider and registered manager must ensure that all service records are maintained in a secure place and available for inspection at all times. Service records relating to care receivers must be kept for at least 5 years from when the care receiver was last provided with care from the registered person.

Response by registered provider:

Click or tap here to enter text.

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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