



**Jersey Care  
Commission**

## **INSPECTION REPORT**

**Sanctuary House Care Home**

**Sanctuary House  
La Rue du Croquet  
St Brelade JE3 8BZ**

**4 November 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 Sanctuary House Care Home. The service is situated in St Aubin, on the High Street.

According to the Statement of Purpose, the mission of the Sanctuary Trust is to provide support and hope to homeless men in crisis.

The service became registered with the Commission on 17 February 2020.

Registered Provider	Sanctuary Trust Ltd
Registered Manager	Brett Cutts
Regulated Activity	Adult Care Home
Conditions of Registration	<u>Mandatory</u> Categories of care: Past or present drug dependence, alcohol dependence, or mental health problems Maximum number of care receivers: 10 Age range: 18 and above Rooms: 1 to 10, for one person  <u>Discretionary</u> Brett Cutts registered as manager of Sanctuary House care home, must complete a Level 5 Diploma in Management and Leadership in Health and Social Care. To be completed by 17 <sup>th</sup> February 2023, or by that time to have demonstrated an equivalent qualification.
Dates of Inspection	4 November 2020
Times of Inspection	9.15am to 1.00pm
Type of Inspection	Announced
Number of areas for improvement	Two

The Care Home is operated by the Sanctuary Trust and the registered manager is Brett Cutts.

At the time of this inspection, there were 10 people accommodated in the home.

## **SUMMARY OF INSPECTION FINDINGS**

An inspection was due to take place in May 2020. However, this had to be postponed due to Covid-19 restrictions.

The Commission maintained contact with the Registered Manager during the period of Covid-19 lockdown (March to May). During a structured telephone discussion with a Regulation Officer on 5 May 2020, the range of areas including those addressed during this inspection was reviewed.

This inspection was announced and was completed on 4 November 2020. The care home Standards were referenced throughout the inspection.<sup>1</sup>

The Regulation Officer focussed on the following areas during the inspection:

- the service's Statement of Purpose and conditions on registration
- safeguarding (adults and children)
- complaints
- safe recruitment and staffing arrangements (including induction, training, supervision, staffing levels)
- care planning
- monthly quality reports.

Overall, the findings from this inspection were positive, and there was evidence of care receivers being provided with a service that is safe, and which takes their wishes and preferences into account. There are two areas for improvement.

The Regulation Officer discussed the aims and the support provided with a member of staff and with a care receiver. The support plans of several more care receivers were discussed with the registered manager and a representative of the provider. It was clear that the stated mission and the description of the support to be provided was well understood by staff and care receivers. This is an area of good practice.

Sanctuary Trust have a "Duty of Care" policy that sets out the principles relating to adult safeguarding and the lines of responsibility/accountability. A discussion with staff members demonstrated that they had a good understanding of safeguarding issues.

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<sup>1</sup> The Care Home Standards and all other Care Standards can be accessed on the Commission's website at <https://carecommission.ie/Standards/>

There have been no formal complaints within the past 12 months. After discussions with staff and a care receiver the Regulation Officer was satisfied that care receivers know how to complain and that there is a system in place for recording complaints and acting on them.

The service's arrangements for recruiting staff were satisfactory. Observations during the inspection and a review of records demonstrated that staffing numbers were adequate, and that staff were appropriately deployed within the service.

The Commission considers that the provider needs to demonstrate that the breadth of knowledge and experience of staff currently employed at Sanctuary House meets the 'equivalent qualifications' Standard or ensure that the staff complete relevant NVQ2 courses. This is an area for improvement.

The recording system used at Sanctuary House includes an initial assessment and a support plan that is regularly reviewed. Recordings are kept daily relating to each care receiver, which provide details of individuals' progress. Whilst relatively simple in its form and content, there is evidence that the system works well in keeping a record of the support which is provided and in tracking progress against goals established at the point of assessment or review. There was evidence of the involvement of care receivers in the care planning process.

A year ago, the Head of Compliance devised a report form based on the Commission's template for monthly quality monitoring. There was a decision for a member of the management committee to carry out monthly monitoring visits. However, at the time of the inspection, there had been no such visits or reports. This is an area for improvement.

## **INSPECTION PROCESS**

Prior to our inspection visit, information submitted by the service to the Commission since the service became registered, was reviewed. This included any notifications and any changes to the service's Statement of Purpose.

The Regulation Officer sought the views of the people who use the service and spoke with managerial and other staff. Three care receivers and three members of staff (including the registered manager) were spoken with during the inspection visit.

During the inspection, records including policies, care records, incidents and complaints were examined. The Regulation Officer undertook a physical inspection of the premises.

At the conclusion of the inspection, the Regulation Officer provided feedback to the registered manager and to a representative of the provider organisation.

This report sets out the findings of the inspection and includes areas of good practice which were identified. Where areas for improvement have been identified, these are described in the report and an action plan attached at the end of the report.

## INSPECTION FINDINGS

### **The service’s Statement of Purpose and conditions on registration**

The Care Home’s Statement of Purpose was reviewed prior to the inspection visit. The Standards outline the 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 Statement of Purpose for Sanctuary House continues to reflect the range and nature of services provided to care receivers. The Regulation Officer was satisfied that the provider / manager fully understand their responsibilities in this regard.

The Care Home is, as part of the registration process, subject to the following mandatory and discretionary conditions:

Conditions of Registration	<p><u>Mandatory</u></p> <p>Categories of care: Past or present drug dependence, alcohol dependence, or mental health problems  Maximum number of care receivers: 10  Age range: 18 and above  Rooms: 1 to 10, for one person</p> <p><u>Discretionary</u></p> <p>Brett Cutts registered as manager of Sanctuary House care home service must complete a Level 5 Diploma in Management and Leadership in Health and Social Care. To be completed by 17<sup>th</sup> February 2023, or by that time to have demonstrated an equivalent qualification.</p>
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A discussion with the manager and an examination of records provided confirmation that these conditions on registration were being fully complied with and will remain unchanged. The manager advised the Regulation Officer that they have enrolled on a suitable training course and are planning to complete the Level 5 Diploma within twelve months.

The Regulation Officer was satisfied that all conditions are currently being met.

As part of the inspection, the Regulation Officer discussed the aims and objectives of this specialised care home service with the registered manager and with the company secretary (representing the provider). Sanctuary Trust was established in 2011 as a result of a perceived lack of services dealing specifically with men who had reached a crisis point in their lives. The Trust was established in a former Guest House in St Aubin.

A second property was added some time later (Sanctuary Lodge). That property is for men that are more independent and does not have staff providing care and is therefore not a regulated activity.

The manager and provider explained that the small staff team work hard to realise the mission of the Trust to provide support and hope to homeless men in crisis. The organisation defines homelessness as a symptom of wider socio-economic failures and intends to support the care receivers to return to the community and to secure independent accommodation. The aim of the organisation is to provide assistance to in the form of practical support, advice or by actively signposting to other services.

The Trust provides support in respect of a wide range of issues. These include: homelessness; difficulties associated with drugs, alcohol or gambling; economic hardship; domestic abuse; family or relationship breakdown; inappropriate accommodation and mental health.

The Regulation Officer discussed the aims of the organisation and the support which is provided with both a member of staff and with a care receiver. He also read and discussed the support plans of several more care receivers with the registered manager. It was clear that the stated mission and the description of the support to be provided was well understood by staff and care receivers. This is an area of good practice.

### **Safeguarding (adults and children)**

<p>The Standards for Care Homes set out the provider's responsibility to ensure that care receivers feel safe and are protected against harm. This means that service providers should have robust safeguarding policies and procedures in place which are kept under review. Staff working in the service should be familiar with the safeguarding arrangements and should make referrals to other agencies when appropriate.</p>
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Sanctuary Trust have a "Duty of Care" policy that sets out the principles relating to adult safeguarding issues and the lines of responsibility/accountability.

All staff had completed safeguarding training at the time of the inspection and any new staff are required to complete this training as part of their induction. The small size of the staff team makes it difficult to provide this training in-house, but it has been possible to source induction training (First Aid, Food Hygiene, Infection and Control and Safeguarding training) from another organisation. The Safeguarding training is reflective of the Safeguarding Partnership Board's learning outcomes.

A discussion with staff members demonstrated a good understanding of safeguarding issues.

There have been two notifications to the Commission about men who needed admission to hospital after becoming unwell. Staff dealt with both these events effectively and appropriately.

## **Complaints**

The Standards for Care Homes set out the provider's responsibility to ensure that there are arrangements in place for the management of complaints. This means that care receivers should know how to make a complaint and what to expect if they need to make a complaint. The service's staff should be familiar with the complaints management procedures and service providers should closely monitor their implementation.

A complaints procedure is in place at Sanctuary House, and the details are set out within a 'Residents Handbook' that is made available to every care receiver.

The complaints form for more formal complaints is readily available and easy to use.

There have been no formal complaints within the past 12 months. After discussions with staff and a care receiver the Regulation Officer was satisfied that care receivers know how to complain and that there is a system in place for recording complaints and acting on them.

## **Safe recruitment and staffing arrangements (including induction, training, supervision, staffing levels)**

The safe recruitment of staff is an important element in 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 always suitably recruited, trained and experienced staff available to meet the needs of care receivers.

The registered manager does some of the direct work with care receivers and is therefore part of the staff rota. He is supported by a senior support worker/assistant manager and two support workers. The part-time cook is also employed as a support worker for occasional shifts.

Sanctuary House is always staffed. Usually there are two staff in the mornings and one staff member in the afternoon/evening until 10pm. There is a live-in support worker who is employed to sleep-in six nights a weekend be on duty if needed from 10pm until 8am. Other staff members also provide overnight support, when required.

A review of the staff rota and observations at the time of this inspection demonstrated that staffing levels were appropriate to meet the needs of the care receivers. They accord with the Standards and staff are provided with and attend appropriate training opportunities.

However, the Regulation Officer considers that the qualifications of the staff employed as care/support workers is an area for improvement. The Standards require that at least 50% of staff who are on duty at any time should have at least an NVQ 2 qualification relevant to Health and Social Care (or an equivalent qualification).

Whilst the registered manager has enrolled on a Level 5 Diploma course, the four other care/support workers may not have the necessary NVQ2 level qualification or an equivalent qualification.

The Commission considers that the three members of staff employed as care/support workers at Sanctuary House care home, must complete a Level 2 Diploma in Health and Social Care, or the provider must demonstrate an equivalent qualification. The senior care/support worker must complete a Level 3 Diploma in Health and Social Care, or the provider must demonstrate an equivalent qualification.

The newest member of staff was recruited in the past 12 months and this inspection included a review of the recruitment record and the HR file for one other member of staff. The files contained the following documents: application form; two references; Criminal Records disclosure (DBS) and a job offer letter. These records evidenced that processes relating to safe employment had been followed appropriately.

## **Care planning**

The people to receive this service should have a clear plan of the care to be provided to them. This should be based on an assessment of their needs, wishes and preferences. The Standards and Regulations set out the provider's responsibility to ensure that care plans are person centred and kept under review. The staff delivering care should be familiar with the care plans and ensure that any changes in needs are communicated appropriately.

The recording system used at Sanctuary House consists of an initial assessment and a support plan which is regularly reviewed. Recordings are kept daily relating to each care receiver which provide details of the individual's progress. Whilst relatively simple in its form and content, there is evidence that the system works well in keeping a record of the support which is provided and in tracking progress against goals established at the point of assessment or review. There was evidence of the involvement of care receivers in the care planning process.

The manager and provider advised the Regulation Officer that success was defined and measured as care receivers meeting the goals and targets which they had been supported to set for themselves. This measure of success: care receivers moving back to families or moving in to supported housing; getting a job; recovering from an addiction etc, is the subject of quarterly reports to the management committee.



Whilst this is working well, both the manager and provider explained that they were committed to improving the reporting of achievements, and to describing success more in terms of individual outcomes.

The manager advised that he had started discussions with the company that has designed and markets the 'Outcomes Star' tool. Outcomes Star is a methodology of measuring and supporting change when providing support to people. It is a means of frontline services being able to demonstrate impact whilst improving the quality of interventions. The organisation hopes to purchase an electronic database/recording system that can record the use of Outcome Star and report on individual outcomes.

### **Monthly quality reports**

<p>The quality of care provision should be kept under regular review. The Standards and Regulations set out the provider's responsibility to appoint a representative to report monthly on the quality of care provided and compliance with registration requirements, Standards and Regulations. The manager should be familiar with the findings of quality monitoring activity and any actions required to improve the quality of service provision.</p>
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The Commission expects the provider to appoint someone to make monthly visits and write a report for the manager and for the management committee. These reports should evidence the quality of care provided, together with compliance with the Regulations and Standards.

The inspection evidenced what happens now. The Head of Compliance for the Sanctuary Trust compiles a quarterly report for the management committee, and this does include some information on numbers and outcomes.

A year ago, the Head of Compliance devised a report form which was based on the Commission's template for monthly quality monitoring. There was a decision for a member of the management committee to carry out monthly monitoring visits. However, at the time of the inspection there had been no such visits and no report

This is an area for improvement

## 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>Regulation 17 Workers</b></p> <p>Standard 6</p> <p>Within three months of the date of the inspection (by 4 February 2021) the provider must show the Commission a plan of when and how this Standard will be met</p>	<p>The members of staff employed as care/support workers at Sanctuary House care home, must complete a Level 2 Diploma in Health and Social Care the provider must demonstrate an equivalent qualification.</p> <p>The senior care/support worker must complete a Level 3 Diploma in Health, or the provider must demonstrate an equivalent qualification.</p> <p><b>Response by registered provider:</b> The current acting Manager will be enrolled on a level 3 course, as per Care Commission guidelines. Other staff have a range of qualifications and have done mandatory training in areas such as Safeguarding; First Aid; Food Hygiene; Mental Health. It is proposed that we source appropriate NVQ level 2 training as a bare minimum with key staff doing level 3 in Health and Social Care, or another relevant qualification. The Commission will be advised as to progress in this area. The Trust would like an open discussion with the Care Commission about relevance of qualifications in relation to the work undertaken at Sanctuary House and the client group that we work with, as it is not a conventional care setting; staff do not undertake personal or intimate care; do not administer medication; have no involvement with continence care, feeding or other tasks that might be considered as routine within conventional care settings.</p>
<p><b>Area for Improvement 2</b></p> <p><b>Regulation 19 Reviewing quality of service</b></p> <p>Standard 12</p> <p>To start in January 2021.</p>	<p>The registered provider must ensure that a monthly report is compiled outlining an assessment of the quality of care provided and compliance with registration requirements, Standards and Regulations. The manager should be familiar with the findings of quality monitoring activity and any actions required to improve the quality of service provision.</p>

**Response by registered provider:**

Monthly visits by an independent verifier are now taking place. They include inspection of the house; meeting and talking with residents and briefing discussions with staff who may be present at the time of the visit. The visits are between an hour and an hour and half and the independent visitor has his own template to record these visits, approved by Geoff Gurney, the former Care Comm lead for Sanctuary House. The independent visitor is the Reverend Mark Bond, Rector of St. Brelade, although a Trustee of Sanctuary Trust his role as the independent visitor was agreed.

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.



Jersey Care Commission  
2<sup>nd</sup> Floor  
23 Hill Street, St Helier  
Jersey JE2 4UA

Tel: 01534 445801

Website: [www.carecommission.je/](http://www.carecommission.je/)

Enquiries: [enquiries@carecommission.je](mailto:enquiries@carecommission.je)