



Jersey Care  
Commission

# **INSPECTION REPORT**

**STRATHMORE**

**Care Home Service**

**Strathmore  
80 Marks Road  
St Saviour JE2 7LD**

**7 December 2021**

## **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**

Strathmore provides supported accommodation to young people (16 to 18) and young adults (19 to 25), who are experiencing homelessness. Based in a four-storey house, the service is registered to provide personal care and support 16 care receivers. It has 16 bedrooms, a lounge, kitchen and dining room, and a laundry. There is a large administrative office room and the manager's room is a small next-door office. Adjacent to these rooms is a rest room for staff on duty.

Five bedrooms are registered for double occupancy however the sharing of bedrooms will only occur for care receivers who are in a relationship and wish to share a room. At the time of the inspection, due to the increased risks from the pandemic, there were no shared rooms in use.

There is CCTV coverage of the entrance into the home and the communal areas.

While the home was first registered with the Commission on 5 May 2020, it was subject to regulatory inspections under the previous law.

Registered Provider	The Shelter Trust
Registered Manager	Werner Vermeulen
Regulated Activity	Care Home (supported accommodation) for young people and young adults
Mandatory conditions of Registration	Maximum number of people who may receive personal care and personal support: 16  Age range: 16 to 25  Category of Care: Homelessness;  Rooms 1, 2, 3, 6, 7, 10, 11, 12, 13, 17, 18 one person only  Rooms 8, 9, 14, 15, 16 possible for couples
Date of Inspection	7 December 2021
Time of Inspection	9.45 am to 1.00 pm
Type of Inspection	Announced
Number of areas for improvement	None

The home is operated by The Shelter Trust and the Registered Manager is Werner Vermeulen. At the time of this inspection, there were two young people and ten young adults accommodated in the home.

## **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.

Overall, the findings from this inspection were positive. Care receivers are supported by an experienced and stable staff team who are passionate about the work that they do. It is recognised that there have been challenges in the community in relation to Covid 19.

There were no areas for improvement from the last inspection on 9 September 2020.

There were no safeguarding alerts made in the last 12 months and there have been no notifications of incidents reported to the Commission since the last inspection. Incidents that require notification to the Commission were confirmed with the Registered Manager. This will be monitored by the Commission.

The home has a Statement of Purpose which sets out its aims and objectives. The Regulation Officer was satisfied that the conditions of registration continue to apply and remain appropriate. The service has well established policies and procedures in place and governance from within the Shelter Trust is positive. The Trust has a comprehensive quality assurance process in place which includes registered managers from other homes undertaking visits to Strathmore to ensure compliance with Regulations and Standards.

The Regulation Officer met with care receivers and members of staff as part of the inspection and comments about the service were positive. Care receivers expressed that they feel supported by the staff team, are involved in their individual care planning and feel positive about their future. The Provider ensures a robust approach to recruitment in accordance with the Standards and members of staff confirmed a positive recruitment process with ongoing training and development encouraged and supported by the Registered Manager and Provider. Staff records seen by the Regulation Officer were complete and detailed and included references and a DBS (Disclosure and Barring Service) certificates. Training records were also seen and were up to date in relation mandatory training.

The home environment is clean, well presented and homely. Care receivers have their own rooms and there is a large communal dining and living area. Challenges were noted in the use of this space during the pandemic. Bedrooms are also well furnished with refurbishment and decoration occurring as care receivers move on. There were no areas for improvement from this inspection.

## INSPECTION PROCESS

The inspection was announced with the Registered Manager informed by telephone on 6 December 2021. This was to ensure that the Registered Manager would be available during the inspection and to confirm the service's infection prevention and control arrangements.

Due to the age range of the current care receivers the Care Home Standards for Children's and Young Peoples Residential Care and Care Home standards were referenced throughout the inspection.<sup>1</sup>

This inspection focussed on the following lines of enquiry:

- **Staff recruitment, training and development**
- **Care home environment**
- **Management of services**
- **Care Planning**

This report sets out the findings of the inspection and includes areas of good practice which were identified.

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

The Regulation Officer sought the views of two care receivers who use the service and spoke with managerial and other staff.

At the conclusion of the inspection visit, the Regulation Officer provided feedback to the Registered Manager.

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

## INSPECTION FINDINGS

At the previous inspection there were no areas for improvement.

### **Staff recruitment, training and development**

Reference was made to Standard 7 of the Care Home Standards which states: “You will be cared for and helped by the right people with the right values, attitudes, understanding and training.”

The staff team is well established, experienced and stable at present. The Registered Manager and Deputy Manager have been with the service for many years. The Registered Manager confirmed that he had completed his RQF (Regulated Qualification Framework) Level 5 Diploma in Leadership and Management in Health and Social Care.

The Deputy Manager has recently submitted his portfolio of evidence for his RQF Level 3 having completed the modules and evidence requirements.

The permanent staff team includes four staff members covering days and four covering nights with bank cover from the Shelter’s other services. This is in addition to the Manager and Deputy. The home also benefits from a housekeeper and chef. There are always two members of staff on duty. This is reflected in the Statement of Purpose which sets out staffing arrangements for the home. The service currently has two vacancies for staff, one on nights and one on days. The Registered Manager does not foresee any recruitment issues for these posts although recognises the wider challenges for recruitment in the sector at present.

Of the eight full time equivalent (FTE) members of staff at the home, two have completed their Level 3 RQF, three are working through the modules at present with three to start in the near future.

A Regulation Officer met with the Shelter Trust’s Human Resources Officer and viewed a number of HR records which were found to be in order in relation to the

services safe recruitment policy. All had references and DBS certificates in place. The Registered Manager confirmed he has sight of all documents prior to new staff members joining the team. The Registered Manager described an intensive induction period and training records are held in the home. A member of staff confirmed that the induction and training courses were helpful in terms of preparing for their role. Mandatory training is undertaken in First Aid, moving and handling, safeguarding, infection control and food hygiene. A number of staff members have also completed or are completing further specialist training to support their client group. This includes counselling courses with an addiction specialism. It was evident from discussions with members of the staff team that staff were passionate about their roles in supporting care receivers in a way which is person-centred. They were able to describe the challenges faced in Jersey by this client group, particularly in respect of access to housing.

### **Care home environment**

Reference was made to Standard 6 which states 'where you live or stay will be comfortable, safe and accessible.
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As part of the inspection process, the Regulation Officer undertook a tour of the building. The property has been extended and developed over the years to provide sixteen bedrooms over four floors. To the rear of the property is a courtyard car park.

The home is accessed through a front door with lobby area. This area is covered by security cameras. Once inside access is available to a large living and dining area. The communal area also has a security camera. Care receivers are made aware of the use of CCTV as part of their induction into the home. The Registered Manager advised that this area is well used by care receivers although there were challenges during the Covid 19 lockdown periods to ensure social distancing. The rooms are well decorated, appropriately furnished and have a 'homely' feel. The home's kitchen is to the rear of this area.

The upper floors to the home contain the bedrooms. Each floor has three bedrooms; one has an ensuite bathroom with the other two bedrooms sharing a bathroom. On

the second floor is an office suite. The second-floor bedrooms are used for female care receivers who are under 18. At the time of the inspection visit, the home was supporting two care receivers in this category.

The upper floor includes bedrooms in the loft space. It was noted that one of the unused bedrooms on this level has a broken window. The Registered Manager shared the challenges in getting this repaired as Andium Homes have responsibility for the external repairs to the property. The room cannot be let until repairs are completed.

The Regulation Officer was shown a vacant room. It was explained that rooms are decorated and repaired when necessary between care receivers moving on and new care receivers moving in. The rooms are well furnished, bright, warm and homely. Each new care receiver receives a welcome pack which includes bedding and towels, toiletries and other basic necessities. The rooms include a safe for care receivers' storage of personal effects.

To the rear of the property are two further bedrooms. One is currently used as a staff sleepover room while the other is used as a one-to-one meeting room for work with care receivers.

The basement has been decorated and laid out as a storage area holding residents' possessions and as an area containing fridges and freezers.

The home benefits from a separate three-bedroom single storey dwelling which is located to the side of the property. This provides an opportunity for independence for care receivers with the support from staff in the main house. The bedrooms are en-suite and there is a shared kitchen. There were three care receivers residing in this property at the time of the inspection.

Regular checks of the property are undertaken including the fire alarms. Both a daytime and a night-time evacuation are undertaken annually.



## Management of services

Reference was made to Standard 11 of the Care Home Standards which states:  
“The care service will be well managed.”

Strathmore is a well-established home within the Shelter Trust. There are well established governance and oversight policies and procedures in place to support the staff team. The Registered Manager advised that he is fully supported by the Director of the Trust in areas including staff recruitment and training, the duty manager on call system and the shared use of staff across the service to ensure that all residents are supported at all times.

The Registered Manager confirmed that he has completed the RQF Level 5 in Leadership and Management in Health and Social Care. He is actively looking at further training opportunities and encourages the staff team to seek training and development opportunities. This was reflected in staff members' feedback about the service which was positive.

The home environment is also monitored in relation to routine maintenance. Checks are also completed for emergency lighting as well as food hygiene checks on fridge and freezer temperatures.

A Senior Pharmacist within Health and Social Services undertook a medicines inspection on 2 December 2021. There were no concerns raised from this inspection.

The Registered Manager spoke in detail about the challenges of the last eighteen months in respect of Covid 19. The service continues to operate a mandatory mask policy. Covid 19 impacted on the home during the pandemic however all relevant Government guidelines were followed. Great care was also taken in the use of communal areas with limited numbers of residents able to use these areas at any one time. The practice, policy and procedure in relation to Covid 19 is an area of good practice.

One complaint about the service had been received in the 12-month period prior to the inspection. The service had completed an internal investigation.

The Commission received no notifications in relation to incidents in the last twelve months. The Regulation Officer discussed this with the Registered Manager, confirming incidents that require notification, including covid positive notifications. This is not an area for improvement at this time but will continue to be monitored by the Commission.

As previously described, the current staff team includes a Deputy Manager and ten members of staff: four staff cover the day shifts and four staff cover the night shifts. The Registered Manager advised that the home has introduced a 'three day on, three day off' rota and that feedback from the staff team in respect of this, has been positive. As well as managers on duty, there are always two members of staff in the home. The staff team includes a chef and housekeeper.

The Registered Manager added that the home is currently very stable with a number of care receivers either in work or in full time education. He was clear that this could easily change, and that this is why it is important to take time and care in the assessment of new care receivers, prior to new admissions taking place.

The Shelter Trust is a well-established provider of services. There are comprehensive systems of governance in place and policies and procedures are regularly reviewed. The Trust has a quality assurance process in place which involves registered managers visiting the home to monitor care planning and recording, to inspect conditions inside the home and to ascertain the views of the care receivers. The Registered Manager also completes a detailed quality audit report for the Board of Trustees on a monthly basis.

## Care planning

Reference was made to Standard 13 (Children and Young people's Residential care) which states 'when the time comes, you will be prepared and ready to move on'.

The Registered Manager explained the referral pathway and his involvement in the assessment of any potential care receiver. He considers carefully not only the young person's needs and experiences but also considers the impact on the other care receivers of any new arrival. Once a young person is accepted they sign a Licence Agreement (this document is very similar to a lease agreement). This document sets out expectations for both the as above and the service in relation to the support provided and the responsibilities of care receivers. Referral and initial assessment documents are detailed and include initial risk assessments and care plans. The home uses a recording system called Harmonia. This system is used throughout the Shelter Trust and is therefore accessible to staff working across different care settings within the Shelter Trust.

The Shelter Trust has also invested in a tool called Outcomes Star. It enables key workers supporting care receivers to produce clear and detailed outcome and client-led plans which can be easily measured. The key workers who were spoken with during the inspection visit confirmed that the 'star' is a really useful tool for supporting care receivers. A great deal of time is spent on working with care receivers using this tool and in developing their plans. Staff advised that they are fully trained in the use of Outcomes Star and were positive about both the way it works in practice and its ease of use for the care receivers.

Information from these plans was evidenced in case recordings. It was evident from the records that were seen, that the care receivers are very involved in their care planning. The positive comments from both care receivers and staff in relation to the Outcomes Star demonstrates that this is an area of good practice.

The Regulation Officer discussed the process in place for care receivers who are under 18 to be referred to MASH (Multi Agency Safeguarding Hub) and Children's

Service if they self-refer to the service. Referrals would normally come from a supporting agency.

The Registered Manager spoke positively about their relationship with the Jersey Association for Youth and Friendship (JAYF), which supports a number of young people from four hostels in the Island. The successful transition of a number of residents in recent months to JAYF from Strathmore is seen as very positive by the staff team. Equally, for one young person, a transition from JAYF to Strathmore was seen as having been an appropriate and positive outcome by that care receiver. Other residents have transitioned into independence within the Shelter Trust or Andium. Similarly, the detailed case recordings in respect of these cases demonstrated the provision of positive client-related care.

## **IMPROVEMENT PLAN**

There were no areas for improvement identified during this inspection and an Improvement Plan has not been issued.

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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