



**Jersey Care
Commission**

INSPECTION REPORT

THOMAS HOUSE

**Care Home Service
(Supported Accommodation)**

**21 Kensington Place
St Helier
JE2 3PA**

9 December 2022

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 Thomas House care home which provides supported accommodation to young adults who are care experienced. Based in a three-story terraced house, the service is registered to provide residential care for seven young adults.

Spread over the top two floors this home has six bedrooms and two training flats, all of which have an en-suite bathroom with a shower and toilet. There is also a communal bathroom, with a bath and toilet facilities. On the ground floor there are two reception rooms, a dining room/kitchen, conservatory/gym area, small outside courtyard, and a laundry. There is also a downstairs office and an upstairs sleep-in room for staff.

A programme of refurbishment of the en-suite bathrooms and redecoration of the bedrooms are currently underway; the impact on the residents is well managed.

The service became registered with the Jersey Care Commission ('the Commission') on 4 December 2019.

Registered Provider	Government of Jersey Children's Services Accountable Officer: Robert Sainsbury (Director General Children, Young People, Education and Skills)
Registered Manager	The Registered Manager is Fiona O'Brien

Regulated Activity	Care Home (supported accommodation) for young adults
Mandatory conditions of registration	Type of care: personal care and personal support Category of care: Young adults (18 to 25) Age range: 18 to 21 Maximum number: 7 Rooms: First Floor front: Rooms 1, 2, and 3. First floor rear: Rooms 4 and 5 or self-contained flat Top floor: Rooms 6, and 7 or self-contained flat
Discretionary conditions	The registered manager Fiona O'Brien must obtain a Level 5 Diploma in Leadership in Health and Social Care by 19 February 2024.
Date of Inspection	9 December 2022
Time of Inspection	10am to 2.15pm
Type of Inspection	Announced
Number of areas for improvement	None
Number of care receivers accommodated on the day of the inspection	Restricted to protect the identity of care receivers

The service is operated by Government of Jersey, Children, Young People, Education and Skills department and the registered manager is Fiona O'Brien.

The discretionary condition on the service's registration was discussed. The Registered Manager provided an update on her Level 5 Diploma status and understood the need to complete this by 19 February 2024.

Since the last inspection on 13 December 2021, the Commission received an application from the registered provider to vary a condition on the service's registration. This was to extend the age range from 18 to 22 years old for a defined period of just under three weeks to aid the transition of a resident.

The Commission received an updated copy of the service's Statement of Purpose in August 2022 to reflect a staffing transfer.

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.

No areas for improvement were identified during the previous inspection on 13 December 2021, similarly no areas of improvement were identified during this inspection.

The core staff team of five Residential Child Care Officers are very experienced and have been working with care experienced individuals in a variety of settings throughout their careers. The staff team continue to operate with two vacancies, however the Registered Manager reported they are ably supported by an experienced and passionate bank staff team. Consequently, the service is able to continue to meet the staffing requirements in accordance with the service's Statement of Purpose.

Staff spoken to as part of this inspection spoke positively about the Registered Manager and expressed that they experience a sense of personal reward in their roles in supporting this group of care experienced young adults.

This service receives referrals for young people or young adults requiring a period of supported accommodation directly from social workers or personal advisors. The Registered Manager undertakes an impact risk assessment based on the needs of the young person/adult. If it is not an emergency, young people/adults undertake a transition process over a month where they can familiarise themselves with staff and expectations of living in this home. This is an area of good practice.

The Regulation Officer viewed the individual personal files of the current residents of this home. Given that the residents in this home are adults, the information on these personal files is limited, sometimes at the request of the resident. The Regulation Officer was satisfied with the quality of the information contained in the personal files and where risk was identified, there were appropriate risk assessments in place.

As a Government of Jersey service, it has access to a wide range of policy and procedures. The Regulation Officer was assured that this service was working in accordance with policies and procedures, such as:

- Health and Safety procedures (including first aid and building safety)
- Infection Control (including use of hazardous substances)
- Fire Safety
- Mandatory training
- Supervision and appraisal of staff
- Safe recruitment procedures
- Moving and handing

The Registered Manager had also identified service specific training which had been delivered to staff since the last inspection in December 2021. This is an area of good practice.

The Regulation Officer viewed the staff training matrix and was assured that the mandatory and service specific training had been recorded. This matrix also evidenced that the Criminal Record Checks required for existing staff every three years was taking place.

The Commission received 15 notifications of notifiable events from this service since the last inspection in December 2021. Upon a review of these notifications with the Registered Manager, the Regulation Officer was satisfied that they were appropriate and that the staff team responded to events professionally.

The Regulation Officer was provided with a tour of the premises. The home was in a state of good decoration, was spacious, and the rooms were tidy and well furnished. A programme of refurbishment of the en-suite bathroom has been taking place since the last inspection, with approximately half of this work being completed. The Registered Manager reported that they have successfully managed this as they have not been at full capacity during this period.

Feedback from the residents who access this service was positive. They expressed that they felt supported, and that staff were always available for a chat or advice. The Regulation Officer witnessed warm friendly interactions between staff and residents of this home.

INSPECTION PROCESS

This inspection was unannounced and was completed on 9 December 2022. The Regulation Officer also made several email requests to the Registered Manager for further information to aid the completion of this inspection.

The Care Home Standards were referenced throughout the inspection.¹

This inspection focussed on the following lines of enquiry:

- **Safety**
- **Care and support**
- **Training**

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection report

The Regulation Officer sought the views of the young adults who use the service, their personal advisors, and spoke with managerial and other staff.

The views of two professionals were also obtained as part of the inspection process.

During the inspection, records including policies, care records, incidents and complaints were examined. This inspection included a tour of the premises.

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

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

This report sets out our findings and includes areas of good practice identified during the inspection.

INSPECTION FINDINGS

At the last inspection, no areas for improvement were identified that required any follow up on this visit. No new areas of improvement were identified as part of this inspection.

Safety

The Standards outline the Provider's responsibility to ensure that people will feel safe and are kept safe. Care receivers will have the right to live safely and free from harm.

The Registered Manager reported that there is never lone working in this service and there are always two staff on duty in line with the service's Statement of Purpose. This service has access to a cohort of experienced bank staff, which support the five core staff on the rota. The Registered Manager commented that on a few occasions over the last year, she has had to be the second member of staff.

Importantly, this Registered Manager also monitor's staff overtime hours in other services to ensure that they do not work double shifts or excessive hours. This is an area of good practice.

There has been no new staff appointed to this service since the last inspection in December 2021. However, the Regulation Officer evidenced that existing staff all had up to date criminal record checks in place.

This service experienced a significant health and safety incident recently that was appropriately reported to the Commission. The Regulation Officer was satisfied that immediate measures were undertaken by the staff of this service to protect the health and safety of the residents of this home.

The Registered Manager confirmed that at least once a day, staff undertake an inspection of the property to ensure that there are no hazards present, that fire exits are clear, and that fire safety equipment has not been tampered with.

The fire safety logbook was reviewed by the Regulation Officer and found to be in good order. All relevant checks had been completed within timescales, fire safety equipment had been serviced and there was an in-date fire safety certificate issued by the States of Jersey Fire Service. This is an area of good practice.

Each resident has access to their own fridge freezer. The Regulation Officer noted that temperatures were checked daily to ensure that they were within infection control guidance for cooked food. This service also provides two meals a week to residents, which provides opportunities for carers to engage with care receivers over a meal. All staff have undertaken food hygiene and safety training in respect of the preparation, storage, and cooking of food. This service is also preparing for new allergen labelling law which comes into place at the end of December 2022.

The Commission received a total of 15 notifiable events from this service since the last inspection in December 2021. These notifications were reviewed with the Registered Manager, were found to be appropriate and did not evidence any emerging themes which might warrant further enquiries by the Regulation Officer.

The Registered Manager advised that no complaints had been formalised by residents using this service since the last inspection. The Registered Manager reported that they have an 'open door' policy for residents to air their views, and that this enables issues to be resolved quickly, prior to them becoming formal complaints.

The external monthly report completed on this service do not identify any health and safety concerns for the residents or staff in this service.

Care and support

The Standards outline that people in receipt of care and support should experience compassion, dignity and respect. Care receivers, where appropriate should be involved in all decisions relating to their care and support in a way that respects their rights, individuality and beliefs.

The Registered Manager undertakes an impact risk assessment for all new referrals. This looks at the particular needs of the young person/adult, any risks they may pose to themselves, staff or other residents and considers if they would be a good fit for the home and benefit from accessing the provision. The Registered Manager reported that when they decide not to accept a referral, this has been respected by the Registered Provider.

Where referrals are accepted, some of these may be emergencies, however where a transition can be planned this service has a procedure for this. Young people/adults will initially come for meals and defined periods, before having sleepovers. They will also be able to familiarise themselves with staff and expectations around their behaviour and what support they can expect from staff in their journey to independent living.

A programme of refurbishment has been taking place since the last inspection in December 2021, with the en-suite bedrooms being redecorated and en-suite bathrooms being updated. The standard of the accommodation overall was good, with opportunities for residents to receive visitors in a dedicated reception room.

The Regulation Officer made enquires with the Registered Manager if there was any conflict between residents. The Registered Manager reported that this seldom happens as the size of the home offers residents plenty of space, there are expectations in respect of behaviour and potential opportunities for conflict to arise are minimised as far as possible. For example, each resident has their own locked fridge freezer and food storage cupboard.

This service treats the residents with respect and dignity and has a protocol about entering residents' rooms where they have to give 24 hours' notice, unless there is an immediate risk to that residents, other residents and staff or the contents of the residents' room. As part of the residency agreement, weekly inspections of residents' rooms take place on a Tuesday, to check for any hazards and to ensure that the room remains fit for purpose.

The Regulation Officer reviewed the individual personal files for the residents of this home. The information in these files is limited, as the residents are adults and have a right to privacy. Where risk of an individual resident has been identified, risk assessments were completed and there was evidence of a monthly review. The file contained the following sections:

- General information about the resident and emergency contact information
- Individual support needs profile, risk assessments and pathway plan
- Quarterly review documentation
- Admission checklist, the House code of expectations, fire evacuation plan, residency agreement, relevant consents, and visitor agreement
- Miscellaneous, e.g., medical and health information.

Given the nature of the young adults accessing this supported accommodation, they do not have regular house meetings. However, the service operates a 'fix it' book for residents to provide feedback about what could be improved.

The staff in this service provide support and advice to the residents and advocate for them where necessary. Examples given by staff were:

- Support and advice on income support
- Help to find work
- Support and mentoring on developing basic life skills, e.g., cooking and cleaning
- Support with routine and getting up in the morning or attending appointments
- Support with budgeting and understanding tax.

Residents are expected to undertake their own cooking, cleaning, and washing of clothes. However, staff provide support to residents in the development of these skills. This service provides a roast dinner every Sunday for the residents, to provide them with an opportunity to meet up socially with one another and staff members over a meal.

For residents who are looking for work but find the process of attending Back to Work services challenging, an employment advisor from Back to Work visits this service on a monthly basis to provide individual support as required. This is an area of good practice.

Residents are provided with the opportunity to have visitors in their home, provided that the visitor has completed an agreement containing conditions and expectations of behaviour including the time that they must leave the property. They are able to use a dedicated reception room for this, which is comfortable and spacious. Residents who have progressed to the semi-independent integral flats are able to have visitors in their accommodation.

When residents move on to independent living, they are offered the opportunity of outreach support for two to three months. However, this is only provided if the resident wishes to access this support. Unfortunately, some transitions to independent living are not always successful. Therefore, the service operates an open-door policy in terms of returning to the supported accommodation. This is an area of good practice.

The Regulation Officer gathered feedback from residents about their experience of this service and provided the following comments:

'The home is always very calm, and I love it here.'

'The staff are very supportive and always available for support and advice.'

'When I am having a bad day and kick the cat when I come home, they help me deal with my feelings.'

'I can take how I am feeling out on the staff, but they handle it well and bring me down.'

The Regulation Officer sought feedback from staff about their experience of working in this service, and was provided with the following comments:

'I am very proud of how we support the residents and I love working here.'

'We are always looking to improve, and it is great to see the residents move on successfully and come back and see us from time to time.'

'The Registered Manager is very supportive at Thomas House towards staff and myself and we can speak to them and feel listened to.'

'We focus on providing a welcoming, safe, and friendly environment where our residents feel comfortable in spending time both talking and socialising with the staff team and other residents, and in their own private space of their rooms. I'm confident that the quality of care and support that we provide is working well at this present time.'

Feedback was sought from professionals who have regular contact with this service, comments provided were:

'The staff are absolutely great with the young adults; They are supportive and always responsive when I contact them.'

Training

The Standards outline that at all times there should be competent and skilled staff available. Staff should be provided with a range of relevant training and development opportunities.

Although there have been no new members of staff since the last inspection in December 2021, the Regulation Officer was assured and saw evidence of an induction procedure that incorporated a competency framework to equip new staff with the necessary skills, expertise, and knowledge required to provide care and support to the residents who access this service.

The Regulation Officer viewed the training matrix for this service and was assured that all staff had completed the mandatory training requirements for this service, plus additional service specific training, such as adult mental health first aid, capacity and self-determination, de-escalation training and safeguarding adults. One area that will need attention in early 2023, is face-to-face first aid training with many of the existing staff needing to refresh their training in this area.

The core staff team have all completed Level 3 training specific to providing care in children and young people residential settings, so meet the standards in this respect.

In respect of training, one staff member stated that, *'This year we have received lots of training, particularly around mental health and improving therapeutic skills, all of which have been both interesting and useful. We also have regular mandatory training and update training via Virtual College. The online Capacity & Determination training was also very useful.'*

Supervision is held by the Registered Manager every month with staff in accordance with the supervision policy of the wider organisation. The Regulation Officer viewed the central supervision record and evidenced that all core staff had regular monthly supervision, with some gaps identified for bank staff. The Regulation Officer was satisfied that supervision was being delivered in line with the Care Home Standards minimum requirements.

Supervision sessions also include on-going appraisal and continued professional development opportunities that staff would like to pursue. There are no staff with competency issues in this service, however the Regulation Officer was assured that the Registered Manager understood the wider organisation's policy in this regard.

Feedback from staff spoken to as part of this inspection in relation to training and supervision provided the following comments:

'We are kept up to date by online training and Mandatory training as well when needed. Supervision is every month.'

'My line manager has been a huge support over recent years both within the workplace and supporting me through personal issues. I receive regular monthly supervisions. I do get to discuss and reflect on my practice and professional development.'

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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