



**Jersey Care  
Commission**

# **Summary Report**

**THOMAS HOUSE**

**Care Home Service  
(Supported Accommodation)**

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

**9<sup>th</sup> December 2022**

## **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 handling

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.

## IMPROVEMENT PLAN

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

The full report can be accessed from [here](#).