Jersey Care Commission

INSPECTION REPORT

Strathmore

Care Home Service

80 St Mark's Road
St Helier
JE2 7LD

Inspection Date
28 July 2026

Date Published
9 September 2026

1. THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014 ('the Law'), all services carrying out any regulated activity must be registered with the Jersey Care Commission ('the Commission').

This inspection was carried out in accordance with Regulation 80 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.

2. ABOUT THE SERVICE

This is a report of the inspection of Strathmore. The regulated activity is operated by The Shelter Trust and there is a registered manager in place.

Registration Details	Detail
Type of regulated activity	Care Home
Mandatory Conditions of Registration	
Categories of care	Homelessness and Children
Maximum number of care receivers	16
Age range of care receivers	16-25 years
Maximum number of care receivers that can be accommodated in each room	Rooms 1–3, 6, 7, 10–13, 17 and 18: one person. Rooms 8, 9 and 14–16: two people.
Discretionary Conditions of Registration	
None	
Additional information	
An updated Statement of Purpose was received on 27 July 2026. On the 8 May 2026, two regulation officers met with senior managers and discuss notification processes and governance matters.	

As part of the inspection process, the Regulation Officer evaluated the home's compliance with the mandatory conditions of registration required under the Law.

The primary purpose of Strathmore is to support young people and young adults experiencing homelessness.

3. ABOUT THE INSPECTION

3.1 Inspection Details

This inspection was announced and notice was given to the Registered Manager seven days in advance. This was to ensure that the Registered Manager would be available during the inspection.

The inspection was announced in advance because Strathmore operates as a supported accommodation service for young people experiencing homelessness. Many service users have experienced trauma, family breakdown, emotional distress and other challenging life circumstances. It was therefore considered important that service users were aware that a Regulation Officer would be visiting the home and had the opportunity to prepare themselves for the inspection process. This approach also supported the home's commitment to respecting individuals' privacy, dignity and wellbeing within what is their home environment.

Two regulation officers undertook visits to The Shelter Trust head office on 2 March 2026 to review recruitment arrangements, policies and procedures. References to who gathered the information during the inspection may change between 'the Regulation Officer' and 'regulation officers'.

As Strathmore is a supported accommodation service, the people living at the home are referred to throughout this report as service users. This terminology reflects the service model and is consistent with the language used by the home and within its Statement of Purpose.

Inspection information	Detail
Dates and times of this inspection	28 July 2026, 13:45 – 18:00
Number of areas for improvement from this inspection	None
Number of care receivers accommodated on the day of the inspection	12
Date of previous inspection	1 October 2025
Areas for improvement noted at the last inspection	None
Link to the previous inspection report	RPT_STM_Inspection_20251001.pdf

3.2 Focus for this inspection

This inspection included a focus on the below lines of enquiry:

- **Is the service safe**
- **Is the service effective and responsive**
- **Is the service caring**
- **Is the service well-led**

4. SUMMARY OF INSPECTION FINDINGS

4.1 Progress against areas for improvement identified at the last inspection

At the last inspection, no areas for improvement were identified.

4.2 Observations and overall findings from this inspection

Strathmore is operated by The Shelter Trust and provides supported accommodation for young people aged 16 to 25 who are experiencing homelessness. The home provides personal support and has a strong focus on safety, independence, move-on planning, education, employment, training, practical life skills and access to external support services.

The inspection found that Strathmore is a well-managed supported accommodation service with a stable staff team, clear leadership, strong safeguarding awareness and a service model that is appropriately tailored to the needs of vulnerable young people. The evidence reviewed demonstrated that the home understands the risks linked to homelessness, mental health, self-harm, substance misuse, exploitation, emotional distress and professional boundaries. These risks were reflected in policies, staff training, incident reporting arrangements and day-to-day practice.

Notifications submitted to the Commission were reviewed. The evidence demonstrated that risks had been recognised, emergency services and specialist services had been contacted where required, safeguarding processes had been followed, and management oversight was evident.

Engagement with young people during the inspection was limited. The Regulation Officer attempted to gather direct feedback through face-to-face and by leaving QR code surveys, recognising that this option may be more accessible for this age group. Despite these efforts, no completed service user feedback responses were received. However, observations were undertaken during the inspection, including during the evening meal period, and interactions between staff and young people appeared relaxed, informal and familiar.

Feedback from staff and external professionals was positive. Staff described the home as safe, supportive and well managed. External professionals reported that the home escalated concerns appropriately, worked well with partner agencies and provided safe accommodation within a recovery-focused model.

Overall, the inspection found that Strathmore provides a safe, stable and supportive environment for young people. The home demonstrated a clear understanding of its role and limitations, with appropriate systems in place to support independence while managing risk proportionately.

5. INSPECTION PROCESS

5.1 How the inspection was undertaken

The Care and Support Services with Accommodation Standards were referenced throughout the inspection.[1]

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection report, the Statement of Purpose and notification of incidents.

The Regulation Officer gathered feedback from service's management and other staff. Additionally, feedback was provided by three professionals external to the service.

Feedback from next of kin was not sought as part of this inspection. Due to the nature of the service, many young people are accommodated following family breakdown, relationship difficulties, homelessness or other complex personal circumstances. Some young people have limited or no contact with family members, while others may not wish family members to be involved in their support. The home respects the wishes and confidentiality of young people and only engages with relatives where appropriate consent has been provided.

As part of the inspection process, documents including policies, care records and incidents were examined.

At the conclusion of the inspection visit, the Regulation Officer provided verbal feedback to the Registered Manager and followed up on by email one week post inspection visit.

This report presents our findings from the inspection and outlines the range of observations made. Throughout the report, we may highlight any areas of good practice identified, along with suggestions where practice could be strengthened or further enhanced.

[1] All Care Standards can be accessed on the Commission's website at https://carecommission.je/

5.2 Sources of evidence.

Key lines of enquiry	
Focus	**Evidence Reviewed**
Is the service safe	Statement of Purpose Safeguarding policy Staffing and lone working policy Health and safety policy Accident and untoward incident policy Recruitment policy Notification analysis Rota information Staff feedback Observations of the environment
Is the service effective and responsive	Statement of Purpose Outcome Star assessment process Key-working arrangements Monthly provider reports Service user support planning information Nutrition arrangements External professional feedback
Is the service caring	Observations of staff and young people Staff feedback Service user engagement attempts Feedback and complaints policy Outcome Star process
Is the service well-led	Organisation chart Monthly provider reports Training, development and supervision policy Supervision records Feedback and complaints policy Notification analysis Incident learning examples

6. INSPECTION FINDINGS

Is the service safe?

People are protected from abuse and avoidable harm.

Strathmore demonstrated appropriate systems to keep young people safe within the context of a supported accommodation service. The service had clear policies in place covering safeguarding, accidents and untoward incidents, lone working, health and safety, recruitment, professional boundaries and risk management. These policies were relevant to the service model and reflected the risks associated with homelessness, self-harm, mental health concerns, substance misuse, exploitation, aggression and professional boundary concerns.

Safe recruitment arrangements were reviewed during a previous visit to The Shelter Trust head office in March 2026 by two regulation officers. The files reviewed demonstrated that recruitment processes included application forms, job descriptions, interviews, references, Disclosure and Barring Services checks, right-to-work checks and confirmation that checks were completed before employment started.

Staffing arrangements were appropriate for the service model. The Statement of Purpose described staffing arrangements that included two support workers during the day and one support worker overnight. The staff team also consisted of a housekeeper and a Project Manager. The service operated with 24-hour staffing arrangements and management support was available when required. Rota and provider report information confirmed that staffing was maintained, including waking night cover and management oversight. A vacant support worker post was identified, but the Registered Manager confirmed that this was being managed through the existing staff team and relief workers, with no current impact on service delivery.

Safeguarding arrangements were strong. The Registered Manager is the safeguarding lead for The Shelter Trust, and staff confirmed that they knew how to raise concerns. Staff also spoke positively about the service's approach to supporting young people safely.

One staff member stated: "*Providing a safe environment for our young clients and supporting them the best we can*."

The safeguarding policy had clear guidance on how to report to external relevant agencies. The policy also included risks such as self-neglect, domestic abuse, exploitation, modern slavery, substance misuse, suicide risk and peer-on-peer harm.

During this inspection visit, the notification submitted to the Commission were reviewed and it was noted that staff responded appropriately to incidents. Staff recognised risk, called emergency services, sought medical assessment and involved mental health services where required. This demonstrated appropriate risk recognition and escalation.

The environment was observed to be clean and calm. The Registered Manager showed the Regulation Officer refurbished rooms, and evidence was provided of ongoing environmental improvements, including redecoration, communal bathroom improvements and wider maintenance works.

Overall, the home demonstrated effective systems to keep young people, staff and visitors safe. Safeguarding, staffing, lone working, incident reporting and environmental risk arrangements were appropriate for the service model and the needs of the young people supported.

Is the service effective and responsive?

Care, treatment, and support achieves good outcomes, promotes a good quality of life and is based on the best available evidence.

The service had a clear and updated Statement of Purpose, provided on 27 July 2026. The Statement of Purpose explained the home's focus on assessment, key-working, advocacy, access to housing, drug and alcohol services, counselling, mental health support, life skills, employment and training advice, meals and laundry.

Admission and assessment arrangements were structured. Access to the service is through self-referral or agency referral. The Outcome Star assessment tool is used to support assessment, action planning and review. The tool helps service users and staff identify goals, measure progress and plan for greater independence. Outcome Star assessments are reviewed every three months, or sooner if required, and inform ongoing support planning and move-on goals.

The home supported service users to access food and nutrition in a way that was suitable for the service model. Food, drinks and snacks were available 24 hours a day. Staff cooked and service users were encouraged to share preferences. Packed lunches were available for those attending work or education. Dietary requirements were identified during assessment.

The inspection found that the home was responsive to service users individual needs and aspirations. Key working sessions were used to identify goals and support service users with education, employment, training, housing and practical life skills. The home also supported engagement with external services where required, including mental health, substance misuse and other professional support.

External professional feedback supported the inspection findings. One professional stated that the service escalated mental health concerns when required and supported joint working with young people living at Strathmore.

An external professional said:

The team at Strathmore will escalate any Mental Health issues or concerns when required. They support joint working with any of the clients we have residing there.

Another professional described the service as providing safe accommodation while supporting education, training and employment opportunities, daily contact, practical life skills and weekly key working sessions.

Overall, the home was effective and responsive. Support planning was based on assessment and regular review, and the home worked with service users to promote stability, independence and move on outcomes.

Is the service caring?

Care is respectful, compassionate, and dignified. Care meets people's unique needs.

Strathmore provides support in a way that promotes dignity, independence and personal responsibility. The service model is not based on doing things for young people, but on supporting them to build skills, confidence and independence. This was reflected in the Statement of Purpose, Outcome Star process, key-working model and staff discussions during the inspection.

An external professional highlighted the service's strengths, stating that it: "*Provides safe accommodation for young people whilst offering supported opportunities for education, training and employment.*" Staff demonstrated an understanding of service users' needs and the importance of balancing care, support, boundaries and independence. The service recognised the importance of encouragement, active listening and working alongside young people while supporting them to make decisions and take responsibility.

Observations during the inspection supported this finding. Two young people were seen during the evening meal period. While direct engagement was limited, interactions between young people and staff appeared relaxed, familiar and respectful. Young people were observed chatting with staff, collecting their dinner and moving comfortably around the service.

The Regulation Officer sought feedback through informal discussions and by providing QR code surveys to allow young people to respond anonymously. No feedback forms were returned. This was considered in the context of the service user group, many of whom have experienced homelessness, trauma and other complex life circumstances that can make engagement with inspection processes more difficult.

Staff feedback indicated that they saw the home's main strength as providing a safe environment for young people and supporting them to gain the skills needed to live independently in the future. Staff also described management as supportive and stated that training was available to help them carry out their roles.

Overall, the home demonstrated a caring and respectful approach. Staff promoted safety and independence while recognising the vulnerability, complexity and individuality of the care receivers supported.

Is the service well led?

The leadership, management and governance of the organisation assures delivery of high-quality care, supports learning and innovation, and promotes an open and fair culture.

Strathmore is well led by a Registered Manager who demonstrated good knowledge of the home, the service users supported and the risks associated with the service model. The Registered Manager is also the safeguarding lead for The Shelter Trust, which supported clear safeguarding oversight and consistency across the organisation.

A staff member said:

Lots of training and management always on hand to speak to.

The organisational structure of The Shelter Trust provided clear oversight. The organisation has a Board of Trustees, Director, Operations Director and service-level Project Managers. Central support functions include administration, finance, training, Human Resources and payroll. This provided evidence that Strathmore operates within a wider governance framework rather than in isolation.

Governance systems were proportionate to the service model. Monthly provider reports for April, May and June 2026 showed stable occupancy, staffing oversight, incident monitoring, training progress, supervision arrangements, environmental improvements and a continued focus on independence and move-on planning.

The home demonstrated a learning culture. Examples included the introduction of a self-care pack following self-harm-related learning, the planned use of CCTV in the reception area due to previous events, and the use of colour cards to support service user's decision making. Incidents were reviewed by the Registered Manager, discussed through handovers and used to consider practical improvements.

Training records and inspection discussions confirmed that all support workers had completed the Level 3 Diploma in Adult Social Care. The Registered Manager had completed Level 3 and Level 5 management qualifications. Bespoke training included stress resilience, listening skills, understanding self-harm, suicide awareness and neurodiversity.

Supervision arrangements were in place. The policy requires quarterly supervision and includes discussion of wellbeing, workload, service user updates, safeguarding, training needs, reflective practice and agreed actions. A sample of supervision records was provided during inspection, and staff feedback confirmed that they felt supported by management.

Overall, Strathmore was well led. Governance arrangements were clear, staff felt supported, incidents were reviewed, learning was acted upon, and the home demonstrated a strong understanding of the risks and responsibilities linked to supporting young people experiencing homelessness.

What staff said:

We are a stable team.

I love my job and feel supported professionally and personally.

The strengths come from the foundational support that the shelter trust provides to get young people into a better independent and self-fulfilling life.

A professional's view:

Strathmore provide an excellent service and fully understand and work with the ethos of Maslow's hierarchy of need and provide safe secure accommodation as that foundational base.

Good support system in place to track areas of need through 'Outcome Star' and young people get weekly key-working sessions.

IMPROVEMENT PLAN

There were no areas for improvement identified during this inspection, therefore; an improvement plan is not required.

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

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