



**Jersey Care  
Commission**

## **INSPECTION REPORT**

**Mont a L'Abbe School**

**Care Arrangements in Special Schools**

**La Grande Route de St Jean  
St Helier  
JE2 3FN**

**14 and 15 November 2023**

## THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014, 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 (as amended) 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 Mont a L'Abbe School. The school is made up of the primary school and the secondary school which are on separate sites and these schools provide provision for children and young people through to the age of 19 years. The primary school's facilities include sensory spaces, a gym, cookery rooms and a multi-sensory therapy pool. The secondary school has facilities for teaching cookery and other life skills. This is the service's first inspection since registration with the Commission on 3 July 2023.

Regulated Activity	Care Arrangements in Special Schools
Conditions of Registration	<p><u>Mandatory</u></p> <p>Type of care: personal care, personal support</p> <p>Category of care: Children and Young People (0 to 18), Young Adults (19 to 25), autism, learning disability, physical disability and/or sensory impairment, mental health.</p> <p>Maximum number of children and young people who may be accommodated on the premises at any one time: 150</p> <p>Age range of care receivers: 3 to 19 years.</p> <p><u>Discretionary</u></p>

	The Registered Manager of Mont a L'Abbe school must complete a Level 5 Diploma in Management and Leadership or equivalent by 3 July 2026.
Dates of Inspection	14 and 15 November 2023
Times of Inspection	10:00-15:10 and 10:30-14:00
Type of Inspection	Announced
Number of areas for improvement	Three
Number of care receivers using the service on the day of the inspection	128

The Care Arrangements in special schools service is operated by Children, Young People, Education and Skills (CYPES) and there is a Registered Manager in place.

The discretionary condition on the service's registration was reviewed, and the regulation officers discussed whether the Registered Manager had any previous leadership and management training that could be mapped across with the Level 5 Diploma. If further study is required, the Registered Manager would be keen to explore a course relevant to care in special schools if possible.

At the time of the inspection, the Registered Manager explained that a new secondary building is being constructed on a site next to the primary school. The plan is that eventually there will be one site for both schools. However, initially it will remain as two sites with only two classes moving over to the new building from the secondary school in the first phase. There is a planned refurbishment of the primary school after completion of the secondary site.

A copy of the service's Statement of Purpose was submitted on registration with the Commission in July 2023. It advises that the school's aim is to "provide a safe and supportive environment, which secures the well-being and very best outcomes for learners in our care".

## **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.

The school has a clear management structure led by the Registered Manager (head teacher) and the two deputy head teachers. The staff team spoke of their enjoyment of the job and of being well supported by the management team.

The service's Statement of Purpose did not accurately reflect the range of care needs supported, the service details, staff and facilities. This was discussed at the inspection and will be an area of improvement. In addition, the service is not currently producing a monthly report but does produce other qualitative data. The regulation officers discussed that data from these sources could be extracted and put into a monthly report. This will be another area for improvement.

The regulation officers were requested to read the school's safeguarding guidance for visitors on arrival. It was positive to note this proactive approach to safeguarding throughout the visits. This was evidenced in the school's safeguarding policies and procedures and feedback from the inspection process. In addition, all staff were clear regarding their roles and responsibilities in safeguarding. This is an area of good practice.

Policies and procedures were in place to protect the safety of children, young people and staff. Staff training was in line with the standards, except for infection control training, which will be an area for improvement.

It was evident to the regulation officers that the school puts the child and young person first and that the care and support provided was bespoke to the child's and their parent's wishes and preferences. The feedback from parents was overwhelmingly positive concerning the care and support provided.

There are healthcare plans in place which are clear and easy to follow. Staff receive the appropriate training in specialist medication administration and any delegated tasks for each child. Staff reported an excellent working relationship and felt supported by the community children's nurses from Family Nursing and Homecare (FNHC).

## INSPECTION PROCESS

This inspection was announced a week before the first inspection visit to ensure that the Registered Manager would be available during the visit. The inspection was carried out by two regulation officers on the 14 and 15 November 2023. The first visit was to meet with the Registered Manager and carry out a tour of the primary school. The second visit provided the regulation officers with the opportunity to meet with staff and parents to gather feedback and to visit the secondary school.

The Care Arrangements in Special Schools Standards were referenced throughout the inspection.<sup>1</sup> These Standards relate to care and support provided to children and young people receiving education provision in special schools and do not relate to education provision.

This inspection focussed on the following lines of enquiry:

- **Management of the service**
- **Care and support**
- **Choice and safety**

Prior to our inspection visit, all of the information held by the Commission about this service was reviewed, including registration paperwork.

The regulation officers sought the views of the people who use the service, and or their representatives, and spoke with managerial and other staff.

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

The regulation officers spoke with the two deputy head teachers, seven other staff members, and the Registered Manager. The regulation officers also established contact with three parents, this contact was made face-to-face.

The views of three health professionals were also sought as part of the inspection process. At the time of writing the report, only one response had been received.

Records, including policies, care records, the staff handbook and the organisational chart, were examined during the inspection.

At the conclusion of the inspection, the regulation officers provided feedback to Registered Manager.

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

## **INSPECTION FINDINGS**

This is the first inspection of the service since registration; therefore, no previous areas for improvement required any follow-up on this visit.

### **Management of the service**

The Standards outline the Provider's responsibility to ensure that where people stay is right for them and safe. There will be a management structure in place, with an integrated organisational and governance framework, which is appropriate to the needs, size and complexity of the service.

The regulation officers were provided with an organisational chart for the service appropriate to the needs, size and complexity. The staff team consists of the Registered Manager, two deputy head teachers, four assistant head teachers, teachers, teaching assistants, a transport manager, a site manager, a business manager, an office administrator and a chef. There are 140 staff posts within the

organisation, and currently, there are four vacancies for teaching assistants and one for a lunchtime supervisor.

The management team discussed with the regulation officers that staffing remains one of the biggest challenges due to staff vacancies and sickness. This was also reflected in the feedback from most of the staff spoken with during the inspection. Staff were clear that staffing levels were 'safe' but that it was 'tight' to provide cover, for example, over lunchtime and "there was never a spare minute".

The service's Statement of Purpose was discussed with the management team. Although it very clearly outlined the school's aims and objectives, some key details were missing, such as:

- service details, category of care, and age range of care receivers
- level of care and support provided
- staff
- facilities
- training requirements.

Therefore, updating the Statement of Purpose is an area for improvement, and the regulation officers provided the Registered Manager with the Commission template to act as a guide.

The provision of training within the service was discussed in line with Standard 3.2 (Appendix 3). Not all staff are trained in first aid, but many are identified as first aiders trained in 'Paediatric first aid' with a locally accredited trainer. Every class teacher has access to a first aider. The Registered Manager discussed how the school aims to introduce first-aid training for all staff shortly. In addition, three staff members are trained in 'Mental Health first aid'. Although staff receive some infection control training under 'good practice and hygiene', there is no formal training. This is an area for improvement. All teaching staff should receive training in infection control, especially considering the complex care needs of some children and young people attending the school.

Two staff who have completed the train the trainer course in moving and handling are providing moving and handling training. Staff also complete some training online. The school has two designated safeguarding trainers within the staff team, and there are eight designated safeguarding leads within the school. To date, 96 staff members have been trained in-house. All staff members complete the training, including drivers of the school buses and the chef/kitchen staff.

Safeguarding within the school is an area of good practice. Every staff member was clear regarding their role and responsibilities concerning safeguarding. If staff have a concern, they fill out a 'my concern' form, which is then used to report and escalate the concern. There are safeguarding resources/ folders in each class, and with eight designated safeguarding leads, staff always have someone to escalate concerns to or even talk things through. The staff also work closely with the children's social work team.

In addition, all staff are MAYBO (managing challenging behaviours) trained by in-house MAYBO trainers. Examples of specialist training provided for staff include trauma-informed training and positive behaviour support (PBS).

Staff also receive bespoke seizure and anaphylaxis training from the FNHC community nurses and training in delegated tasks, for example, PEG feeding. Again, this training is bespoke to the individual child. Staff were clear that they had to be signed off as competent for each named individual child or young person. Examples of the competency assessment for staff were provided to the regulation officers as evidence and were found to be clear and comprehensive.

Standard 9 (9.2) was reviewed with the Registered Manager, and there was a need for a monthly report to monitor the quality of service provision per the Standards. The service is not currently producing a monthly report but does produce other qualitative data. The regulation officers discussed that data from these sources could be extracted and put into a monthly report. The regulation officers advised that the Registered Manager may want to look at the Commission's template as a guide. This is an area for improvement.



The whistleblowing policy and procedures were discussed with the management team, and staff can access the CYPES whistleblowing policy. Staff are also signposted to policies at the morning briefing.

The Registered Manager is the head of data governance within the school, and the service is registered with the Jersey Office of the Information Commissioner (JOIC)- all staff complete data protection training.

All staff receive regular supervision and appraisals from their line manager. Supervisions are carried out three times a year and recorded in hard copy; a template is used. Appraisals are online and are referred to as 'my conversation/my goals'.

Several policies were reviewed as part of the inspection process; these were found to be detailed with precise review dates. The policies reviewed included the Medical, Epilepsy and First Aid Policies.

The Regulation Officers met with the staff member who has responsibility for maintenance, who provided evidence of the procedures in place to maintain the building and the environment to safeguard the staff and the children and young people. Examples included daily pool sample checks, weekly and monthly fire checks and annual checks of hoists by an accredited company.

The Registered Manager explained that each child has a Personal Emergency Evacuation Plan (PEEP) in the event of a fire.

### **Care and support**

<p>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.</p>
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There is a referral process through CYPES for children and young people accessing the school. The Registered Manager explained that there is an exceptional action

form which is then reviewed at a special educational needs (SEN) panel. In some instances a home visit might be carried out.

If the child or young person is also under the care of FNHC, they will have a health care plan. These plans are stored in both electronic and hard copy format. A hard copy is kept in the child's classroom folder for easy access for all staff. Samples of these healthcare plans were provided as evidence to the regulation officers. These were found to be detailed and easy to follow. The plans are updated annually (usually in September, at the start of the school term) or more frequently if required. All staff were positive in their feedback concerning working with the plans. They confirmed that the plans contained enough information and were easy to follow. There are additional continence and/or intimate care plans for each child or young person if required.

The school also works collaboratively with other healthcare professionals. These healthcare professionals include speech and language therapists, occupational therapists and physiotherapists. One professional spoke positively of staff being proactive in raising their concerns.

In addition to the care plans detailed above, the Registered Manager discussed using a behavioural log to record all behavioural incidents. There is also a behaviour risk assessment form and behaviour flow chart which staff can use. The school has a positive behaviour support and uses of restrictive physical intervention policy (2021) that aligns with the UN Convention on the Rights of the Child (UNCRC).

Staff are guided by a Code of Conduct policy (2022), which discusses professional boundaries and gifts.

The school describes itself as 'a rights respecting school'.

The regulation officers undertook a tour of both schools and observed the easy interactions between staff and the children and young people. The children and young people were observed to be relaxed and happy in both environments, with staff providing their care needs in a dignified and supportive manner. The staff

discussed bespoke care for each child, which is an area of good practice, with evidence of person-centred care and support.

Each classroom had 'zones of regulation', which the children were encouraged to use as a tool to describe/manage their emotions— green/happy, blue/sad, yellow/frustrated and red/angry. It was observed that within the school, there was appropriate equipment, devices and adaptations. Within the primary school there was regulation equipment within the gym, a tracking hoist within a number of the classrooms. In addition, sensory and communication equipment was also provided. For example, a touch trust studio, a dark/sensory studio and eye-gaze assistive technology.

Feedback from parents was overwhelmingly positive. Below are some examples of what was reported to the regulation officers;

*“As a parent, the school sees my child as an individual and the staff care so much. Everyone is dedicated to the children and their role”. Any concerns are dealt with really quickly.”*

*“Communication is amazing”. There’s lots of play, the children still learn but in a different way.”*

*“My child has made great progress with their current class teacher.”*

The Registered Manager described regular communication with parents through home school books, telephone, text and email.

Feedback from staff was also positive, the following are examples;

*“The child is put first, the school is very nurturing and understanding of what parents go through.”*

*“We are provided with walkie-talkies and so we can always buzz someone for help.”*

*“The staff team are very close, I have no issues asking questions.”*

*“I am well supported by the senior leadership team and there is a lot of training.”*

*“There is a nice team atmosphere.”*

*“It’s a really lovely supportive environment.”*

As mentioned under the heading 'management of the service', most staff identified staffing as the biggest challenge, and some also said they desired more resources. An example of this was a suggestion for more equipment for the outside area, for example, musical and sensory equipment. This was fed back to the Registered Manager at the end of the second visit, and they have advised staff to compose a 'shopping list'.

The building was observed to need a refresh in some areas, but the Registered Manager advised that a refurbishment is planned once the other new building is complete. Some areas could have been less cluttered, but this was partly due to every available space being utilised for the benefit of the children.

Feedback was also provided by one health care professional who worked closely with the staff, they described the staff team as “brilliant and supportive”. Staff also confirmed both regular class meetings and staff meetings.

The school has a service level agreement (SLA) with Family Nursing and Homecare (FNHC). Two trained nurses are based at the school (one at the primary school and one at the secondary) from the community nursing team and there is also a school nurse who is not on site but deals with referrals. The community nurses provide any nursing care that the children and young people require during school hours and are responsible for any healthcare plans relating to this care. Nursing care provided under the SLA was not reviewed as part of this inspection. The community nurses also provide oversight and training of staff in relation to any delegated tasks, for example, PEG feeding. Each staff member must be signed off as competent for any tasks prior to undertaking this unsupervised. The community nurse provided the Regulation Officers with sample of the competency paperwork.

Throughout the school, there are many 'staff champions'; examples of these are communication, sensory, or tech champions. All of the teaching assistants belong to one of these groups. This is good practice.

### **Choice and safety**

The Standards outline the Provider's responsibility to ensure that people will feel safe and are kept safe. People will be supported, enabled and empowered to be as independent and autonomous as practicable. People's rights will be supported and protected.

At the time of writing the report, a meeting had been requested with Human Resources (HR) to go through the service's recruitment procedures. A sample of six staff members' personnel files, recruited since the service registered with the Commission in July 2023, were to be reviewed as evidence. The Registered Manager confirmed to the regulation officers that they would see an employee's DBS checks and references before they commenced employment. The procedure was the same for all staff including volunteers.

The medication policy and procedures were reviewed as part of the inspection process. Staff are allowed to administer medication under the 'common law 'duty. Acting as a parent would to ensure pupils are healthy and safe on school premises. The medication policy divides medication administration into three categories:

- Short-term medical need - for example, antibiotics or pain-relieving medication. Staff can administer this, but it should only be given if prescribed and a GP or paediatrician authorises it.
- Long-term medical needs - children with complex medical needs are supported by the children's community nursing team (CCNT) from FNHC. These children will have health care plans, and a GP or paediatrician must prescribe medication, which the nurses will administer.
- Emergency medical need - for example, buccal (medication given between the gums and the inner lining of the mouth cheek) midazolam during a

seizure. Staff can administer these medications only if they have received the required training and been signed off as competent by the community nurses.

Medications are stored in either the classroom medication cabinets or the cabinets in the nurses' room, which are locked at all times. Parents and carers must sign an authorisation form for any medicine to be administered; the teachers will also hold a medication chart. Staff must record the time and dose of any medication given, which is witnessed and counter-signed by a second staff member. This is also recorded on the class medical log sheet, which is stored in the medical cabinet.

Staff receive training from the CCNT nurse in school for administering buccal midazolam, blood glucose checking, and PEG feeding under delegated tasks.

The school's medical (medicine) policy was clear and easy to follow. This is due to be reviewed again in 2024. The Epilepsy Policy also contains details regarding medication administration in response to seizures and the emergency response procedure.

Notifiable events (as per Appendix 4 of the Standards) were discussed with the management team. It was helpful to discuss these events in detail at the inspection to clarify what met the threshold for notification to the Commission. It was discussed that events that occurred in school should be referred to the Commission, for example, an incident where medical attention was sought. The regulation officers sought further advice concerning safeguarding concerns, which was fed back to the Registered Manager in a final feedback. Moving forward, it is expected that the Commission will receive appropriate and timely notifications from the school, and the notification link was forwarded to the Registered Manager immediately following the second inspection visit.

The regulation officers undertook a brief tour of the spotless and well-organised kitchen. They also met with the chef, who spoke of their "love of the job" and described the health and safety checks in place, such as fridge temperature checks and weekly cleaning jobs. Hot food is provided at lunchtime, and during the inspection visits, all students had just returned to using the dining room collectively.

All staff undertake food hygiene training, and the kitchen has recently been awarded a five star food safety rating.

There was evidence of inclusive communication for the children and young people with bespoke packages to assist with their learning and development. In addition to the eye gaze technology, MAKATON, visual cues and Picture Exchange Communication System (PECS) are used. The Registered Manager discussed that respecting individual wishes and preferences was also extremely important including respecting cultural differences and different communities within the school.

The children and young people have access to curriculum visits throughout the year and rebound therapy (trampoline therapy). At the time of the inspection visits, some of the children were preparing for Christmas activities. The PAT dogs also visit weekly. On the day of the second visit, it was well-being Wednesday, when fruit was delivered for all the staff.

The Registered Manager discussed that the school is always proactive in behaviour management. Children and young people who display challenging behaviour will have a consistent management plan, a positive safer handling plan and associated risk assessment. These will have been discussed, and the child's parents will sign the safer handling plans.

The Registered Manager also discussed the importance of debriefing for staff following episodes of challenging behaviour.

The school also places a great deal of importance on the preparing for adulthood pathway which is part of the school curriculum. This aims to enable young people to achieve the best possible outcomes in adult life.

## IMPROVEMENT PLAN

There were three 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>Ref:</b> Standard 1.1</p> <p><b>To be completed by:</b> three months from the date of inspection (14 February 2024).</p>	<p>The Registered Provider must ensure that the service's Statement of Purpose includes information contained in Standard 1, 1.1, such as types of service provision and the range of care needs supported.</p> <hr/> <p><b>Response of Registered Provider:</b></p> <p>A completed statement of purpose has been completed and attached.</p>
<p><b>Area for Improvement 2</b></p> <p><b>Ref:</b> Standard 3.2 (Appendix 3)</p> <p><b>To be completed by:</b> six months from the date of inspection (14 May 2024).</p>	<p>The Registered Provider must ensure that teaching staff have received infection control training.</p> <hr/> <p><b>Response of Registered Provider:</b></p> <p>All staff have been allocated infection control learning to be completed by 19<sup>th</sup> February 2024.</p>
<p><b>Area for Improvement 3</b></p> <p><b>Ref:</b> Standard 9.2</p> <p><b>To be completed by:</b> six months from the date of inspection (14 May 2024).</p>	<p>The Registered Provider must ensure that the service reports monthly on the quality of care provided and compliance with registration requirements, Standards and Regulations.</p> <hr/> <p><b>Response of Registered Provider:</b></p> <p>January's report has been completed and we would welcome feedback.</p>



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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