



**Jersey Care
Commission**

Summary Report

Secure Children's Home

**Union Street
St Helier
JE2 3DN**

**Inspection Dates:
31 July, 1 and 5 August 2025**

**Date Published
7 October 2025**

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.

This home has experienced some challenges in terms of staffing, with staff reports of shortages, burnout, discontentment, and a lack of visible leadership over the last nine months. This affected staff morale and cohesion and contributed to increased incidents, including restrictive interventions and complaints or allegations from young people about the care they received. It was noted that the home also experienced a high level of occupancy during this period.

A recent operational reset during a temporary home closure has allowed a new manager and the existing care staff to re-establish an ethos, trauma-informed practices and carry out essential training. The home prioritises care delivery through core themes of compassion, dignity, and respect, alongside a refreshed values and principles statement. Evidence suggests that these actions have resulted in improved staff morale, more confidence in the leadership and improvement in the consistency of care delivery.

Health and safety checks, including water safety/temperature testing and electrical and portable appliance testing, were completed in line with mandated timescales. However, at the time of this inspection fire drills were not being carried out within mandated timescales. Major refurbishment plans, due to start in September, aim to create a homely environment and greater access to leisure activities, which the Commission welcomes.

Care planning is multi-agency-led and subject to regular review; however, it could be better coordinated with a multi-agency trauma-informed approach, led by an appropriately trained professional. Comprehensive risk assessments are in place, and they are trauma informed.

The education offer for young people aged 16+ needs strengthening, with plans in place to address this. When health assessments are conducted, the assessing health professional cannot access young people's health records.

A revised incentive scheme that promotes structure, trust and responsibility has been introduced. Young people are provided with choice and control and have contributed to the development of the home.

Staff supervision is completed regularly. Additional staff well-being initiatives, such as clinical supervision, are being explored. Training and a home-specific induction for care staff did not meet the required standards.

Although significant work has been progressed regarding service specific policies and procedures, these are not yet fully operational and available to care staff.

IMPROVEMENT PLAN

There were six areas for improvement identified during this inspection. The table below is the Registered Provider's response to the inspection findings.

<p>Area for Improvement 1</p> <p>Ref: Standard 4.2</p> <p>Regulation 18</p> <p>To be completed: with immediate effect</p>	<p>The Registered Manager must ensure that fire drills are carried out in accordance with the recommendations set out the Jersey Fire and Rescue Service Fire Precautions Logbook.</p>
	<p>Response by the Registered Provider:</p> <p>A fire drill schedule has now been implemented to ensure drills are conducted at least every three months, in line with recommendations from the Jersey Fire and Rescue Service.</p> <p>The Registered Manager will be responsible for recording each drill in the Fire Precautions Logbook and maintaining a register of staff and young people in attendance.</p>

	<p>The first fire drill took place on 06 September 2025 at 09:15am.</p> <p>The home now has a trained Fire Marshal, who will coordinate all future fire drills.</p>
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<p>Area for Improvement 2</p> <p>Ref: Standard 3.10</p> <p>Regulation 17</p> <p>To be completed: by 31/01/2026</p>	<p>The Registered Provider must ensure that all care staff complete the identified mandatory training offer and records of completed training is available for inspection.</p>
	<p>Response by the Registered Provider:</p> <p>A comprehensive training matrix has been updated and is reviewed monthly by management. Any gaps in training are flagged to line managers and escalated if not addressed within the agreed timescale.</p> <p>A training schedule has been developed to ensure compliance with mandatory requirements (including first aid, safeguarding, Prevention and Management of Violence and Aggression, data protection, and trauma-informed practice). Completion will be monitored through supervision and reported to senior leadership.</p>

<p>Area for Improvement 3</p> <p>Ref: Standard 3.9</p> <p>Regulation 17</p> <p>To be completed: with immediate effect</p>	<p>The Registered Manager must ensure that all new care staff complete a home-specific induction and that there is a record of this taking place.</p> <hr/> <p>Response by the Registered Provider:</p> <p>A new induction programme has been designed for residential and secure children’s home, covering policies, trauma-informed practice, safeguarding, and routines.</p> <p>All new starters will complete the programme within their first two weeks, with sign-off from a senior manager.</p> <p>Induction records will be stored electronically and checked during audits to ensure full compliance.</p> <p>Existing staff without completed records will retrospectively complete induction sign-off by end October 2025.</p>
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<p>Area for Improvement 4</p> <p>Ref: Standard 11.1</p> <p>Regulation 9</p> <p>To be completed: with immediate effect</p>	<p>The Registered Provider must ensure that the assessing health professional has access to the health records of young people as part of health assessments.</p> <hr/> <p>Response by the Registered Provider:</p> <p>We are working in partnership with health services to establish secure information-sharing protocols that ensure assessing professionals have timely access</p>
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	<p>to relevant GP and hospital records during assessments.</p> <p>Until full digital access is agreed, health summaries will be requested from GP services and uploaded to the young person's care record prior to assessment. However, this process can be challenging when young people are admitted to Greenfields at short notice and have not previously been looked after, making it difficult to obtain health information in time.</p> <p>Update: 30.09.2025 – The Registered Manager contacted the Forensic Medical Examiner service that provides medical care to Greenfields. They confirmed that a system enabling access to all young people's medical information has been in place for six months. Although they initially experienced IT issues that affected functionality, these have now been resolved.</p>
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<p>Area for Improvement 5</p>	<p>The Registered Provider must adopt and embed a trauma-informed practice model overseen by an appropriately trained professional.</p>
<p>Ref: Standard 11.4 Regulation 17</p> <p>To be completed: 31/03/2026</p>	<p>Response by the Registered Provider:</p> <p>The home has adopted trauma-informed principles and introduced ABC charts, but we recognise the need for a formalised model.</p>

<p>Area for Improvement 6</p> <p>Ref: Standard 1.6</p> <p>Regulation 5</p> <p>To be completed: 31/03/2026</p>	<p>The Registered Provider must ensure that care staff have access to service-specific policies and procedures that are regularly reviewed and updated.</p> <hr/> <p>Response by the Registered Provider:</p> <p>All service-specific policies have now been drafted and launched through staff workshops. To support accessibility, a digital policy library (TRI-X) has been established on the internal system, allowing all staff easy access to current policies. Hard copies will also be available in the office for reference.</p> <p>To embed policy understanding into practice, staff will be set objectives during monthly supervision sessions to read and familiarise themselves with all relevant policies. Compliance will be monitored through ongoing supervision and annual appraisals.</p>
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The full report can be accessed from [here](#).