



INSPECTION REPORT

07 Children's Home Care Service

**Government of Jersey
Union House
St Helier
JE2 3DN**

**Inspection Dates
25 and 29 September 2025**

**Date Published
11 November 2025**

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

The Government of Jersey operates this Children's Care Home service through the Children, Young People, Education and Skills (CYPES) department, and a registered manager is in place. The name and address of the home have not been included in this report to preserve the privacy and confidentiality of the children and young people who live there.

Registration Details	Detail
Regulated Activity	Children's Care Home
Mandatory Conditions of Registration	
Type of care	Personal care; personal support
Category of care	Children and Young People (0-18 years)
Maximum number of care receivers	Four
Maximum number in receipt of personal care/personal support	Four
Age range of care receivers	10-18 years
Maximum number of care receivers that can be accommodated in each room	Bedrooms 1-4 – one person
Discretionary Conditions of Registration	
None.	
Additional information:	
The Commission received notification that the home was temporarily closed in September 2024 due to a planned refurbishment.	

On 3 March 2025, the Commission received an application to change the interim management arrangements and to change the mandatory conditions of registration to the following:

- To become a Children's Care Home under the category of care, Children and Young People (0-18 years)
- To care for a maximum of four children or young people (10 -18 years)

The proposed changes to the interim management arrangements were approved the same day; however, the changes to the mandatory conditions of the home were not approved until 28 April 2025.

On 10 July 2025, the Commission received an application for the Interim Manager to become the Registered Manager, which was later approved on 15 August 2025.

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 Regulation Officer concluded that all requirements have been met.

3. ABOUT THE INSPECTION

3.1 Inspection Details

This inspection was announced and notice of the inspection visit was given to the Registered Manager 12 days before the proposed inspection visit. This was to ensure that the Registered Manager would be available during the visit and to allow them time to respond to the pre-inspection information request.

For the purposes of this report, care receivers will be referred to as young people.

Inspection information	Detail
Dates and times of this inspection	25/09/25 – 9.10am to 5.10pm 29/09/25 – 2.00pm to 3.20pm
Number of areas for improvement from this inspection	None
Number of care receivers accommodated on the day of the inspection	Withheld
Date of previous inspection Areas for improvement noted in 2024 Link to the previous inspection report	27 June 2024 Four IRYoungAdultsService0120240627Final.pdf

3.2 Focus for this inspection

This inspection included a focus on the areas for improvement identified at the previous inspection on 27 June 2024, as well as these specific new 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

Four areas for improvement were identified at the last inspection, and the Registered Provider submitted an improvement plan to the Commission setting out how these areas would be addressed.

The improvement plan was discussed during this inspection, and it was positive to note that all the identified areas for improvement had been addressed. This means that there was evidence of the following:

- Appropriate responses aligned with the Government of Jersey's Prevention and Management of Violence and Aggression policy were evidenced where risk was posed to staff or young people. In addition, senior leadership had oversight of incident reporting, and the Registered Manager stated, 'feeling fully supported by the senior leadership team'.
- A Registered Manager is now in place for this home.
- Reflective supervision is taking place in line with the Standards.
- Service-specific policies are now in place and are accessible to care staff.

4.2 Observations and overall findings from this inspection

The home is considered safe, with staffing levels adequate at the time of inspection, though additional staff will be required when operating at full capacity. The Registered Manager is confident in the interim arrangements and is supported by senior leaders, with recruitment planned. Safe recruitment practice, including checks for agency staff, are robust.

Notifiable events and significant incidents are appropriately reported, investigated, and followed policy. A debrief model is in place, demonstrating safeguarding for young people and a duty of care for staff.

Comprehensive risk assessments, safety plans, and protocols are implemented to safeguard young people, where the potential for exploitation is recognised. Online safety is managed through controlled device access, and health and safety practices, including fire, electrical, water, and infection control, are up to date and effective. Medication management is safe, with staff training scheduled for October 2025.

Refurbished in May 2025, the home offers a comfortable environment with multiple communal areas and a garden. Pre-admission impact assessments ensure the needs of both new and existing residents are considered. Young people receive a child-friendly welcome pack. Care records demonstrate regular health checks, pathway planning, and the development of independence skills.

Key work sessions with young people are effective and recorded using the wellbeing indicators of the Jersey Children First framework. Care staff, social workers and personal advisors work collaboratively to support transition planning, which begins at 14 years old, ensuring young people are prepared for adulthood.

The care observed was warm, respectful, and engaging, fostering positive relationships, choice, self-esteem, and inclusion. Young people and staff have access to therapeutic input, with trauma-informed approaches and specialist support improving outcomes for young people. Staff report high levels of peer and managerial support, and supervision meets standards.

Young people are consulted on home life, including décor, activities and the daily menu and also have access to advocacy.

Overall, the home is well-led, with a clear Statement of Purpose and an inspection-ready, approachable Registered Manager. Staff feel supported, policies are accessible, and training compliance is high. Leadership demonstrates accountability, transparency, and commitment to continuous improvement, ensuring safe, effective, and responsive care for young people.

5. INSPECTION PROCESS

5.1 How the inspection was undertaken

The Children's Care Home Standards were referenced throughout the inspection.¹

Prior to our inspection visit, the Commission reviewed all its information about this service, including the previous inspection report, reviews of the Statement of Purpose, changes to the mandatory condition's applications, and incident notifications.

The Regulation Officer gathered feedback from one care receiver. They also had discussions with the service's management and other staff. Additionally, feedback was provided by two professionals external to the home.

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

At the conclusion of the inspection visit, the Regulation Officer provided feedback to the Registered Manager and followed up on the inspection findings by email on 26 September 2025.

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

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

5.2 Sources of evidence.

Follow up on previous areas for improvement	
Focus	Evidence Reviewed
Management of violence and aggression	Review of notifiable events Discussion with the Registered Manager and care staff
Provision of a Registered Manager Supervision	Registration of Manager documentation and approval
	Review of the supervision matrix Discussion with staff Staff survey
Service-specific policies	Discussions with the Registered Manager Physical policy documents
New key lines of enquiry	
Focus	Evidence Reviewed
Is the service safe?	Review of the notifiable events Review of Health and Safety (fire, electrical, water testing, infection control measures and other essential maintenance) Review of safeguarding responses Review of staffing levels and rotas Medications management
Is the service effective and responsive?	Observation of the home environment Review of assessment of need, care planning and risk assessments Collaborative working Review of wellbeing indicators Independent visitor reports Children's Guide Participation and consent Pathway and transition planning
Is the service caring?	Observations of care delivery Feedback from care staff and the Registered Manager Feedback from children and young people Feedback from external professionals Review of care plans – are they person-centred? Supervision and wellbeing of staff Keywork sessions Trauma-informed practice

Is the service well-led?	Review of the Statement of Purpose Wider service planning Workplace culture Policies and procedures Training and induction of staff Assessment of leadership
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6. INSPECTION FINDINGS

Is the service safe?

People are protected from abuse and avoidable harm.

Staffing was adequate at the time of the inspection; however, it was noted that additional staff would be required to meet future needs when the home is at full capacity. The Registered Manager had received assurance from senior leaders in the wider service that this was a priority, with recruitment activity planned imminently. The Registered Manager reported confidence in managing the situation in the interim, noting that the staff team is strong, collaborative, and maintains a clear focus on prioritising the needs of the young people.

No new staff had been recruited directly to this home; however, staff from the wider service had been transferred. The Registered Manager provided evidence of being aware of the renewal dates for criminal record checks for all care staff. In addition, the Registered Manager provided assurance that they would see all the relevant employment documentation regarding safe recruitment practices for permanent, bank and agency care staff.

The Regulation Officer reviewed notifiable events submitted to the Commission and was satisfied that reporting processes and subsequent actions were appropriate, safeguarded young people, and mitigated risks for both them and staff working in the home. There was clear evidence of regularly reviewed and comprehensive risk assessments, safety plans, and the use of appropriate protocols for young people who go missing regularly.

The Registered Manager demonstrated knowledge of the wider service response to young people who go missing, the home's responsibility in identifying risk of exploitation, and how to tackle this with a multi-agency response.

In addition, the Regulation Officer was assured that senior leaders within the wider service maintained appropriate oversight to ensure compliance with the Government of Jersey's policy on the prevention and management of violence and aggression against staff. The Registered Manager also confirmed that she felt well supported by her senior leaders in this area and noted that responses were now more robust, thereby reducing the likelihood of escalation. This is therefore no longer identified as an area for improvement.

One professional commented:

The young person I support has expressed that they feel safe living there, are comfortable in this environment, and particularly enjoy their bedroom.

Significant incidents involving young people and care staff were explored with the Registered Manager. The Regulation Officer was satisfied that the home had adopted a formal debrief model, with a duty of care to both young people and care staff.

The Registered Manager reported that complaints from young people are generally addressed at the source and are typically low-level. The Regulation Officer reviewed complaints that had met the threshold for formal investigation and was assured that these were handled in accordance with the home's complaints policy.

Online safety and access to electronic devices are taken seriously in this home. Care staff can manage internet access by restricting usage times or blocking specific websites. Similar controls are available on internet-enabled televisions, which can also be programmed to switch off at set times. These measures allow the home to use internet access as part of behaviour management, promote greater responsibility among young people, and enhance safeguarding within the home.

The Regulation Officer explored the health and safety measures in place in this home and was assured that the following was taking place:

- There was an up-to-date electrical certificate, and there was regular portable appliance testing.
- All fire prevention measures were being carried out in accordance with best practice, with regular testing and servicing of equipment in place.
- Water testing, flushing and servicing of water tanks takes place in accordance with best practice.
- Incident management in terms of health and safety was appropriately managed.
- Daily, weekly and monthly checklists ensure infection control measures are in place.

Medications Management was reviewed as part of this inspection. It was deemed adequate and safe, with some minor advice provided concerning transcribing, recording allergies and having access to patient information leaflets for all the medications, not just over-the-counter medications. The Regulation Officer noted that several care staff did not have the appropriate Level 3 module in the management of medication; however, planning was in place for this to happen in October 2025.

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 Regulation Officer was consulted on the refurbishment plan for this home, which was completed in May 2025. The home is furnished to a high standard and provides a comfortable environment, with up to four lounge areas and a garden for young people. These spaces offer opportunities for privacy and spending time with others in the home. The refurbishment forms part of a wider vision for the residential estate, aimed at improving sufficiency, enhancing the quality of homes for children and young people, and providing greater choice.

One professional
Commented:

During my visits, the home is always clean and well-maintained, and following its recent refurbishment, it has become noticeably more homely and welcoming.

A thorough impact risk assessment should be undertaken before a young person joins this home. This should consider prospective and existing residents' needs, identify potential risks, and determine the measures required to mitigate them. The Regulation Officer reviewed one assessment and was satisfied that it was comprehensive in evaluating needs and risks and setting out appropriate actions to reduce them. The document had been signed off by both the Registered Manager and their line manager.

When joining the home, young people receive a detailed, child-friendly welcome pack. The pack includes information about the home's aims and ethos, what to expect from care staff and the responsibilities of young people, allowances, activities, and meals, as well as procedures for overnight absences and missing person responses. It also explains how young people can make a complaint.

The Regulation Officer reviewed care records for young people in this home, which assured the following:

- Care/pathway planning meeting took place regularly and addressed young people's current and future needs.
- Records were present of young people's last visit to their GP, dentist and optician.
- Health assessments were undertaken within appropriate timescales.
- Daily records were contemporaneous and completed regularly.
- An independence skills matrix was present, charting young people's achievements across several domains, such as travel, budgeting and laundry competence.

In addition to the above, regular key work sessions have occurred between young people and their allocated keyworkers. The Regulation Officer noted several critical conversations covering a range of essential subjects, often resulting in action plans outlining the support each young person would receive or what part of the plan they would take responsibility for.

One professional commented:

I have consistently observed a high level of teamwork dedicated to supporting the young people in their care. The relationship between the young person I support, and their key worker is notably strong and built on trust and consistency.

Planned key work sessions were recorded using the Jersey Children First practice model, the Government of Jersey's holistic framework for assessing a child or young person's needs and progress across eight wellbeing indicators. The Registered Manager demonstrated a comprehensive understanding of the model and provided evidence that the home promotes positive outcomes for young people. This assured the Regulation Officer that the framework was being applied effectively, and young people's voices were heard and acted upon.

Additionally, the Regulation Officer explored young people's opportunities to be listened to daily and their involvement in the running of the home. The Registered Manager provided several examples of consultation, including during the refurbishment period and the preparation for the home reopening. Young people remain engaged in decisions such as selecting décor, for instance, having their own photographs transferred onto canvas and displayed in prominent areas of the home.

The Registered Manager reported that, while formal house meetings have not yet been established, they were confident that young people feel proud of their home and have access to multiple avenues for advocacy, which they are routinely made aware of.

The Regulation Officer noted that young people's records clearly reflected their consent, recognising their capacity and self-determination in making decisions for themselves, such as managing their own medications. The Registered Manager shared several examples of working collaboratively with young people to support responsible and well-informed decision-making, thereby promoting greater independence as they progress towards adulthood. The active use of incentive schemes was also observed to encourage young people's engagement and ownership, contributing to positive outcomes.

Transition planning for young people begins at 14 years old or upon entering the care of this home. Each young person is assigned a personal advisor who visits regularly to build a trusting and positive relationship and to begin identifying needs and strengths as part of pathway planning towards adulthood. The Regulation Officer explored pathway planning for young people in this home and found it engaging and increasingly effective, as relationships strengthen and young people recognise the vital role that care staff, and their personal advisor, play in supporting future positive outcomes.

The Regulation Officer noted the regular involvement of several partner agencies in planning for young people in this home, such as supporting access to education, skills development, employment opportunities, advocacy, and therapeutic support. Care staff spoken to demonstrated passion and determination to help young people succeed in education, employment and their journey toward adulthood.

The Regulation Officer reviewed independent visitor reports as part of the pre-inspection activity for this home. These reports were found to be comprehensive, highlighting areas of good practice as well as areas requiring improvement. They also track progress on recommendations from month to month and hold senior leaders accountable for any actions beyond the manager's authority. Senior managers also respond to the report, creating further accountability.

Additional comments from care staff:

"This home has a no-blame culture; instead, we seek solutions and ideas through open discussion."

"I have worked across multiple homes in the wider service and am most confident in this team. There is openness, and we have the same shared goals, aims, and ideas."

"This is a safe environment with good communication between staff, and I think we are good at reflective practice."

"The team gets along really well, and decisions are made together, at the right time, and in consultation with the young people."

Additional comments from professionals:

"Throughout my time working with this home, I have seen that staff care about their work and the young people they work with."

"Overall, this home is doing some really good work with young people. They are trying to ensure young people remain as safe as possible and encourage education and time with friends and family."

Is the service caring?

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

Observations of the care delivery by the Regulation Officer were limited, depending on young people being present in the communal areas of the home. What was witnessed, however, was emotionally warm, respectful, and relaxed, with care staff showing genuine interest in young people's wishes and activities, often incorporating humour into interactions. Feedback from care staff and one young person provided testament to this observation.

One young person commented:

I like it here; they are a good staff team. I feel supported to access my education and look for work. I feel I have a voice and have many other people who will advocate for me if necessary. The best thing about this home is the calmness and the routine.

The Regulation Officer observed that young people are experiencing greater choice and control over their care plans and decision-making. This is supported by positive engagement with care staff, a reduction in risk-taking behaviours, and staff actively promoting access to activities that enhance inclusivity, self-esteem, and aspirations. Care staff also participate in activities alongside the young people, further strengthening trusting relationships and demonstrating their commitment to helping young people achieve, build self-confidence, and enjoy positive experiences.

While this home has not adopted a formal trauma-informed model, the Regulation Officer noted considerable therapeutic input from a partner agency that is improving outcomes for young people. Care staff spoke positively about this support and the reassurance it provides them, which enables them to explore the impact of trauma, abuse, and adverse childhood experiences, and consider how to adapt their caring responses to build trust and help young people make better choices. The Regulation Officer also noted a healthy sense of professional curiosity from the Registered Manager and care staff concerning the function of behaviour.

In addition, the Registered Manager reported having previously received training in a trauma recovery model and was able to directly link the care provided to young people with this approach. The Regulation Officer recognised this as an area of good practice; however, it was recommended that the Provider progress the adoption of a trauma-informed model across the wider residential estate.

The Regulation Officer examined the supervision matrix and was satisfied that, in most cases, supervision had followed the standards since the home reopened in May 2025. There was evidence of missed supervisions during July 2025; however, appropriate context was provided, and the Regulation Officer accepted this as a reasonable explanation. This is, therefore, no longer identified as an area for improvement.

The Registered Manager and care staff reported a culture of high support for each other. They recognise when a colleague may be struggling or when relationships with young people can become overwhelming and there is a risk of staff burnout. The Regulation Officer was provided with active examples of this and how they manage such situations to protect staff and maintain appropriate boundaries with young people.

Additional comments from care staff:

“The team take a genuine interest in the young people we care for; we want the best for them, and I can make a difference.”

“I have supported a young person to access activities that help them regulate their emotions and have helped them become open to new ideas.”

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.

The Statement of Purpose for this home was revised to reflect the change in mandatory conditions of this service. This was reviewed as part of this inspection and remains fit for purpose.

Prior to the home reopening in May 2025, following the refurbishment, interim management arrangements had been in place. These arrangements were formalised on 15 August 2025 with the registration of the current manager. This is therefore no longer identified as an area for improvement.

The Registered Manager was clearly inspection-ready, well-organised and confident in their role. Feedback from care staff was positive regarding the Registered Manager, who they deemed approachable, would actively listen and was flexible in their response.

One staff member commented:

The Registered Manager is progressive, has vision, and I have a sense of security under their guidance.

The Regulation Officer conducted a short survey with the staff team, which indicated that care staff overwhelmingly felt supported by their manager. Staff also reported receiving regular supervision, which they found helpful in developing their practice.

The Registered Manager reported strong support from their line manager and senior leaders and felt able to raise concerns when necessary and receive the appropriate response. This culture of openness and transparency was also present within the staff team, who spoke of being free to speak up when needed.

The Registered Manager provided evidence that all staff now have access to a suite of service-specific policies and procedures, available both online and in hard copy. Care staff had also been allocated specific policies to review and provide feedback to the team. The Registered Manager further reported that, through practical application, some policies requiring review had already been identified, including the medication policy. The Regulation Officer was satisfied that this is no longer an area for improvement, recognising that further changes will be made as policies are applied and refined over time.

Training records were reviewed as part of this inspection, and high compliance with both mandatory and supplementary training was demonstrated, which was deemed necessary for the safe operation of the home. Training such as first aid continues to be delivered face-to-face. The Regulation Officer also examined a sample of induction records for care staff and was satisfied that these had been completed in line with the procedure and signed off appropriately.

Additional comments from care staff:

“The Registered Manager is fantastic; they check in with every shift to ensure I am okay and chat about any concerns I may have.”

“The Registered Manager is compassionate, understanding and supportive, recognising when I need a break or talk.”

Additional comments from professionals:

“The manager has worked well in ensuring that staff have the correct training and has worked directly with me following incidents to determine how best to respond to ensure young people's safety.”

IMPROVEMENT PLAN

No areas for improvement were identified during this inspection, so 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.



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