Jersey Care Commission

INSPECTION REPORT

Family Nursing and Home Care
Child and Family Service

Child and Family Community Nursing Service

La Bas Centre
St Saviours Road
St Helier
JE2 4RP

Inspection Dates
22, 24 and 25 September 2025

Date Published
20 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

This is a report of the inspection of Child and Family Services. The Service is operated by Family Nursing and Home Care (FNHC), and there is a Registered Manager in place.

Registration Details	Detail
Regulated Activity	Children and Family Community Nursing Service
Mandatory Conditions of Registration	
Type of care	Nursing
Category of care	Children and young people (0-18)
Maximum number of care hours each week	2250 hours
Age range of care receivers	Pre-birth to 18 years
Discretionary Conditions of Registration	
None	
Additional information	
None	

As part of the inspection process, the Regulation Officer evaluated the service'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 25 days prior. This was to ensure that the Registered Manager would be available during the visits and to schedule observations of several aspects of the service.

Two regulation officers were present for the first visit, and one officer was present for the second and third days. References to who gathered the information during the inspection may change between "the Regulation Officer" and "regulation officers".

The report uses the terms child(ren), young person(s), and parent(s) when referring to people who use the service.

Inspection information	Detail
Dates and times of this inspection	22 September 2025 09:15 – 11:40 and 13:00 – 15:05 24 September 2025 08:35 – 12:00, 12:30 – 16:30 and 17:45 -18:50 25 September 2025 09:30 – 14:00 and 14:10 -17:15
Number of areas for improvement from this inspection	One
Number of care hours on the week of inspection	1866 hours
Date of previous inspection Areas for improvement noted in 2024 Link to the previous inspection report	24, 25 and 29 April and 7 May 2024 None IRFNHCChildandFamilyServices20240507Final.pdf

3.2 Focus for this inspection

This inspection focused on 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

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

4.2 Observations and overall findings from this inspection

Recruitment practices were safe, and induction programmes were comprehensive. Training and education met the requirements, and specialist training was encouraged, supported, and readily available for staff. A robust system was in place for monitoring and ensuring the safety of equipment.

The staff team displayed skill and compassion. Clinics and education sessions offered safe and accessible spaces for advice and support. There was evidence of an effective and responsive approach that advocated for system changes to improve the quality of life for children, young people, and their families. Feedback from parents was consistently positive, praising the staff's knowledge and approach.

Care records evidenced care and support from the point of referral, through different stages of children's and young people's lives, with contact in a variety of environments, including homes, clinics, and schools. The records demonstrated that the staff sought the voices of children and young people.

Professionals external to the service highlighted that staff at all levels worked collaboratively and were committed. The team have achieved accreditation in national programmes.

There is a well-established reporting system and governance structure that enables clear lines of accountability and reflects the size and complexity of the service. A key element of this structure in the complex service is that the Registered Manager directly manages the team leaders and programme leads. Feedback from staff was that they felt supported by the Registered Manager, team leaders and peers.

The Registered Person is required to ensure that personal plans are monitored regularly to ensure that the requirements of the plan are implemented through care provision.

5. INSPECTION PROCESS

5.1 How the inspection was undertaken

The Children and Family Community Nursing Standards were referenced throughout the inspection.[1]

Prior to the inspection, the Commission required the Chief Executive Officer (CEO) to provide an analysis of the services strengths, weaknesses, opportunities and threats (SWOT). This was submitted to the Commission on 25 July 2025. Following the submission, the information was reviewed, and on the 20 August 2025, two regulation officers undertook an annual conversation with the CEO and Director of Governance and Care. The discussion focused on the SWOT analysis.

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

The Regulation Officer gathered feedback from 12 parents. They also had discussions with the service's management and other staff. Additionally, feedback was provided by five professionals external to the service.

Observation was a key aspect of this inspection. The delivery of care and support was observed during home visits, clinics, and education sessions. As part of the inspection process, documents, including policies and procedures, care and training records, and equipment logs, were examined.

At the conclusion of the inspection, the Regulation Officer provided verbal feedback to the Registered Manager and followed up with written feedback on 8 October 2025.

This report sets out our findings and includes any 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.

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

5.2 Sources of evidence.

New key lines of enquiry	
Focus	**Evidence Reviewed**
Is the service safe	Reviewing staff files including recruitment and induction documentation. Reviewing training records. Reviewing equipment service records. Discussions with the Registered Manager and staff.
Is the service effective and responsive	Feedback from parents and professionals external to the service. Review of a case study. Observation at: • A new-birth home visit with a health visitor • Children's Community Nursing Team home visits. • A professional meeting.
Is the service caring	Reviewing care records. Observations at: • Breastfeeding Buddies clinic. • Baby Steps session. • Child Health clinic. • A school nurse session. Feedback from parents and professionals external to the service. Discussions with the Registered Manager and staff.
Is the service well-led	Examination of the SWOT analysis submitted to the Commission. Discussions with the Chief Executive Officer and Director of Governance and Care during the annual conversation. Discussions with the Registered Manager and staff. Reviewing policies and procedures. Reviewing monthly provider reports.

6. INSPECTION FINDINGS

Is the service safe?

People are protected from abuse and avoidable harm.

Recruitment practices were reviewed. There was evidence of completed application forms and curriculum vitae. Interviews were conducted by three staff in managerial, clinical and human resource roles. Questions were value and competency based. There was evidence that the assessment criteria aligned with job descriptions, with categories including:

- Professional input
- Team management, building and working
- Education, training and development
- Clinical, audit and research, knowledge and experience

A scoring system was used, although at times it was unclear which record related to which interviewer.

Enhanced Disclosure and Barring Service certificates and references that had been gained prior to the staff commencing their role were evidenced. There were also copies of the staff's professional qualifications, photo identification, and social security registration cards.

There was evidence of induction programmes. The induction booklet outlined the training required during the induction period. It was appropriate that this differed regarding whether staff were non-clinical or clinical with or without a professional registration. There were probation reviews at appropriate intervals during and at the end of 24 weeks.

These programmes were comprehensive and had been devised with input from human resources, education and development, child and family departments within FNHC. The Regulation Officer received positive feedback from newly recruited staff who explained that the recruitment and induction processes were transparent and that they had felt welcomed and supported by managers and peers.

The Regulation Officer concluded that the recruitment and induction processes were thorough, supportive and demonstrated collaborative working across the organisation. The processes met Standards. Advice was given to ensure the author of each interview record was clearly stated.

Regulation officers met with staff from the Education and Development department to review adherence to the Standards mandatory training requirements. Records demonstrated that the Standards were met. The department had produced a Child and Family Service prospectus, which details how training is delivered, online or face-to-face, and how frequently updates are required. The prospectus highlights the role-specific training the organisation requires, and there was evidence that staff had carried out a wide range of specialist training. Three staff are presently undertaking the Specialist Community Public Health Nurse programme. Staff reported that they were encouraged and supported in their learning and professional development.

Documents relating to recruitment, induction and training were held in paper and electronic formats, as the service is transitioning to an electronic platform. This resulted in some challenges in accessing information for the inspection. However, all documents required were made available and the regulation officers were satisfied compliance was maintained.

Regulation officers met with the Facilities and Premises Manager to review equipment management. A comprehensive register detailed when each item had been serviced and the next scheduled service. The list included items such as, baby breathing monitors and weighing scales. Records showed that, by May 2025, 83% of required services had been completed, with the manager confident that the remaining 17% were on track for completion within the required timeframes; this was for the whole organisation.

The was also a record of the items each staff member had, which included the items serial number and the date it was issued to them. Replacement schedules and associated costs had been established, enabling accurate budgeting. Overall, the evidence demonstrated a robust system for monitoring and ensuring the safety of equipment.

Is the service effective and responsive?

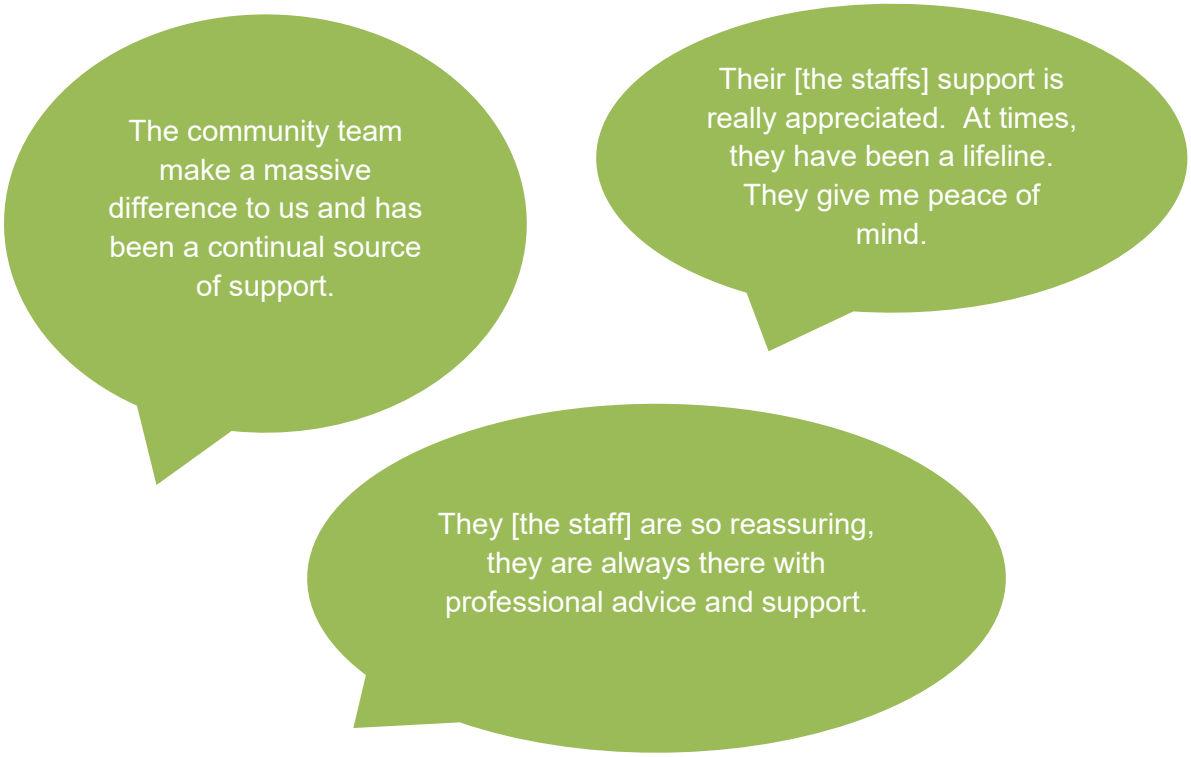
Care, treatment, and support achieves good outcomes, promotes a good quality of life and is based on the best available evidence.

The Regulation Officer saw evidence of an effective and responsive approach in a case study compiled by a nurse in the Children's Community Nursing Team (CCNT). The study details the life of a child with a life-limiting illness and their family. It references best practice guidance and includes a testimony from a parent and staff in two community groups. It describes how life-limiting illnesses or life-threatening conditions impact the lives of children, young people and their families. The study sought to influence change in how families apply for financial support. The case study states, "*With change, we can enhance and facilitate that this vulnerable group of children and their families have a better quality of life."* It has resulted in a bespoke approach to the application process.

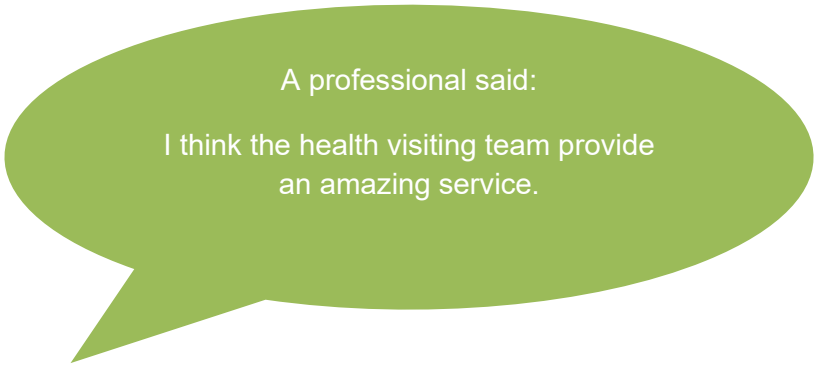
During the inspection, the Regulation Officer saw evidence of this approach when they attended a meeting with two registered nurses from the CCNT and a representative from an external agency. During the meeting, the nurses described the child's health conditions and the impact these conditions were having on the child and their family. They demonstrated detailed knowledge of the child's diagnosis, symptoms, the care and support required, as well as the emotional, social, and financial impacts. Their approach was compassionate, and they possessed a detailed knowledge of local and national health and social care services, which enabled them to advocate effectively for support for the child and family.

The work of the staff was celebrated in feedback from parents, whom the team had supported.

Parents said:



The Regulation Officer observed staff interactions during a new birth visit with a health visitor and two home visits with nurses from the CCNT. Staff demonstrated advanced communication skills, were respectful, and worked at the pace of the families, offering guidance, emotional, and practical support, as well as referring them to other services and signposting to resources. This further evidenced a skilled, compassionate, and responsive team.



The Regulation Officer also received feedback from professionals external to the FNHC, which related to staff in all areas of the Child and Family Service.

Professionals explained they had received feedback that the team had a positive impact on the lives of the people they support. This was emphasised in relation to the team's implementation of a health review for children aged 3 years following positive findings from the pilot report.

It was highlighted that the staff worked collaboratively, with an example of how the team worked with one service to increase referrals to the service. Also, regular ongoing joint working to ensure that infant feeding standards were met and that all staff worked in line with the UNICEF Baby Friendly Initiative. The service has achieved stage 3 UNICEF Baby Friendly Initiative accreditation. Staff were described as *"professional, caring, kind and courteous."*

Further quotes from professionals are detailed at the end of the report.

Is the service caring?

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

Regulation officers observed practices during Child Health and Breastfeeding Buddies clinics, which were held concurrently. The Child Health Clinic is delivered by a health visitor and a nursery nurse and is a 'drop-in' service. Breastfeeding Buddies, led by a specialist breastfeeding health visitor, require appointments to ensure availability. Clinics are held in four different locations, which promotes accessibility. The environment struck a balance between calmness and vibrancy.

From the regulation officers' observations and feedback from parents who attend the clinic, it was found that attending the session gives access to assessments by a skilled professional. These professionals listened actively and empathically to parents' experiences and offered encouragement, practical guidance and signposted to helpful resources.

About the sessions, parents said:

"It is really supportive."

"Useful to attend ahead of the 6-week check."

"Organised and helpful."

"I usually come monthly."

"I have been very impressed."

The Regulation Officer attended a Baby Steps session which was facilitated by a midwife and a baby steps facilitator. Staff explained that it is an educational programme for expectant parents to help them develop skills, knowledge, and friendships in preparation for the arrival of their child(ren). The programme is designed and licenced by the National Society for the Prevention of Cruelty to Children (NSPCC). The programme is accessible to parents as they can self-refer, it is free and held in three different locations.

The session's focus was bathing babies, and the nursery nurse demonstrated a bathing technique with a doll. Staff were clear in their explanations, referred to research and answered questions in a warm and approachable manner. The Regulation Officer's view was that this fostered a supportive learning environment.

Feedback is gathered via a quick access (QR) code. Staff explained that although it is a national programme, they were able to make an adjustment in response to the feedback they had received. The Regulation Officer received positive feedback from two parents who had previously undertaken the programme. When asked if the programme been helpful, a parent said:

Yes massively. We were shocked as it was free.
It got rid of myths and put a realist point of view.
We learnt a lot.

The Regulation Officer reviewed care records relating to practices they had observed. Records evidenced the care and support from the point of referral, through different stages of children's and young people's lives. Contact had occurred in a variety of environments, including homes, clinics, and schools.

The reason for the contact and who was present were recorded. Health assessments were detailed and holistic, and recorded any examinations undertaken. Specialist assessment and evaluation tools were utilised, and links to developmental milestones were documented. The voices of children and young people were evident throughout the records.

The care plans and the process of reviewing them was discussed with the staff. There was evidence of comprehensive and regularly reviewed plans. Feedback from a parent who the team supports, was that plans of care were developed and reviewed with them. Outcomes from assessments were recorded, and in the majority of cases, plans were outlined and followed up on.

The Regulation Officer discussed with the Registered Manager concerns that one care record lacked clear follow-up and another had not had its follow-up plan acted upon, with neither issue being addressed in subsequent records. The Registered Manager agreed with these findings. While the Regulation Officer was satisfied that the matters had since been addressed, regular monitoring of personal plans to ensure care is delivered as planned is an area for improvement.

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.

From the SWOT analysis, the annual conversation, discussions with managers and staff, and the service's Statement of Purpose, the Regulation Officer was satisfied that the organisational structure enables clear lines of accountability and reflects the size and complexity of the service.

A key element of this structure is that the Registered Manager directly managers each team and programme lead, which results in clear oversight of this complex service.

The Regulation Officer spoke with over 18 staff. Feedback was consistently positive regarding support from the Registered Manager, team leaders and peers. Staff gave examples of when safeguarding issues had been escalated. A transparent process, prompt supportive responses for managers and colleagues, and reflection and learning were described. There was evidence that staff supervision met Standards.

The services Statement of Purpose was reviewed with the Registered Manager. It was agreed that some amendments were required to reflect the service conditions of registration and service delivery. The Registered Manager responded promptly, amending and submitting the document during the inspection period.

The Registered Manager explained that recruiting four health visitors has had a positive impact on service delivery and reduced staff pressure. A team leader for the health visiting team has been recruited and when they commence the role there will be no vacancies within the health visiting team.

During a previous period of low staffing levels a duty health visitor role, was developed to respond to calls, triage all new referrals and allocate workload. This will continue when there is a full complement of staff, as it has been supportive to families and staff. The Regulation Officer received feedback from parents and staff that the system is supportive. As a result of the positive impact, the duty role is also being developed within the school nursing team.

The Provider has a suite of policies and procedures, as well as specialist team-specific procedures. These are reviewed every three years, and the documents reviewed by the Regulation Officer met this timeframe.

The monthly provider reports reviewed covered topics such as the number of referrals into each team within the service, any feedback or complaints, staffing levels, staff adherence to training, health and safety issues, and incidents reported. Actions from the previous month's report are reviewed. The reporting feeds into FNHC's well-established and clear governance structure.

What professional external to the service said:

The team comprises highly skilled and knowledgeable professionals who are well supported by leaders and managers. They demonstrate a willingness to learn and work in partnership.

[There is a] willingness to proactively and creatively act to best meet the needs of families they are supporting.

I have found this team to be well managed and responsive as they continue to reflect professionally on their service. Through the examples shared of the collaborative work we are engaged with; I know that the approach to self-evaluation and continuous cycle of improvement is embedded in their day-to-day practice.

IMPROVEMENT PLAN

There was an area for improvement identified during this inspection. The table below is the Registered Provider's response to the inspection findings.

Area for Improvement 1 **Ref:** Standard 5.4 Regulation 9 **To be completed:** by 18/12/2025	The Registered Person must ensure that personal plans are monitored regularly to ensure that the requirements of the plan are implemented through care provision.
	Response by the Registered Provider: Plan in response to the recommendation: FNHC C&F services (all teams) will complete record keeping audit, quarterly. This will be all teams and include an audit question regarding planning of care.

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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