



**Jersey Care  
Commission**

## **Summary Report**

**05 Children's Home**

**Children's Home Service**

**Government of Jersey  
Union Street  
Jersey  
JE2 3DN**

**Inspection Dates  
15 September & 2 October 2025**

**Date Published  
11 December 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.

### 4.1 Progress against areas for improvement identified at the last inspection

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

The improvement plan was discussed during this inspection, and it was positive to note that all the improvements had been made. This means there was evidence of the service undertaking regular fire alarm checks and fire drills. Records were available to demonstrate that these were completed in accordance with requirements.

The organisation has also introduced a system for maintaining policies and procedures accessible through an online database. The Regulation Officer was provided access during the inspection and confirmed that the policies reviewed were current and relevant to the service.

### 4.2 Observations and overall findings from this inspection

The home's inspection highlighted a well-organised, child-centred approach to residential care, supported by strong leadership and a committed staff team. Recruitment is managed centrally, and job descriptions for Residential Child Care Officers and Senior Officers were found to align with the Jersey Care Commission Children's Home Standards. Staff continuity has contributed to a consistent and informed approach to supporting young people.

Induction processes are comprehensive, including corporate and home-specific elements. These ensure staff familiarity with routines, policies, and the environment.

Rotas demonstrated consistent coverage and equitable shift distribution. While six of the 13 staff held relevant Regulations Qualification framework (RQF) qualifications, one additional member was actively working towards a qualification, showing progress toward meeting the required threshold.

Training compliance was generally good, although gaps were identified in mandatory areas such as health and safety, moving and handling, and mental health. This was noted as an area for improvement.

Care planning is person-centred and informed by professional assessments. Monthly reviews of residential personal plans incorporate young people's views, and creative approaches are used to meet individual needs. A scoring risk assessment framework supports safe and consistent care delivery.

The Children's Guide was child-friendly and aligned with Standard 1.4. Recommendations were made to enhance the guide by including a signature section, a summary of rights and responsibilities, and alternative formats for accessibility.

The home promotes wellbeing through trauma-informed care, therapeutic training, and structured routines. Children are encouraged to participate in decision-making, express their views via meetings and digital platforms, and access independent advocacy. Recreational and social activities support inclusion and skill development.

Safeguarding is prioritised, with staff trained in child protection, and risk assessments regularly reviewed. Multi-agency collaboration ensures timely responses to concerns. Health and education are supported through nutritious meals, routine appointments, and tailored interventions.

Leadership was effective, with clear organisational structures and governance systems in place. Documentation confirmed oversight of care through statutory and internal plans. Staff supervision is regular and valued, despite occasional challenges during high occupancy.

Staff described the home as a homely, supportive environment with strong teamwork. During the inspection there was positive feedback from young people. The home provided evidence that it was responsive, child-centred, and well-led, with no immediate areas for improvement identified.

## IMPROVEMENT PLAN

There were one area 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 3.10 Regulation 17</p> <p><b>To be completed:</b> by 28/02/2026</p>	<p>The Registered Manager should ensure that all statutory and mandatory training requirements are clearly identified, scheduled, and completed by staff promptly. Systems should be in place to monitor and record staff compliance with these requirements.</p> <p><b>Response by the Registered Provider:</b></p> <p>Since the inspection I have confirmed mandatory training requirements with the Training and Development team and ensured that all team members have now completed the required training.</p>
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The full report can be accessed from [here](#).