



**Jersey Care  
Commission**

## **Summary Report**

**Child and Adolescent Mental Health  
Service (CAMHS)**

**Liberte House  
19-23 La Motte Street  
St Helier  
JE2 4SY**

**Inspection Dates  
13 and 14 November 2025**

**Date Published  
17 February 2026**

## 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**

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

The improvement plan was discussed during this inspection, and it was positive to note that:

- Overall, there were positive responses within the parent/carer and young people's surveys and feedback sessions, indicating that they have been involved in developing a care plan, and had received a copy of this. However, the team have not completed an audit of care plans being shared with families, as agreed in last year's area for improvement response. Therefore, this area for improvement remains.
- The team have worked exceptionally hard to advocate for the shared prescribing of controlled medication. This change requires support from the legal system and from general practitioners (GPs) which has been unsuccessful and has not been secured. The service reported they are pursuing this operationally in collaboration with the Chief Pharmacist and the Director of Mental Health and Adult Social Care, in order to reduce the clinical burden on prescribers within the team and enhance accessibility for children and young people who receive prescriptions through CAMHS. This work is ongoing and continues to present challenges and therefore remains an area for improvement.

## **4.2 Observations and overall findings from this inspection**

The Inspection Team noted significant environmental improvements since the last inspection, including enhanced clinic space and the introduction of a staff board. It was also positive to hear that these improvements will be carried forward to the new site.

The Inspection Team also observed significant progress in policies that have been developed. It is encouraging to note that improvements are made year on year, with a number of high-quality policies now in place for the CAMHS service.

The 'You Said, We Did' board in reception is updated regularly and is a great way to feedback changes to young people and their parents/carers. In addition, the Government of Jersey Complaints Policy is well-designed and child friendly, and the accompanying video is highly effective.

Frontline staff reported feeling well supported, describing an open, inclusive, and positive culture within CAMHS, with no perceived power imbalances.

Partner agencies praised the expanded out-of-hours provision for significantly improving timely support for young people experiencing crisis.

There were gaps in staff training compliance across several areas, including Basic life support (BLS), Safeguarding, and physical health assessments, this is an area for improvement.

The Assessment and Crisis team also has gaps in completing annual appraisals, particularly for long-term agency staff, and clinical supervision is not consistently provided on a monthly basis. This is an area for improvement.

## IMPROVEMENT PLAN

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

<b>Area for Improvement 1</b>  <b>Ref:</b> Standard 5.1.2 Regulation 5  <b>To be completed:</b> by 14 May 2026	Continue to ensure that young people and their families are actively involved in co-producing their care plans. Ensure that copies of care plans are consistently provided to young people. A programme of regular audits should be established to maintain consistency and evidence compliance.
	<b>Response by Registered Provider:</b>  In accordance with our current practice CAMHS will continue to ensure that care plans are provided to young people and their families.  Oversight of care plans is already in place. CAMHS will ensure that future, audit activity is improved and compiled into an audit summary.

<p><b>Area for Improvement 2</b></p> <p><b>Ref:</b> Standard 5.2.2 Regulation 14, 15</p> <p><b>To be completed:</b> by 14 November 2026</p>	<p>The provider and CAMHS should continue to work collaboratively with the Government of Jersey to progress improvements in prescribing of controlled medication. This will help enhance accessibility for children and young people who receive prescriptions through CAMHS.</p>
	<p><b>Response by Registered Provider:</b></p> <p>CAMHS will continue to work collaboratively to ensure effective prescribing within best practice guidelines, recognising that prescribing practice is limited by clear rules and guidance on the prescribing of controlled medication.</p>

<p><b>Area for Improvement 3</b></p> <p><b>Ref:</b> Standard 10.3 Regulation 17</p> <p><b>To be completed:</b> by 14 May 2026</p>	<p>The provider must strengthen compliance with staff appraisal and supervision processes to ensure that all staff receive regular, recorded oversight that supports professional development, accountability, and safe, effective practice.</p>
	<p><b>Response by the Registered Provider:</b></p> <p>CAMHS has a 100% compliance with substantive employees' appraisals as monitored on the connect system at a Department and Government level.</p> <p>Going forward CAMHS will ensure to have better oversight of agency appraisals and build this into their regular supervision.</p>

<p><b>Area for Improvement 4</b></p> <p><b>Ref:</b> Standard 10.5</p> <p>Regulation 17</p> <p><b>To be completed:</b> by 14 May 2026</p>	<p>The service must ensure all staff receive role-appropriate training, completed during induction and maintained through ongoing continuing professional development. This is essential to support safe, effective practice and to ensure staff remain competent in their roles.</p>
	<p><b>Response by the Registered Provider:</b></p> <p>CAMHS already has excellent compliance with the Government of Jersey statutory and mandatory training for staff.</p> <p>What is not clear is what training the JCC requires CAMHS to have in place to meet professional standards.</p> <p>We request a meeting with the JCC to identify priority areas for training, as the level of training expected is vast and impact clinical delivery. There thus needs to be a sensible balance found to this area.</p>

The full report can be accessed from [here](#)