



**Jersey Care
Commission**

INSPECTION REPORT

Centrepont at Home and More

Home Care Service

**Le Hurel
La Pouquelaye
St Helier
JE2 3FU**

**Inspection Dates
11 & 13 March 2026**

**Date Published
17 April 2026**

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 Centrepont at Home and More. The home care service is operated by Centrepont Trust and there is a registered manager in place.

Registration Details	Detail
Type of regulated activity	Home Care Service
Mandatory Conditions of Registration	
Category of care	Children and young people
Maximum number of care hours each week	60
Age range of care receivers	0-15 years old
Discretionary Conditions of Registration	
The Registered Manager must complete a Level 5 Diploma in Leadership in Health and Social Care by 18 August 2028.	
Additional information	
A new Registered Manager has been appointed since the last inspection. A pre-inspection visit was conducted 5 February 2026 with the People Service's Manager to review staff files.	

As part of the inspection process, the Regulation Officer evaluated the service's compliance with the mandatory conditions of registration and the discretionary condition required under the Law. The Regulation Officer found the service to be compliant with both.

3. ABOUT THE INSPECTION

3.1 Inspection Details

This inspection was announced and notice of the inspection visit was given to the Registered Manager two days prior to the first inspection visit. This was to ensure that the Registered Manager would be available during the visit.

Throughout this report staff will be referred to as support workers and people accessing the service will be referred to as child/children.

Inspection information	Detail
Dates and times of this inspection	11 March 2026, 09:30-12:35 13 March 2026, 11:00-17:06
Number of areas for improvement from this inspection	Three
Number of care receivers accommodated on the day of the inspection	Two
Number of care hours on the week of inspection	41
Date of previous inspection	14 February 2025
Areas for improvement noted at the last inspection	Three
Link to the previous inspection report	RPT_CTPHC_Inpection_20250214.pdf

3.2 Focus for this inspection

This inspection included a focus on the areas for improvement identified at the previous inspection, as well as these specific 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, three 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 all improvements had been made. This means that there was evidence of:

- Safe recruitment practices
- Completion of statutory and mandatory training
- Annual appraisals and regular staff supervision conducted

4.2 Observations and overall findings from this inspection

The service continues to deliver child-centred care within a nurturing, safe, and responsive environment and the Regulation Officer found the skilled staff team to be dedicated, caring and child-focused.



A support worker shared:

The Registered Manager and team are very supportive. We are a really close-knit team.

Support workers demonstrate a strong understanding of each child's needs, preferences, and communication styles and were observed to be kind, compassionate and professional.

Activities are thoughtfully planned to promote social development, independence, confidence, and enjoyment, with children supported to make choices about how they spend their time.

The Registered Manager is well regarded by staff, families, and professionals, who described their leadership as approachable, supportive, and effective. Communication across the team is strong.

Staff files, induction processes, and recruitment records were well maintained.

Three areas for improvement were identified. All staff are to attend level three training in the management and administration of medication, a policy is to be written describing the procedure for the safe handling of money and systems are to be introduced to monitor, audit and review the quality of the care within the service.



5. INSPECTION PROCESS

5.1 How the inspection was undertaken

The Home Care and Support in the Community Standards were referenced throughout the inspection.¹

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

The Regulation Officer gathered feedback from two children and three of their representatives. They also had discussions with the service's management and other staff. Additionally, feedback was provided by three professionals external to the service.

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

At the conclusion of the inspection visit, the Regulation Officer provided verbal feedback to the Registered Manager and confirmed the identified areas for improvement by email on 16 March 2026. Details of the follow-up actions required to evidence that improvements have been made were also set out by the Regulation Officer.

This report presents our findings from the inspection and outlines the range of observations made. Throughout the report, we may highlight any areas of good practice identified, along with suggestions where practice could be strengthened or further enhanced. Where specific improvements are required, these are set out in detail and accompanied by a defined improvement plan 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.

Follow up on previous areas for improvement	
Focus	Evidence Reviewed
Safe recruitment	Staff files for current recruitment
Formal supervision and appraisals	Documented evidence of supervision and appraisals conducted
Statutory and mandatory training	Training database Staff feedback
Key lines of enquiry	
Focus	Evidence Reviewed
Is the service safe	Induction records Policies Training matrix Staff feedback Risk assessments Monthly provider reports Daily logs Written agreements Health and safety records
Is the service effective and responsive	Statement of purpose Staff feedback Family feedback Professional feedback Monthly provider reports Complaint process Minutes of staff meetings
Is the service caring	Staff wellbeing Family feedback Monthly provider reports
Is the service well-led	Employee handbook Training database Policies Job descriptions

6. INSPECTION FINDINGS

Is the service safe?

People are protected from abuse and avoidable harm.

A key focus of this year's inspection is the safe recruitment of staff. It is positive to note that two bank support worker positions have recently been offered following a thorough recruitment process to provide cover during staff absences, such as annual leave. It was also reassuring that one new bank support worker did not begin work on the proposed start date, as both their references had not been received. The contract held on file will be amended to reflect the revised start date.

Three staff recruitment files were reviewed. The People's Manager demonstrated good processes in place to monitor recruitment and onboarding processes.

Copies of original Disclosure and Barring Service (DBS) certificates are stored electronically, and a database is maintained to monitor renewal dates. Staff are enrolled on the update service, and there is evidence that annual checks are completed.

As part of the safe recruitment process it was recommended the Registered Manager review the received references themselves and have sight of the original DBS certificate as they have overall accountability for compliance with the Standards.

Of the two recent interviews, one was conducted solely by the Registered Manager. However, they consulted with the People's Manager regarding the candidate's suitability before making an offer. The service's recruitment policy states that it is preferable to have three interviewers on the panel, and the Registered Manager confirmed that it is usual practice to have at least two panel members.

Staff contracts have been reviewed and amended since the last inspection, and evidence of newly signed contracts reflecting revised weekly working hours was found in staff files.

The Registered Manager's contracted hours have been reduced, along with the requirement to work across two services during school holidays. During the inspection, the Registered Manager acknowledged the need to plan their workload carefully to ensure that all responsibilities, including staff supervision, continue to be met.

As a result of the reduced hours, the Registered Manager has adopted a flexible approach to attending meetings concerning the children. When they are unable to attend, written feedback is provided in advance. One professional reported that the staff team attend meetings and are, "*Professional, approachable and friendly.*"

Support workers employed by the service hold additional roles within and outside of the organisation. It is the Registered Manager's responsibility to ensure that staff do not work more than 48 hours per week, except in exceptional circumstances. It became evident that one support worker routinely exceeds this limit, and both the individual and the Registered Manager were asked to address the matter. The Regulation Officer has taken a proportionate approach and has not identified safe working hours as an area for improvement at this time; however, there is a clear expectation that this issue will be resolved.

The service operates a fixed rolling rota, and due to current vacancies within the packages of care offered, staff absences are able to be covered by the Registered Manager. A parent confirmed that sessions have never been cancelled and that any required adjustments to timings are communicated in advance. The consistency of the rota provides children with continuity of carer, which parents reported they value.

Some children require a two-to-one staffing ratio, and staff in these situations complement each other's skills effectively. One parent shared that staff have a very good rapport with their child and that their child appears to enjoy their time with them.

The staff training matrix was reviewed, and additional training needs for support workers were identified. Specialist training in autism is recommended for all staff, and staff are to be enrolled on Level 3 medication training.

Although support workers rarely administer medication, doing so without appropriate training and a competency assessment is a breach of the Standards. Whilst it was positive to see a copy of the prescription and parental permission for medication administration during the inspection, medication must not be administered until staff have received training in the safe management and administration of medication and have been assessed as competent. Training in the safe management of and administration of medication is an area for improvement.

Support workers who have previously completed Makaton training described it as highly beneficial for themselves and for children who are non-verbal. They felt it would be valuable for colleagues to have the opportunity to attend this training and for refresher sessions to be offered.

It is recommended that a column be added to the training matrix to record when training has been booked.

An induction record was reviewed and had been signed off as complete by the Registered Manager. It is recommended that induction documentation includes a staff development plan and, where no development needs are identified, that this is clearly recorded. It was explained that during a support workers induction, they shadow a colleague to become familiar with the children and their families. Once they feel confident to work independently, and the Registered Manager is satisfied with their competence, they may be allocated as a child's keyworker.

One support worker who transferred from another service within the Trust confirmed they received an induction specific to the home care service. They reported familiarising themselves with relevant policies, care plans, and risk assessments, as well as shadowing the Registered Manager and colleagues to get to know the children and their families.

It was evident that the staff team understand how to report incidents and follow the escalation process. One incident form was reviewed and was completed to a good standard, with a copy retained in the child's file. It was signed by both staff members involved, and the Registered Manager had provided oversight.

Parents are informed of any incident either during handover or, where necessary, at the time it occurs.

A staff debrief is carried out following each incident, and any need for additional support is identified. The Regulation Officer was informed that reflection and learning from incidents are shared at team meetings, and this was confirmed in the staff meeting minutes.

A mobile phone application (App) has recently been introduced for support workers to record their start and finish times. The App will continue to be developed to meet the needs of the home care service, and it is anticipated that it will also include digital accident forms that can be sent directly to parents, replacing the current paper forms that require a parental signature to confirm they have been informed of an accident.

Parents shared that the Registered Manager and support workers are responsive to communication via email, a family WhatsApp group and by telephone.



Feedback from a parent - The Registered Manager is accessible and communicates well. *"Xxx is an amazing manager! They are incredible and understands completely."*

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 philosophy of the service, as outlined in the Statement of Purpose (SoP), was evident throughout the inspection. Children receive care and support that enables them to enjoy a healthy and happy life and to access the same or similar opportunities as other children, in a safe manner.

Referrals to the service are made by a social worker, and the Registered Manager outlined how they assess the child's safety and needs, alongside the skills of the support workers, to determine whether the service can appropriately meet each child's complex needs.

A notable area of good practice was observed when the Registered Manager sought the views of the staff team to determine whether they felt confident and competent to take on a complex care package. Following careful consideration and discussion, the Registered Manager appropriately declined the package. The Regulation Officer received assurance that, where necessary, staff receive training in additional skills or delegated tasks before commencing a new care package. The service currently has no delegated tasks in place.

Care packages are developed collaboratively between the social worker, parents, and the Registered Manager, and are continually reviewed in conjunction with the child's key worker. Parents reported being informed at the initial meeting with the Registered Manager about what the service could offer and described feeling involved in creating a child-centred, individualised care plan tailored to their child's needs.



A parent shared - The initial meeting was very informative and welcoming. I was provided with clear information about the service and felt fully involved in developing the care plan, including my child's preferences, likes, and dislikes.

The care plans include information on mobility, speech and language needs, and the measures required to keep each child safe while promoting independence and wellbeing.

At the start of each care package, a comprehensive risk assessment of the home and its surrounding environment is completed, including fire safety considerations. Personalised risk assessments also address all aspects of transport safety, such as the need for a seatbelt lock or two-to-one support to ensure the safety of both the child and staff during car journeys. The Regulation Officer reviewed a completed transport risk assessment which outlined the actions to be taken should a child become dysregulated while travelling. The child's keyworker demonstrated a strong understanding of the child's needs and preferences, including the use of their favourite calming music to help maintain a settled environment. Risk assessments are reviewed at least every six months.

The development of children's social skills is reflected in the care plans. One parent shared that, due to their child's complex needs, they are often isolated from activities and opportunities for social interaction, and described their child as being "*less isolated than in the little circle we have*" when accessing the service.

Support workers often meet with one another and the children they support to take part in activities. This helps promote social skills, motor development, and speech and language progress. There is a strong focus on fostering self-esteem and building on each child's strengths. The value of learning through play is well understood, and positive affirmations, gentle guidance, and distraction techniques observed by the Regulation Officer. Activities are planned in line with each child's preferences and include a wide range of options such as swimming, soft play, water play, visits to outdoor play areas, and trips to attractions such as the zoo.

For children who are non-verbal, communication methods include sign language, gestures, and at times visual cards depicting emotions or objects. The Regulation Officer was informed that the use of cards depends on the child's engagement, and team meeting minutes showed a decision to discontinue their use for one child when they were found to be ineffective.

Observed communication also involved using physical objects such as offering a drink to establish whether a child was thirsty and gently guiding children by the arm when needed. Children also communicated their needs through their actions, such as leaving the table when they had finished their snack.

During the inspection, an example of promoted independence was observed when a child was supported to purchase their own snack using money provided by their parent. At the time, there was no policy for the safe handling and storage of money by the staff. The Registered Manager was referred to the Standards and took immediate action to address this, providing evidence of improvement during the second inspection visit. The prompt communication to staff regarding the new system reflects a positive commitment to improvement and effective information sharing.

Photographs of activities, taken with parental consent, are shared with parents and parents reported that they value receiving these photographs. Observations from these sessions are recorded in the daily logs and include the child's mood, behaviour, food consumed and progress in developing independence.

Verbal feedback is also provided at handover and includes information about the child's emotional and physical wellbeing and any accidents or incidents.

Since the last inspection, the use of paper records kept in support workers' cars has been reduced, and daily logs are now returned to the office the following working day for filing. The Registered Manager completes and securely stores all required documentation.

Is the service caring?

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

The staff team are suitably skilled for their roles and were observed to work well together, ensuring that children remained safe and were supported to enjoy their activities. Support workers were consistently kind, caring, and compassionate and feedback shared by a professional on behalf of families stated, *"Staff are kind, warm and effective. They build good relationships with children and families and become an important part of the family's support network and resource."*

Support workers demonstrated a strong understanding of the children in their care, including their preferences, behavioural plans, and individual comfort needs such as how a child prefers to be cuddled when in pain, as well as what makes them happy, and their full range of daily living and personal care requirements.

It is evident that the staff team are committed to meeting the needs of the children and promoting their independence. In one staff appraisal, a support worker highlighted the importance of encouraging a child to brush their own teeth and hair, get dressed independently, and providing support only when needed.

One parent reported that the focus on improving their child's mobility and speech and language has resulted in their child becoming more active and verbalising additional words. The Regulation Officer observed support workers skilfully encouraging children to communicate verbally and through sign language. Staff were also adept at interpreting non-verbal communication and responding appropriately.

Children are supported to make choices about the activities they wish to engage in, and staff emphasised the importance of preserving dignity during tasks such as getting dressed after swimming. Where a child indicates that they are no longer enjoying an activity, an alternative is offered.

One parent shared that the support workers *"Encourage Xxx to make choices and give Xxx the time to respond. They are so lovely!"*

An example of thoughtful practice was described where, if a child attends a session on their birthday, a small celebration such as a cake and an opportunity to have fun and play with other children is organised. This reflects the kindness and child-centred approach of the staff team.

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 Registered Manager acknowledged that quality assurance processes, including spot checks and audits of service delivery, require further development. They expressed a desire to introduce formal spot checks to recognise good practice and identify where additional support or training may be needed. However, they noted that planned spot checks are challenging to implement as they provide personal care themselves and are not supernumerary. When staff meet during activities, the Registered Manager has opportunities to observe practice informally. The Regulation Officer recommends that formal spot checks are introduced for quality assurance purposes.

Most of the monthly provider reports reviewed had been completed by the Registered Manager. As the Registered Manager and the Provider are not the same person, the Trust is to identify an alternative individual to complete these reports, using available evidence to provide an objective assessment.

While actions and outcomes relating to staffing and policies were recorded within the monthly provider reports, no evidence was provided in the quality-assurance section.

The introduction of spot checks will provide evidence that quality assurance is monitored and Standards are being met.

Positive feedback from an external health professional and from families was included in the monthly provider reports, and plans to circulate a staff feedback form were noted.

Since the last inspection, the service has sought feedback from families. Although the response rate was low, the feedback received was positive, highlighting excellent communication, good levels of support, and that the “*Carers are great!*”, while also expressing a desire for additional hours during school holidays.

Family feedback gathered by the Regulation Officer highlighted that two families find sessions more tiring for their children since the length of each session increased by one hour and the number of weekly sessions reduced from three to two. Another parent commented, “*The three-hour sessions are working well for us, and they provide a good balance of support and routine.*” The Registered Manager explained that these changes were made by the commissioning organisation and confirmed they will share this feedback with them at their regular meetings. This reflects the Registered Manager’s willingness to advocate on behalf of the children and their families.

Since the last inspection, the Registered Manager has introduced a newsletter for families to keep them informed about the service and to share important messages, such as sun-safety guidance. The Trust also produces a newsletter to update staff on new initiatives and wellbeing events. A recent edition highlighted that several staff across the organisation have trained as mental health first aiders. One support worker was aware of this development, demonstrating effective communication within the service. Optional wellbeing initiatives for staff include yoga and meditation sessions.

Staff reported that last year’s inspection report had not been shared with them by the previous Registered Manager. The Regulation Officer advised that the report is available on the Commission’s website and asked the Registered Manager to share the findings with the team so they can celebrate their achievements and contribute to addressing the two areas for improvement.

Between the two inspection days, the staff team were informed of the areas for improvement, demonstrating effective communication.

Weekly team meetings are held to support effective communication and the sharing of important information. Following feedback from support workers, these meetings have recently moved online, allowing more time for meaningful discussion within the short meeting format. Minutes reviewed included discussion on behaviour-management strategies and opportunities for reflection on outcomes.

It is positive that annual staff appraisals and regular supervision sessions are undertaken. Support workers are given opportunities to reflect on their strengths and identify their development needs. Documentation reviewed demonstrated that the team understand their safeguarding responsibilities and the processes for escalating concerns. There was also evidence of the Registered Manager providing positive feedback in recognition of a support worker's dedication and commitment to developing their practice, competence, and confidence.

Since the last inspection, new policies have been introduced, including the procedure to follow in the unexpected absence of the manager. A record signed by staff confirming they have read and understood the policy is held by the Registered Manager. A revised version of the safeguarding policy is currently in draft, and a policy for the safe transportation of children has been developed. It is good practice that new policies are created in response to identified need.

Clarification was requested regarding the process for ratifying policies written by the Registered Manager, as there was no evidence within the documents to show they had been formally approved. Without this, there is no assurance that the policies are not based on unilateral decisions, reflect best practice, or align with other Trust policies. Verbal confirmation was provided that the Chief Executive Officer of the Trust signs off all policies, and it was recommended that evidence of this be included within the documents.

The policies reviewed had undergone annual review and had been updated by the Registered Manager where necessary.

The Equal Opportunities and Diversity Policy was reviewed, and it was evident that individuals working in or visiting the service are treated with respect in line with the policy. The Registered Manager also confirmed that all children have equal opportunities to access activities regardless of their needs. On the second day of inspection, the Regulation Officer observed a child taking part in a new activity and noted their clear enjoyment and excitement.

The SoP states that the service caters for wheelchair users. A professional reported that, as the service does not have vehicles capable of accommodating a wheelchair, this presents a barrier for children who are wheelchair-dependent to access the service. Support workers within the home care service use their own vehicles, whereas adapted minibuses are available for other services within the Trust.

It is positive that no complaints about the service have been received since the last inspection.

A charitable donation has recently been received, and the team are considering which activity memberships will best benefit the children. The staff also plan to hold fundraising events to provide children with additional experiences they may not otherwise have access to.

Professionals, support workers, and families all described the Registered Manager as having strong leadership skills and is consistently regarded as professional and approachable. Feedback received about the service and the staff team is an area of good practice.

A professional's feedback stated that they are "*Happy this service exists as without it, it would be difficult to meet the children's needs.*"



One parent shared:

At present I am happy with the range of activities offered, although I would always welcome any additional opportunities that support development and enjoyment.

IMPROVEMENT PLAN

There were three 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 6.11</p> <p>Regulation 14</p> <p>To be completed: by 20/07/2026</p>	<p>Staff are to attend Level three management medication training prior to administering medication to children.</p> <p>Response by the Registered Provider:</p> <p>Medication training has been booked and should be completed on 8th May.</p>
<p>Area for Improvement 2</p> <p>Ref: Standard 7.8</p> <p>Regulation 7</p> <p>To be completed: by 30/06/2026</p>	<p>A policy is to be developed and shared with the staff team and families regarding the handling of money.</p> <p>Response by the Registered Provider:</p> <p>A “Handling of service users’ money” policy has been created and shared with the team. Policy was created once inspection was completed in March.</p>
<p>Area for Improvement 3</p> <p>Ref: Standard 1.9</p> <p>Regulation 19</p> <p>To be completed: by 30/06/2026</p>	<p>A system is to be introduced to monitor, audit and review the quality of the care within the service.</p> <p>Response by the Registered Provider:</p> <p>From May, there will be spot checks carried out by the Registered manager monthly.</p>

To ensure there is clear evidence that the required improvements have been made, the following action will be taken:

- The Provider must submit written confirmation to the Commission when the areas of improvement have been achieved

These actions will be used to track progress, confirm completion, and provide assurance that the necessary improvements have been achieved.

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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