



Jersey Care
Commission

INSPECTION REPORT

03 Children's Home

Children's Home Service

**Children's Services
Government of Jersey
Union Street
JE2 3DN**

**Inspection Date
16 April 2026**

**Date Published
15 June 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 03 Children's Home. The Children's Home is one of ten homes operated by Children's Services and there is a Registered Manager in place.

Registration Details	Detail
Type of regulated activity	Children's Home Service
Mandatory Conditions of Registration	
Category of care	Children and Young people (0-18)
Maximum number of care receivers	Two
Age range of care receivers	10-18
Maximum number of care receivers that can be accommodated in each room	Rooms 1-2 = one person, 3 rd bedroom is a staff sleep-in room
Discretionary Conditions of Registration	
None	
Additional information	
None	

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 in advance of the first inspection visit. This was to ensure that the Registered Manager would be available during the visit.

The care receivers for the purpose of the inspection report will be referred to as the young person/young people.

Inspection information	Detail
Dates and times of this inspection	16 April 10:00-15:00
Number of areas for improvement from this inspection	None
Number of care receivers accommodated on the day of the inspection	None
Date of previous inspection	09, 12 June and 02 July 2025
Areas for improvement noted at the last inspection	Three
Link to the previous inspection report	RPT_03CH_Inspection_20250702.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 the improvements had been made. This means that there was evidence of:

- Information requested by the Regulation Officer being made available during the inspection
- A protocol has been introduced to monitor the number of hours staff work across the residential care homes to ensure that it is only in exceptional circumstances that staff work more than 48 hours a week and a Head of Service has to agree to the member of staff working more than 48 hours.
- A supervision calendar was provided demonstrating staff have received monthly supervision sessions prior to the home becoming unoccupied. The Independent Visitors reports (Regulation 31 reports) identified prior to the inspection that Registered Managers require regular supervision.
- Three staff who were working in the home have attended trauma informed practice training. The Children's Social Care service is currently working within a multi-agency working group to review and implement a programme of trauma informed training to commence during 2026 that will ensure the children's workforce training is aligned.

4.2 Observations and overall findings from this inspection

Since the last inspection, there has been an increase in the number of registered children's residential care homes. The home is currently vacant but remains registered with the Commission and is therefore subject, by law, to an annual inspection. Accordingly, the Regulation Officer focused on the operational readiness of the home should it be required to receive young people.

The Regulation Officer was assured that the home remains fit for purpose and that all health and safety compliance checks continue to be met. It is acknowledged that some refurbishment has taken place since the last inspection, which had been positively received by both young people and staff. Should the home become occupied, it is recommended that the bathrooms are refurbished prior to any young people moving in.

During the inspection, the Regulation Officer held discussions with the Registered Manager and Head of Service and sought feedback from representatives of young people who previously lived in the home, as well as external professionals. The feedback received was largely positive.

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, 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 was unable to obtain direct feedback from children and young people. However, representatives of two individuals who had lived in the home since the previous inspection shared their views. They also had discussions with the service's management. Additionally, feedback was provided by two professionals external to the service.

As part of the inspection process, documents including policies, incidents and Health and Safety checks were examined.

At the conclusion of the inspection visit, the Regulation Officer provided verbal feedback to the Registered Manager and followed up with written feedback on 17 April 2026.

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
Information requested during the inspection period is made available	All documents and evidence requested were readily available during the inspection.
Regular supervision	A supervision calendar evidenced staff received regular monthly supervision.
Staff are trained in trauma informed practice	Written confirmation was provided of the names of three staff who had received training in trauma informed practice and the plan for training to be rolled out to all staff across Children's Social Care Services during 2026.
Key lines of enquiry	
Focus	Evidence Reviewed
Is the service safe	Health and Safety documentation Regulation 31 reports
Is the service effective and responsive	Statement of Purpose Young people representees' feedback Feedback from professionals external to the service Independent visitor reports (Regulation 31 reports) Children's Guide
Is the service caring	Staff wellbeing Young people representees' feedback Staff supervision attendance record Children's Guide Transition plans
Is the service well-led	Policies Statement of Purpose Notifications Staff meeting minutes Staff supervision attendance record Regulation 31 reports

6. INSPECTION FINDINGS

Is the service safe?

People are protected from abuse and avoidable harm.

A key focus of this inspection was the maintenance of the home and the quality of its facilities. The home became non-operational two weeks prior to the inspection. Since that time, daily health and safety checks have been replaced with weekly checks. Evidence was provided to demonstrate that these checks are carried out consistently, including robust fire safety arrangements.

During the inspection, it was confirmed that there are no immediate plans for the home to reopen, and it is not intended to operate as an emergency residential home. Any future reopening will be carefully considered, as a staff team will need to be established.

As there is currently no staff team in place, there was no requirement for the Regulation Officer to review recruitment records, induction records, competency assessments, staff rotas, or the training matrix. This will be monitored at the homes to which staff have been re-deployed.

Staff recruitment is conducted at a senior level within the organisation. However, the Registered Manager is provided with copies of the references and Disclosure and Barring Service (DBS) certificates in order to assure themselves that safe recruitment practices are being followed. The Registered Manager is given the opportunity to assess whether new recruits are suitable to join the staff team, considering factors such as the existing skills mix and retains responsibility for signing off staff induction and probation periods.

It is positive to note that all Residential Child Care Officers (RCCOs) within the organisation have either completed, or are currently undertaking, trauma-informed practice training as part of a Qualifications and Credit Framework (QCF) Level three qualification.

In addition, level three Regulated Qualifications Framework (RQF) medication training is being provided to staff who do not already hold this qualification. Annual medication competency assessments are co-ordinated by a member of the Learning and Development team.

The Learning and Development team oversees training across the residential children's service and maintains a staff training matrix, which is used to prompt staff when training is due. The Registered Manager reported that staff are offered a wide range of training opportunities, and that the majority of the previous staff team have recently completed training in Good Autism Practice.

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 Registered Manager and staff team worked effectively with partner agencies to plan the transition of the young people to alternative accommodation. Each move was carefully risk assessed to reflect the individual needs and complexities of each young person. Detailed planning, including contingency arrangements and the involvement of familiar staff, helped ensure that transitions took place with minimal disruption. This reflects positively on the commitment and professionalism of the staff team.

A new care provider worked closely with the home's staff to develop an understanding of one young person's preferences and needs, supporting them to settle into their new home. Arrangements are in place to enable ongoing communication between staff and the young person.

Feedback from an external professional highlighted that the standard of record keeping has improved over the past year and is of a good standard, suitable for use in court proceedings. The professional commented, "*Staff are better at reflecting the voice of the child in the records they make.*"

The Registered Manager advised that they continue to develop the role of the key worker, including strengthening key worker meetings to support staff in consistently implementing care plans.

A manager's summary report has been introduced within young people's records to provide oversight of care and support, and to ensure that any identified actions are followed up. This is a positive development.

It is positive that young people have been involved in redesigning the Children's Guide, which is now more child-friendly in both its language and presentation. The guide includes not only information provided by the service, but also content identified as important by young people, such as details about pocket money.

During the inspection, it was identified, and confirmed by parents, that they are not routinely provided with written information about the home. The Registered Manager has committed to producing written information to help parents understand the purpose of the service, including what is expected of them and what they can expect in return. The Registered Manager advised that a copy of the Statement of Purpose (SOP) is provided on request, and the Regulation Officer found the SOP to be comprehensive and informative. The Regulation Officer gave advice regarding some minor amendments required to the SOP. Parents are invited to visit the home, where they are given a tour and receive verbal information.



Parent feedback included:

Communication is really good. If any issues with Xxx they ring me.

Where appropriate, families are regularly invited into the home to support family time and contact with siblings, and there are opportunities for friends to visit. For example, on Mother's Day, young people were supported to select activities to share with their mother or grandmother and to purchase gifts. Staff facilitated opportunities for the young people to spend this time privately with their family members.

Is the service caring?

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

The home was found to be clean, tidy and maintained to a standard that would enable it to accommodate a young person if required. The bedrooms are bright, of a good size, and had been decorated in line with the young people's preferences. Since the last inspection, the home has been redecorated and has benefited from new carpets and flooring. It was reported that young people respected expectations such as removing footwear indoors, and the improved décor had contributed to a calmer environment. The home has two lounges, providing both communal space and the opportunity for young people to have privacy when needed.

Should the home be re-opened in the future, consideration should be given to refurbishing the bathrooms, which are currently dated, and repairing the kitchen cupboard door beneath the sink, which was observed to be hanging.

Appropriate safety measures were in place, including window restrictors to reduce the risk of young people going missing, and secure storage where required.

Feedback from a professional external to the service highlighted that staff remained committed to supporting the young people, consistently reinforcing the importance of keeping themselves safe.

One professional commented, "*The staff are invested in their wellbeing (young people),*" and added, "*Staff didn't give up on Xxx. There is a child-centred focus and recognition of the emotional distress that has led to the dysregulated behaviour.*"

Professionals external to the service also reported that they felt well supported by the staff team when delivering difficult or unwelcome news to young people.



A parent shared:

Xxx (young person) has got a good team behind them, supporting them and they seem happy enough.

Each young person is supported by two key workers and is given the opportunity to express a preference regarding which individuals will fulfil this role. Key workers contribute to a multi-disciplinary approach, supporting the young person's health, wellbeing and education. This is demonstrated through their regular attendance at multi-disciplinary meetings, where they contribute to the development and implementation of individual plans and to safeguarding young people.

Staff work collaboratively to ensure that young people receive consistent, well-informed support that reflects input from all relevant services. Key workers were also involved in supporting the transition of young people into their new homes. The Regulation Officer was informed that, where appropriate, RCCO's either worked within the new home or maintained regular telephone contact. This helped to provide continuity, familiarity and reassurance for young people, demonstrating a person-centred approach.

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.

Policies have become a strength of the children's residential care services. A comprehensive suite of service-specific policies is in place, which is regularly reviewed and updated. Staff in the home were required to confirm that they have read relevant policies, and there are plans to further embed learning by discussing key points during staff supervision sessions. Policies are also included as a standing agenda item at team meetings.

Since the last inspection one formal complaint has been made and context was provided during the inspection.

The Regulation Officer was satisfied that the initiation of the complaint process was in line with the complaints policy and the complaint process remains ongoing at the time of the inspection. The approach taken has supported the young person's voice to be heard, participation and wellbeing, and included a written apology.

It was positive to note that two compliments have also been received during the same period.

It is acknowledged that the previous year was challenging for staff, with frequent missing episodes and escalating behaviours

The number of incidents notified to the Commission has reduced, reflecting a change in the needs of the young people previously living in the home. This, in turn, has had a positive impact on staff wellbeing.

Staff wellbeing, particularly in relation to the number of hours worked each week, has improved since the last inspection. A protocol has been introduced requiring Registered Managers across the children's residential homes to confirm the number of hours a staff member is working in their substantive role before approving additional hours at another home. In exceptional circumstances, the Head of Service may authorise a staff member to work more than 48 hours in a single week.

During the inspection, copies of meeting minutes were reviewed, evidencing regular team meetings with good levels of staff attendance.

A review of supervision attendance records also demonstrated that former staff were receiving consistent monthly supervision. While this is positive, the Senior Leadership Team are to ensure the Registered Manager also receives regular supervision. The Regulation 31 report highlighted that supervision for Registered Managers should be a priority.

A new debrief protocol has been introduced across the service. This aims to support learning by helping staff understand incidents, identify any patterns or concerns, and agree actions to promote safer and more consistent practice.

Guidance tools are in place to support debriefs at an individual staff level, whole team level, and with young people.

Young people have access to advocacy services and a mobile phone application through which they can provide feedback. The Registered Manager intends to introduce a more formal process to regularly seek feedback from young people and their representatives to support ongoing service improvement.

The Registered Manager's oversight of care records provides an effective quality assurance process.

During the inspection, the Registered Manager praised the former staff team, recognising their commitment and dedication to supporting young people, often in challenging circumstances. The Registered Manager expressed pride in the positive impact staff have made and appreciation for the support provided by the Senior Leadership Team.



IMPROVEMENT PLAN

There were no areas for improvement identified during this inspection, therefore; 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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