Jersey Care Commission

INSPECTION REPORT

Secure Children's Home

Union Street
St Helier
JE2 3DN

Inspection Dates:
4, 5 and 15 June 2026

Date Published
14 August 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 a secure children's home. This young people's home is operated by the Office of the Minister for Children and Families, Government of Jersey, and a registered manager was in place during the inspection but had retired prior to the publication of the report.

Registration Details	Detail
Type of regulated activity	Children's Home Service
Mandatory Conditions of Registration	
Category of care	Children
Maximum number of care receivers	Four
Age range of care receivers	10 - 18
Maximum number of care receivers that can be accommodated in each of the following rooms	Bedrooms 1 – 8 - one person (maximum of 4 care receivers)
Discretionary Conditions of Registration	
None	
Additional information	
The current Registered Manager was appointed on the 8 September 2025 An updated Statement of Purpose was completed on the 20 May 2026	

During the period of the inspection a new manager for the service had been appointed and was completing their induction process whilst also receiving a detailed handover from the outgoing Registered Manager. The Regulation Officer was informed that it is the intention of the service for an application to the Commission to be made under Article 4 of the Law, for the new manager to be appointed as the Registered Manger.

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 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.

For the purpose of this inspection report Residential Child Care Officers will be referred to as care staff. The inspection took place over three visits. During the first inspection visit two regulation officers attended the service.

Inspection information	Detail
Dates and times of this inspection	4, 5 and 15 June 2026 13:00–16:50, 13:30–16:40, 15:20-17:00
Number of areas for improvement from this inspection	One
Number of care receivers accommodated on the day of the inspection	Three
Date of previous inspection	31 July and 1, 5 August 2025
Areas for improvement noted at the last inspection	Six
Link to the previous inspection report	RPT_SCR_Inspection_20250731-1.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, six 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 five of the six improvements had been made. The six areas for improvement from last year were:

1. The Registered Manager must ensure that fire drills are carried out in accordance with the recommendations set out in the Jersey Fire and Rescue Service Fire Precautions Logbook.

   There was evidence of fire drills having taken place in line with the Fire and Rescue Service requirements. The Regulation Officer met with the Fire Marshal for the home and reviewed the Logbook.

2. The Registered Provider must ensure that all care staff complete the identified mandatory training offer and records of completed training is available for inspection.

   The training matrix was analysed and identified mandatory training has been achieved.

3. The Registered Manager must ensure that all new care staff complete a home-specific induction and that there is a record of this taking place.

The service has introduced an induction pack which is tailored to new staff joining the secure children's home team. A new member of the team gave feedback that they received a "*great induction*".

4. The Registered Provider must ensure that the assessing health professional has access to the health records of young people as part of health assessments.

The Registered Manager described the system that has been introduced which allows assessing health professionals access to the young people's health records through the electronic patient record.

5. The Registered Provider must adopt and embed a trauma-informed practice model overseen by an appropriately trained professional.

This has not yet been achieved and will remain an area for improvement.

6. The Registered Provider must ensure that care staff have access to service-specific policies and procedures that are regularly reviewed and updated.

The organisation has introduced the Jersey Young People Homes Procedures Manual which is a web-enabled manual and accessible to all staff. A local procedures manual has also been developed specific to the secure young people's home.

4.2 Observations and overall findings from this inspection

The inspection found that the Secure Children's Home is continuing to improve in providing a service that is safe, caring, child-centred and focused on achieving positive outcomes for young people.

Progress has been made since the previous inspection. Staff recruitment processes are robust, with thorough checks completed before employment begins, helping to ensure young people are cared for by suitable and appropriately vetted care staff.

Staff training has improved considerably, particularly in safeguarding, health and safety, children's rights and positive behaviour support. Medication management and fire safety arrangements were also found to be well managed, with clear procedures and regular oversight.

Young people are supported to have their voices heard through advocacy services, regular key worker sessions and access to independent visitors. Complaints are taken seriously and used as opportunities to improve practice. During the inspection, concerns raised by young people were managed appropriately and in line with policy.

Regulation Officers observed positive and respectful relationships between staff and young people. Care planning has developed significantly and is now more focused on young people's strengths, aspirations and achievements, while continuing to address risk and safety. Access to mental health support, healthcare professionals and education services helps ensure that young people receive the support they need. Educational opportunities are enhanced through partnerships with external organisations, providing activities that promote confidence, engagement and personal development.

Leadership and governance have strengthened since the last inspection. Managers demonstrated effective oversight, regular review of incidents and a commitment to learning and continuous improvement. Staff generally reported feeling supported and able to raise concerns openly.

Some challenges remain. Refurbishment work is still ongoing, with communal area windows awaiting replacement, although work has now begun and completion is expected shortly. The service also continues to experience staffing pressures and reliance on agency staff during a period of organisational change.

Overall, the inspection found a service that is continuing to make positive progress and there was evidence that the service is committed to providing safe, supportive and high-quality care for young people.

5. INSPECTION PROCESS

5.1 How the inspection was undertaken

The Young people'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 gathered informal feedback from two young people and one of their representatives. They also had discussions with the service's management and other staff. Additionally, feedback was provided by two professionals external to the service.

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

At the conclusion of the third inspection visit, the Regulation Officer provided verbal feedback to the Registered Manager and then to the newly appointed manager (feedback was given separately due to service demands) and followed up by email on 6 July 2026 confirming the identified area for improvement.

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**
Fire and safety procedures	Discussion with the fire marshal Review of the fire logbook Check of firefighting equipment
Mandatory training	Review of the training matrix Review of the medication training matrix Staff feedback
Staff induction	Young people's Social Care Residential Induction Pack for secure care home Staff feedback
Health professionals' access to health records	Review of the care records Discussion with the Registered Manager
Trauma informed training	Discussion with the Registered Manager
Service specific policies	Discussion with the Registered Manager and staff Review of the Jersey Young people's Homes Procedures Staff induction links to Procedures Manual Review of the final draft of the Medication Management and Administration Policy
Key lines of enquiry	
Focus	**Evidence Reviewed**
Is the service safe	Review and discussion of safe recruitment practice Review of complaints Discussion and review of notifiable events Health and safety (fire safety, property maintenance, electrical and water maintenance) Staff levels Medications management Discussion with the Registered Manager, Project Lead and observation of phase one of building work.
Is the service effective and responsive	Regulation 31 reports from the independent visitor Internal and external communication practice Young people's and parents' guides The Amendment of the Criminal Justice (Young Offenders) (Jersey) Amendment No. 2 Law. Links with external community clubs and education. Jersey Young people's Homes Procedures Manual Feedback from young people regarding meals, menus and nutrition
Is the service caring	Review of care records Supported with healthy activities Care plans developed with the young people Supporting family visits

	Primary health care provided by visiting GPs Liaison with CAMHS young people in care service Weekly house meetings with young people
Is the service well-led	Discussion with the Registered Manager and evidence of performance management Appointment of an experienced Registered Manager in the care of young people in secure services, with a planned induction and handover from the current Registered Manager Practice development support Investigation and outcome of complaint Developing subject matter experts amongst the staff Registered Manager described benefits of holding weekly meetings with Head of Improvement for the organisation Three phased building upgrades to the service to improve safety, comfort and facilities. Phase one in progress during the inspection Registered Manager Update Report

6. INSPECTION FINDINGS

Is the service safe?

People are protected from abuse and avoidable harm.

On the first day of the inspection two regulation officers attended the service and met with the Registered Manager, the newly appointed manager for the service, members of the staff team and two young people.

It was noted in the previous inspection report that certain areas of the accommodation had been damaged, and a refurbishment programme and funding was available to improve the environment. Part of the damage sustained had resulted in windows in the communal areas being boarded up. It was disappointing to note that this was still the case during this inspection. However, the regulation officers were reassured that the work is now taking place with the first of three phases under construction. The facilities manager has stated the work to replace the remaining windows will be completed by the end of July.

The organisation has established robust safer recruitment procedures to ensure that all staff are suitable to work with young people. Recruitment is managed centrally within the Children and Young Peoples Services and processes are detailed and consistently applied. They include verification of identity, employment history, and qualifications, as well as the completion of Disclosure and Barring Service (DBS) checks and the taking up of references prior to appointment.

This reduces the risk of unsuitable individuals being appointed and helps to safeguard young people. Managers demonstrated a clear understanding of safer recruitment principles and could explain how decisions are made based on an overview of each applicant's background. Agency staff are also subject to appropriate checks. The service seeks confirmation from agencies that all relevant pre-employment checks have been completed and recorded. This provides an additional layer of assurance that all adults working within the home meet the required standards of suitability.

New staff now benefit from a structured and comprehensive induction programme. This includes both a corporate induction, covering wider organisational policies and expectations, and a local induction tailored to the specific needs of the secure setting.

One recently appointed member of staff described the induction as a "*thorough process*", highlighting that it prepared them well for their role and responsibilities. Induction covers key areas such as safeguarding, health and safety, behaviour management, and the routines of the home. This ensures staff understand both the practical and professional expectations of their role from an early stage.

The induction programme also includes opportunities for shadowing experienced staff before taking on full responsibilities. This aims to support consistency in care and reduces the likelihood of errors or unsafe practice during the early stages of employment.

Health and safety arrangements within the service continue to improve. The Regulation Officer was satisfied that health, and safety training now forms a core part of the induction programme, ensuring that all staff understand how to maintain a safe environment for young people and colleagues.

The service provided a comprehensive training matrix, which showed that staff have up-to-date training in health and safety, as well as related areas such as risk assessment and fire awareness. The Regulation Officer compared the training matrix from the previous inspection to the current one and noted a vast improvement in the number of staff and number of courses completed. Areas that are noticeably improved were:

- Safeguarding Children
- Children and Young People's Law:
    - working together
    - information sharing
    - corporate parenting
- Jersey's Children First – Essentials.

In addition, staff undertake training in MAYBO, the services current model for the prevention and management of violence, which aims to equip staff with the skills to safely manage behaviours that challenge. Training in medication administration is also in place, helping to support safe management of young people's health needs.

Fire safety processes have improved since the last inspection. The Fire Marshal described the steps taken to strengthen procedures, including improved staff training, clearer evacuation plans, and increased oversight of fire safety checks. Staff demonstrated a good understanding of what to do in the event of a fire, and records indicate that regular checks and drills are undertaken.

Whilst the attendance of mandatory training has clearly improved there remain challenges for the service in staff attending some courses. One member of staff commented that they had been taken off training due to staff shortages.

The Registered Manager demonstrated a clear understanding of the importance of learning from incidents and complaints. They described how the service has reflected on events over the past year and implemented changes to improve safety and practice along with improved performance management. This includes reviewing incidents to identify patterns or underlying causes, as well as taking action to prevent recurrence.

For example, changes have been made to procedures and additional training is being introduced in the form of Positive Behavioural Support (PBS) which is an evidence-based framework used to understand and manage behaviours that challenge by identifying their root cause and working with the person to identify safer and more effective responses in expressing their needs. The organisation has invested in an external trainer coming to the Island to train several staff who will become the 'subject matter experts' within their respective services and support the development of all staff in PBS. This reflective approach helps to strengthen the service and ensures that learning is embedded in day-to-day practice. This is an area of good practice.

One professional stated:

Joint working has improved significantly.

Arrangements for the management of medication were reviewed by the Regulation Officer. Medication Administration Records (MAR) are provided by the pharmacy dispensing the medications and are clear and concise. Medication administration is completed by two staff, both of whom initial the MAR sheet which provides an additional layer of safe practice. The Regulation Officer was informed that the service does not transcribe prescriptions to MAR sheets, and this was confirmed when physically reviewing the medicines process. Training records confirm that staff responsible for administering medication have received relevant training and updates. The Commissions Pharmacist Inspector intends to complete a thematic review on medications management for young people's homes later in the year.

An updated Medication Management and Administration Policy for Residential Young People's Homes now provide clear requirements for staff competence and responsibilities in the management and administration of medication.

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 effectiveness and responsiveness of the service was assessed by considering how well it meets the individual needs of young people, promotes their development, and responds to their views and experiences. Overall, the home demonstrates a child-centred approach, with systems and practices in place to support communication, engagement, and learning.

Young people have access to an independent advocacy service, 'Jersey Cares', which provides them with additional support to express their views and any concerns. This service plays an important role in ensuring that young people's voices are heard, particularly where they may feel unable or reluctant to raise issues directly with staff. Advocates are available to support young people in making complaints, expressing preferences, or participating in decisions about their care. This helps to promote young people's rights and supports their involvement in shaping their experiences within the home.

In addition, the service is subject to independent persons monthly visits, as required under Regulation 31 of the Regulation of Care (Standards and Requirements) (Jersey) 2018. The independent person visits the home monthly and provides reports on the quality of care and operation of the service. During these visits, young people are given the opportunity to meet with the independent person in private, enabling them to raise any concerns or issues confidentially.

This independent oversight also provides an important safeguard and contributes to transparency and accountability within the service.

Young people are encouraged to participate in decisions about their care through a variety of mechanisms. Regular one-to-one sessions are held with key workers, providing a structured opportunity for young people to discuss their progress, raise concerns, and set goals. These sessions are an important aspect of care planning and help to build strong, supportive relationships.

The Regulation Officer was informed that young people have access to the home's management team and are able to raise issues directly with senior staff if they feel able and confident to do so. This accessibility aims to support openness and ensures that concerns can be addressed promptly.

Home meetings are available as a forum for group discussion, allowing young people to share their views on the running of the home. However, it was reported that young people are often reluctant to engage in this format. This may limit the effectiveness of group consultation and suggests that alternative methods of gathering feedback should continue to be explored. The service may benefit from developing more flexible and creative approaches to participation that better reflect the preferences of the young people.

During the inspection process two young people from the service met with an independent advocacy worker who listened to their concerns and supported them to raise official complaints which were submitted to the management team. The Regulation Officer observed that these were managed appropriately and in line with the organisations complaints policy.

The 'Quality and Standards Team' for the organisation was asked to investigate one of the complaints, utilising stage two of the complaints process, demonstrating a clear separation of oversight and ensuring that the process was fair and transparent. The Commission also received a notification of the issues from the service. Two other complaints are being addressed using stage one of the policy which aims to address issues speedily at local level.

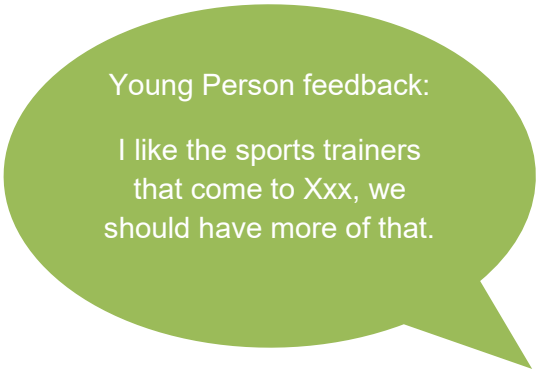
The Registered Manager said that the service views complaints as an opportunity to improve practice. By responding promptly and involving independent oversight where appropriate, the service demonstrates that it takes young people's concerns seriously.

The service shows an understanding of the importance of providing education that is both realistic and meaningful within the context of a secure setting. The Registered Manager described working collaboratively with education providers to support each young person's educational progress and to prepare them for future transitions.

They went on to describe a service aspiration to be able to incorporate vocational training for the young people.

Education within a secure setting presents unique challenges, and the service has taken steps to provide meaningful and appropriate learning opportunities for young people. While it is not possible or appropriate to deliver a full mainstream curriculum within the secure environment, the service works to ensure that education is tailored to the individual needs and abilities of each young person.

Learning is delivered by the education department, with additional input from external partners such as Skills Jersey, Jersey Sport, and a boxing trainer. These partnerships enhance the range of opportunities available and help to engage young people who may have previously disengaged from education for significant periods of time.



Activities are designed not only to support academic development but also to build confidence, discipline, and teamwork. Feedback from one young person was particularly positive regarding the sporting opportunities available. They expressed enjoyment of these activities but indicated that they would like more time with visiting trainers. This feedback highlights the value of these programmes and suggests that expanding access, where possible, could further enhance engagement.

However, there are some areas where responsiveness could be strengthened. Feedback regarding the quality of food and menu choices was mixed. During the inspection the Regulation Officer met with two young people whose feedback regarding food and menus was, at that time, positive. However, while some young people were satisfied, others expressed concerns about quality and accessibility of food. The Registered Manager was aware of these views and was actively seeking to identify solutions.

This response is positive and indicates that the service is willing to listen and make changes. Food and mealtime experiences are an important aspect of daily life, specifically to those whose freedom of movement are so restricted, and addressing these concerns could have a meaningful impact on overall wellbeing and satisfaction.

Is the service caring?

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

A caring service is one in which children and young people are treated with dignity, respect, compassion and understanding. During the inspection, the Regulation Officer considered whether the ethos, culture and day-to-day practices of the secure children's home demonstrated a genuine commitment to the wellbeing of young people. Evidence gathered during the inspection indicates that the service places considerable emphasis on developing positive relationships, ensuring children have access to appropriate support, and promoting a child-centred approach to care.

Prior to the inspection, the Regulation Officer reviewed the home's Statement of Purpose (SoP). The document provides a clear description of the purpose, aims and principles of the service and outlines how care and support are delivered to young people living within the secure environment.

The Statement of Purpose identifies that the service operates within the principles of the Jersey Children First framework, which places children and young people at the centre of assessment, planning and intervention.

The framework promotes the provision of the right help at the right time, encourages collaborative working between agencies and emphasises the importance of listening to children and involving them in decisions that affect their lives.

The document clearly reflects an ethos that values children as individuals and recognises the importance of understanding their experiences, wishes and feelings. Staff interviewed during the inspection demonstrated a good understanding of these principles and were able to explain how they apply them in their daily practice. The service has ensured that all staff have received training in the Jersey Children First framework.

Staff spoken to during the inspection demonstrated a commitment to these principles. During the inspection, interactions observed between staff and young people were friendly, respectful, and appropriate. Staff spoke to young people in a calm and supportive manner, and young people appeared comfortable approaching staff for both practical support and informal conversation.

This positive communication culture supports the development of trusting relationships, which are particularly important in a secure setting where many young people may have experienced trauma or instability. Staff demonstrated an understanding of the need to adapt their communication styles to meet the individual needs of each child, including those who may have difficulties in expressing themselves.

There was evidence that staff actively listen to young people and take their views seriously. However, maintaining consistency across all shifts and ensuring that all staff apply the same high standards of communication remains an area the service is committed to further developing which will be supported through the introduction of the PBSs training.

An important indicator of a caring service is the extent to which children are supported to have their voices heard. Each of the young people when first arriving at Greenfields receive a ‘Children’s Guide’. The guide provides details including, what the service is, diversity and inclusion, practical information and comprehensive details on advocacy through Jersey Cares.

Within the guide there are details of how young people can raise a complaint including contact details of the Children's Commissioners Officer and the Commission with clear process allowing privacy when making calls.

The young people have access to Child and Adolescent Mental Health Services (CAMHS) and other specialist assessment and support. Children living in secure settings have often experienced significant adversity, trauma and emotional difficulties. Access to therapeutic and mental health services is therefore essential in ensuring that their emotional wellbeing is appropriately supported. There is a link professional from CAMHS who works in partnership with the service.

In discussion with an external professional, it was positive to hear that work is under way to develop a trauma-informed framework for the service. Evidence shows that trauma-informed practice in children's secure homes reduces trauma symptoms and improves emotional regulation. This development links with the area for improvement from the last inspection, which required the principle to be 'embedded' within the service and, as such, will remain an area of improvement.

The Regulation Officer reviewed a sample of current care plans and compared these with previous versions. It was particularly positive to note the significant development in both the style and narrative of care planning. Current care plans are increasingly focused on young people's strengths, abilities, aspirations and progress, rather than being primarily centred on the events that led to their admission to the service or the risks they present.

This represents an important shift in practice and aligns well with the principles of the Jersey Children First framework, which promotes a child-centred approach that recognises the individual behind the presenting behaviours or circumstances. While risk assessment remains a fundamental component of care planning, it was evident that the service is moving towards a more balanced approach in which risk management forms part of the overall plan rather than being the sole driver of intervention.

The Regulation Officer found that care plans were focused on helping young people identify and build upon their strengths, develop skills, improve relationships and achieve personal goals. This approach is more reflective of the young person's potential and supports a culture of hope, development and positive outcomes. Young people are encouraged to be involved in the development and review of their care plans.

Care plans were found to be subject to regular review, ensuring that they remain relevant to the young person's changing needs and circumstances. Reviews demonstrated consideration of progress made, emerging needs and future objectives. This ongoing review process helps ensure that planning remains responsive and meaningful for each child

The health needs of young people are supported through access to a range of healthcare professionals. Primary healthcare is provided through General Practitioners and other health professionals who attend the home and provide assessment, treatment and ongoing support as required.

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 organisation has been on a journey in addressing staff terms and conditions which, for some time, have been seen as outdated. Due to the detailed consultation process of implementing the new terms and conditions there has needed to be a hold on permanent recruitment of staff to the service resulting in the use of a high proportion of agency staff. Feedback from one staff member suggested this puts extra pressure on the permanent staff. As the implementation of the new staffing arrangements are realised it is anticipated the service will be in the position to appoint to permanent posts.

It is worthy of note that despite the uncertainty for the service during this change period the Registered Manager and the senior team have focussed on performance management. The Registered Manager describes promoting an open-door policy for staff. The Regulation Officer circulated a staff survey with one of the questions being, 'I can approach my manager for support and advice', to which all respondents agreed.

Young Persons Representative feedback:

The service is accommodating and flexible for visiting.

Effective leadership and management are essential to ensuring that children living in secure care receive safe, high-quality and responsive services. Overall, the inspection found evidence of committed leadership and a service culture that is increasingly focused on reflection, accountability and improvement. Systems are in place to monitor performance, investigate incidents and complaints, and implement changes where lessons are identified.

The Regulation Officer discussed with the Registered Manager incidents that had been reported to the Commission since the last inspection. These included incidents that resulted in restrictive interventions being used and three occasions where the police were called by the service to be available and, if required, assist staff in managing significant episodes of dysregulated behaviour.

The Registered Manager was able to demonstrate that incidents are reviewed and analysed rather than viewed as isolated events. There was evidence that management seek to understand the factors contributing to incidents, identify themes and trends, and use this information to improve practice.

The service has also demonstrated a willingness to work collaboratively with external agencies following incidents. A notable example of this has been the work undertaken with the States of Jersey Police to develop a Memorandum of Understanding to guide any future police involvement within the home. The development of this agreement provides greater clarity regarding roles, responsibilities and expectations when police attendance is required.

Leadership oversight within the service has strengthened since the previous inspection. The Registered Manager was able to provide evidence of monitoring activities, quality assurance processes and management oversight of key operational areas.

The inspection found that managers have a good understanding of the strengths of the service as well as areas requiring further development. There was a realistic assessment of current performance and a clear commitment to continued improvement.

The leadership team demonstrated awareness of the unique challenges presented by operating a secure children's home within a small jurisdiction and showed an understanding of the need to balance safety, security and children's rights. Decisions relating to service development appeared to be informed by both operational experience and feedback from children, staff and partner agencies.

The Regulation Officer observed a management team that was visible and accessible within the service. Staff reported being able to approach managers for guidance and support when required. This was particularly important at the time of the inspection as the service was in a transition phase between the Registered Manager who was leaving the service and the newly appointed manager. Both the outgoing and incoming managers were actively involved in the inspection process, and the Regulation Officer was confident that the investment in time for a detailed handover and structured induction will support a smooth transition into this pivotal role.

Effective staff supervision is a key component of good governance and helps ensure that staff remain supported, accountable and focused on delivering high-quality care.

The Regulation Officer reviewed the supervision matrix for staff. This demonstrated that the frequency and consistency of supervision have steadily improved since the previous inspection. Records indicated that supervision is now taking place on a more regular basis across the staff team, reflecting management's commitment to supporting professional development and ensuring appropriate oversight of practice.

Supervision provides an important opportunity for staff to reflect on their work, discuss safeguarding concerns, review training needs and receive support with the challenges associated with working in a secure environment. The increase in supervision activity is therefore a positive development and contributes to the overall effectiveness of the service.

Feedback obtained from staff was generally positive. Staff described supervision as taking place either regularly or at least intermittently when operational demands allowed. While there remains a need to continue improving consistency across all staff groups, the overall trend demonstrates progress since the last inspection.

Importantly, the majority of staff reported that they felt supported by managers and understood how to access advice and guidance when required. However, a concern was raised by one member of staff that at times information is verbally given to individuals to disseminate to all staff, which doesn't always happen. It was suggested that such information should be followed up with an email.

The inspection found evidence of a culture that encourages openness and accountability. All staff who provided feedback indicated that they would feel confident reporting accidents, incidents, safeguarding concerns or other matters of concern. This is a significant indicator of organisational health. Services that foster a culture in which staff feel safe to speak up are generally better positioned to identify risks early, learn from mistakes and protect children from harm.

Particularly noteworthy was feedback from one member of staff who had experience working within other similar secure and residential care environments. They stated that the standards at the service were "much higher" than those they had experienced elsewhere.

While this view represents the opinion of an individual staff member, it nevertheless provides an indication that staff recognise the efforts being made to develop and maintain high standards of care and practice.

Positive staff perceptions of leadership are important, as they often contribute to higher levels of staff engagement, consistency and retention. In turn, this benefits children who rely on stable and supportive relationships with trusted adults.

The Regulation Officer found the leadership team committed to developing high standards of care, supporting staff in their roles and ensuring that children living at the Secure Children's Home receive services that are safe, responsive and focused on achieving positive outcomes. However, it cannot be ignored that over recent years there have been a number of changes in the Registered Manger for this service and there have also been significant high-risk events. The positive steps taken by the management team since the previous inspection need to be maintained moving forward with support for the new manager who arrives with a wealth of knowledge and skills in secure children's care.

IMPROVEMENT PLAN

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

Area for Improvement 5 **Ref:** Standard 11.4 Regulation 17 **To be completed:** 01/01/2027	The Registered Provider must adopt and embed a trauma-informed practice model overseen by an appropriately trained professional.
	Response by the Registered Provider: Planning to deliver system wide trauma informed training is underway with the residential service identified as a priority. In addition, CAMHS continue to provide wrap around support via consultation and reflective supervision through a trauma informed lens.

As the area of improvement involves embedding a practice model, no further follow-up is required until the next inspection.

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.

Jersey Care Commission

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