



**Jersey Care
Commission**

INSPECTION REPORT

Thrive

Home Care Service

**12 Britannia Place
Bath Street
St Helier
JE2 4YS**

**Inspection Date
23 September 2026**

**Date Published
12 October 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 Thrive. The home care service is operated by Island Home Care Limited and there is a registered manager in place.

Registration Details	Detail
Type of regulated activity	Home Care Service
Mandatory Conditions of Registration	
Type of care	Personal support and personal care
Categories of care	Children and young people (0-18), Physical disability and/or sensory impairment, Learning disability, Autism
Maximum number of care hours each week	600 (Medium)
Age range of care receivers	0-18 years
Discretionary Conditions of Registration	
None	
Additional information	
Since the last inspection there has been an increase to the maximum number of care hours per week that can be provided.	

As part of the inspection process, the Regulation Officer evaluated the service'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 five 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 and in line with the home care service Statement of Purpose care receivers will be referred to as children and young people.

Inspection information	Detail
Date and time of this inspection	23 September 2026, 10:00 – 16:41
Number of areas for improvement from this inspection	None
Number of care hours on the week of inspection	98.5 hours
Date of previous inspection	23 July and 28 August 2025
Areas for improvement noted at the last inspection	None
Link to the previous inspection report	RPT_TRV_Inspection_20250828.pdf

3.2 Focus for this inspection

This inspection included a focus on 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, no areas for improvement were identified.

4.2 Observations and overall findings from this inspection

The inspection found a well-managed service with established governance arrangements and a clear commitment to providing safe, person-centred care. Representatives of the children and young people reported feeling safe, respected, listened to and involved in decisions about care.

Assessment and care planning was comprehensive and reflected individual needs, preferences, communication methods and identified risks. Care records demonstrated that staff knew the children and young people well and understood how to provide individualised support. Regular review of care plans and risk assessments, effective handovers and consistent staffing arrangements supported continuity of care.

Safe recruitment and structured induction processes are in place. Staff training was a strength of the service, with competency assessments, relevant qualifications and specialist training supporting staff development. Staff generally reported feeling well supported and prepared for their roles.

Strong leadership and governance arrangements supported oversight of staffing, training, safeguarding, incidents and quality assurance. Regular audits, management meetings and in-home spot checks provided assurance about the quality and safety of care.

Medication management arrangements are generally robust. An improvement relating to a variable-dose protocol was identified and addressed promptly during the inspection.

Overall, the service demonstrated strong leadership, effective person-centred care planning, good staff development and a commitment to continuous improvement.

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, variation requests and notification of incidents.

The Regulation Officer gathered feedback from one representative of a child and young person. They also had discussions with the service's management and other staff. As no home visits were undertaken as part of this inspection, the Regulation Officer did not have the opportunity to seek feedback directly from the children and young people. 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 inspection visit, the Regulation Officer provided verbal feedback to the Registered Manager and followed up by email on 2 October 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.

¹ All Care Standards can be accessed on the Commission's website at <https://carecommission.je/>

5.2 Sources of evidence.

Key lines of enquiry	
Focus	Evidence Reviewed
Is the service safe	Staff files Interview records Induction competency workbook Medication competency document Policies Employee handbook Training matrix Staff feedback Care records Risk assessments Rotas Monthly reports Child and young person representative feedback Professional feedback
Is the service effective and responsive	Statement of Purpose Staff feedback Child and young person representative feedback Professional feedback Monthly reports Written agreements
Is the service caring	Staff wellbeing Complaints and compliments Child and young person representative feedback Professional feedback
Is the service well-led	Organisation structure Training development plan Service development plan Child and young person agreement Training matrix Policies and procedures Statement of purpose Notifications

6. INSPECTION FINDINGS

Is the service safe?

People are protected from abuse and avoidable harm.

The Regulation Officer found that the service has a well-established management structure, with clearly defined roles and responsibilities that support continuity of care and effective service delivery. A representative of a child and young person reported that they were confident their child was safe and treated with dignity and respect.

Safe recruitment practices include obtaining appropriate references and Disclosure and Barring Service (DBS) checks prior to employment. Signed contracts confirm agreement to the terms and conditions of employment.

New support workers complete a structured induction that includes orientation to the service, care plans, behavioural strategies and escalation procedures. Mandatory and role-specific training is undertaken during the induction period, alongside shadowing opportunities that enable staff to understand the needs of children and young people and develop relationships with them, their representatives and colleagues. Feedback from representatives is sought to support appropriate matching between staff and those receiving care.

Before working independently, support workers' competence and confidence are assessed by the Deputy Care Manager, with ongoing support and guidance provided where required. A completed induction competency record reviewed during the inspection demonstrated a thorough approach. The Registered Manager plans to strengthen this process further by recording direct observations of care practice, providing additional documented assurance that required competencies have been achieved.

Staff training is a strength of the service. Since the previous inspection, a Training Manager and an additional trainer have been appointed.

Systems are in place to monitor staff development and training attendance, with programmes incorporating clear learning objectives and competency assessments. Additional one-to-one support is available where further development needs are identified.

It is positive that all the support workers receive Children and Young People training which includes scenario-based training about 'Putting Jersey Children First' and how to apply the learning into practice. Specialist training relevant to individual care needs is also provided, including the delegated tasks of percutaneous endoscopic gastrostomy feeding and diabetes management. Where required, specialist training has been sourced from outside Jersey.

All staff have either achieved, or are working towards, a Level 3 Regulated Qualifications Framework (RQF) in Children and Young People's Workforce Early Learning and Childcare. This includes care co-ordinators who may cover shifts during unforeseen staff absences. The staff team also includes individuals with additional specialist qualifications and experience relevant to the service's registered categories of care.

A professional external to the service fed back, *"Most colleagues I have encountered appear suitably skilled and knowledgeable of the young person and their needs. I have also noted Thrive staff to be actively involved and willing to be trained to ensure they are attentive to their young person and best placed to meet their needs."*

Staff are expected to complete a Level 3 vocational qualification in medication management in line with the Standards. In the interim, training and competency assessments are undertaken to ensure staff can administer medication safely. Records reviewed during the inspection demonstrated robust competency processes.

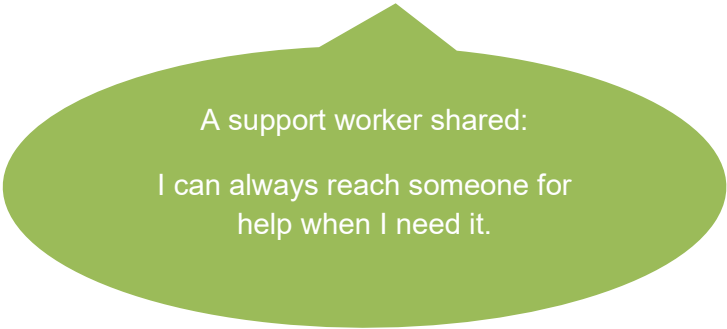
Two Medication Administration Records (MARs) reviewed during the inspection were complete, with entries dated, timed and signed. It was identified that a variable-dose protocol would further strengthen arrangements for the safe administration of one medication. This was discussed with the Registered Manager and Deputy Care Manager, who took immediate action during the inspection.

Support workers generally work in small teams on fixed, rolling rotas, promoting continuity of care and consistent routines for children and young people with complex needs.

Rotas reviewed included opportunities for shadowing and attendance at meetings and training. Effective systems are in place to monitor staffing levels and working hours.

The Deputy Care Manager and care co-ordinators generally have sufficient capacity within their rotas to cover staff absences. They are familiar with the children and young people through their involvement in risk assessments, care reviews and in-home spot checks.

Since the last inspection, a care manager on-call system has been introduced, providing additional support to care co-ordinators operating the duty system. Carers reported feeling well supported by the management team.



A support worker shared:

I can always reach someone for
help when I need it.

The service has a safeguarding policy covering both adults and children, which outlines signs of abuse, reporting and escalation procedures, and the importance of documenting safeguarding concerns. The policy also identifies the support available to staff who raise concerns.

The training matrix confirmed that staff had undertaken safeguarding training, and staff shared they understand their safeguarding obligations. A safeguarding referral reviewed during the inspection demonstrated that established escalation procedures had been followed and that staff had raised concerns appropriately to safeguard the individual's wellbeing.

Evidence also demonstrated collaborative working with other professionals to support a young person's understanding of personal safety and boundaries, with the aim of promoting their own safety and that of others.

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 Statement of Purpose was reviewed as part of the inspection. Following discussion with the Registered Manager, an amendment was made to more accurately reflect the needs of children and young people accessing mental health services.

The service's website provides useful information for prospective representatives of children and young people, including details of fees for packages of care not commissioned by the Government, supporting an open and transparent approach.

Written agreements are comprehensive, appropriately signed and include information about additional fees and arrangements for ending the agreement. The service's mission statement and values are also provided, including information about how to give feedback or raise a complaint.

The Registered Manager is considering developing a child-friendly information leaflet to introduce children and young people to the service that will be in an easy read format.

The service supports children and young people's communication needs by adapting verbal communication and using appropriate aids, including iPads and pictorial boards, to help children and young people express their feelings and preferences. Care records demonstrated that support workers are attentive to non-verbal communication and make reasonable adjustments according to individual needs. This approach supports the promotion of child-led, person-centred care.

A support worker shared:

Communication symbols are helpful for some non-verbal children. Drawings are also good. It depends on the (needs of the) child.

The Deputy Care Manager has undertaken training in Pathological Demand Avoidance (PDA) and demonstrated how communication approaches can be adapted during play and activities to provide individualised support, while also promoting educational aims and completing activities of daily living, including nutrition and personal hygiene.

Is the service caring?

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

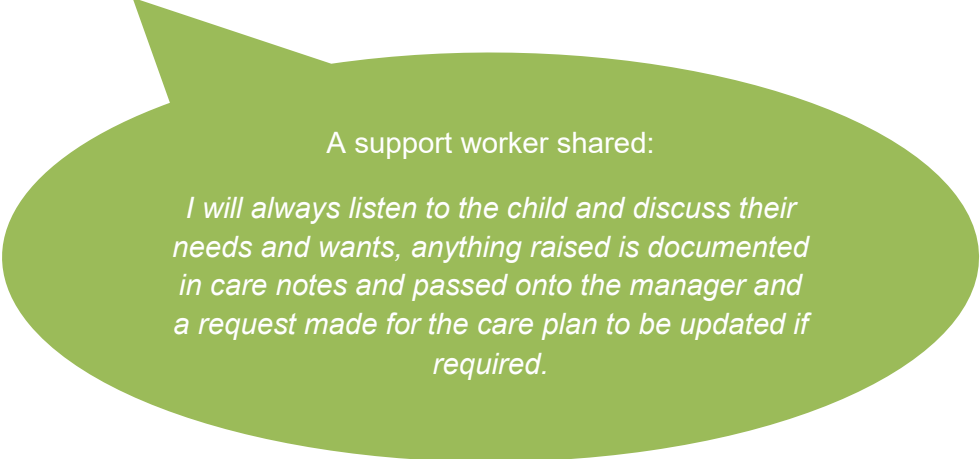
Children and young people are assessed before a care package begins to determine their individual needs and whether these can be met by the service. Initial assessments are completed with the child or young person and their representative and inform person-centred care plans that promote independence, choice and control wherever possible.

An 'About Me' document is completed at the start of each care package, providing detailed information about the child or young person's background, needs and preferences. This supports staff to develop an understanding of the individual and engage with them meaningfully. Where appropriate, preferences for support workers of a particular gender are accommodated.

Care planning involves collaborative working with education, social work and other relevant professionals to ensure individual needs and preferences are understood, and support can be provided safely.

Plans include information about potential triggers that may escalate emotional dysregulation, appropriate responses and clear escalation pathways.

Care plans were written using respectful, positive language and reflected the complexity of individual needs. They were regularly reviewed, updated when needs changed and reflected the views, preferences and choices and participation in decisions about care.



A support worker shared:

I will always listen to the child and discuss their needs and wants, anything raised is documented in care notes and passed onto the manager and a request made for the care plan to be updated if required.

Care records demonstrated that support workers knew the children and young people well and the care provided is in accordance with their individual plans. This included recognising when someone needed space and time alone, supporting activities of daily living, and respecting preferences relating to food. Evidence that support workers identify appropriate approaches to encourage and support engagement with personal care was observed within care plans.

Records also demonstrated that consent was sought where appropriate, including an example relating to switching off a gaming console.

Person-centred risk assessments are in place and reviewed regularly, with dynamic assessment used where appropriate. These cover areas including but not limited to, skin integrity, mobility and support needs relating to emotional regulation.

Clear escalation pathways have been developed in collaboration with the multidisciplinary team to guide staff responses and support safe care.

Handwritten handover records used within the home support effective communication between families, schools and staff and reflect the information recorded electronically by support workers. This supports continuity across the different settings in the child or young person's life, helping them feel comfortable, reassured and secure.

Feedback from a professional external to the service shared, *"I have found there to be clear evidence of a willingness to work collaboratively. Xxx asked about the way the school approaches activities and recognised that young adults with complex needs may require preparation, predictability and sufficient time to process information before being ready to participate in an activity."*

The Registered Manager gave examples of where young people have been supported with a carefully planned transition to adult services, either within the provider's adult home care service or to an alternative service.

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.

There is strong leadership in place, with a clear focus on delivering high-quality, person-centred care through a competent and skilled workforce.

The service operates within a clear governance structure overseen by the Provider/Registered Manager, with a support structure for human resources, finance and training. The Information Technology systems in place support effective care delivery and strengthen governance across the service.

Monthly provider reports and management meetings support oversight of the number of packages of care, staffing, accidents and incidents, training and any safeguarding concerns.

Senior staff are supported to develop the skills required to manage the service in the Registered Manager's absence.

Members of the senior team have progressed internally from support worker roles, providing them with practical knowledge and experience of the service and the staff they support. There is a comprehensive contingency plan in place to ensure continuity of care in unforeseen circumstances, including the absence of the Registered Manager.

Clear processes exist for allocating audit responsibilities and undertaking quality assurance activities. Audits include reviews of staff training, safe recruitment practices and care records, with identified actions tracked to completion.

Care co-ordinators undertake regular in-home spot checks to ensure care is delivered to a high standard, care plans are followed, and records accurately reflect the care provided. Medication administration records are also reviewed during these visits.

Findings are shared at weekly management meetings and further disseminated during monthly care co-ordinator meetings. Staff who are unable to attend meetings are instead informed of outcomes via WhatsApp or emails.

Policies and procedures that are subject to a regular review can be accessed by staff, through their work phones.

An internal incident management system is in place, overseen by the Deputy Care Manager. Incidents are investigated to identify learning and reduce the risk of recurrence. Records demonstrated involvement of a next of kin where appropriate, including communication about the investigation and its outcome. Learning is shared with staff through meetings, individual discussions and internal communication channels. The service is aware of its responsibility to notify the Commission of relevant incidents.

The complaints process is clear and accessible. Complaints reviewed during the inspection were informal and had been resolved to the satisfaction of those raising them.

Annual surveys seek feedback from representatives of children and young people and from staff.

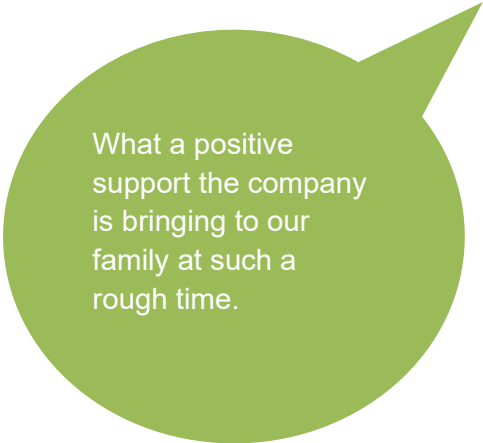
Feedback from representatives was largely positive, including comments about the high standard of care and the positive impact of support provided.

Staff survey responses indicated that workloads were manageable, staff were satisfied with the training provided and most respondents described the culture of the service as “excellent”. Staff feedback was considered by managers, with appropriate responses provided to suggestions raised.

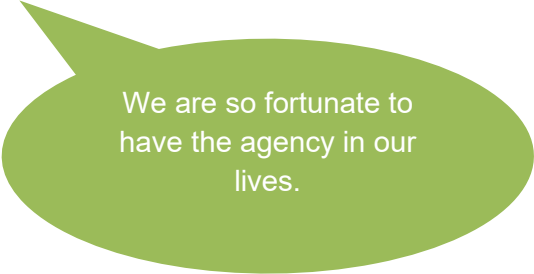
Staff reported feeling well supported by senior colleagues and the wider team. Regular supervision and annual appraisals provide opportunities to reflect on practice, discuss challenges and identify training and development needs. Supervision records also demonstrated that compliments and positive feedback are shared with staff.

Staff wellbeing is a strength of the service. Support includes access to counselling and regular supervision, alongside recognition of staff achievements and personal milestones.

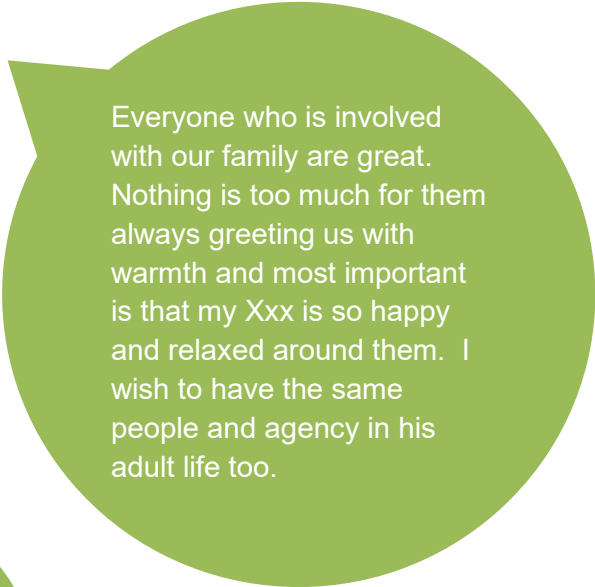
What children and young peoples' representatives said:



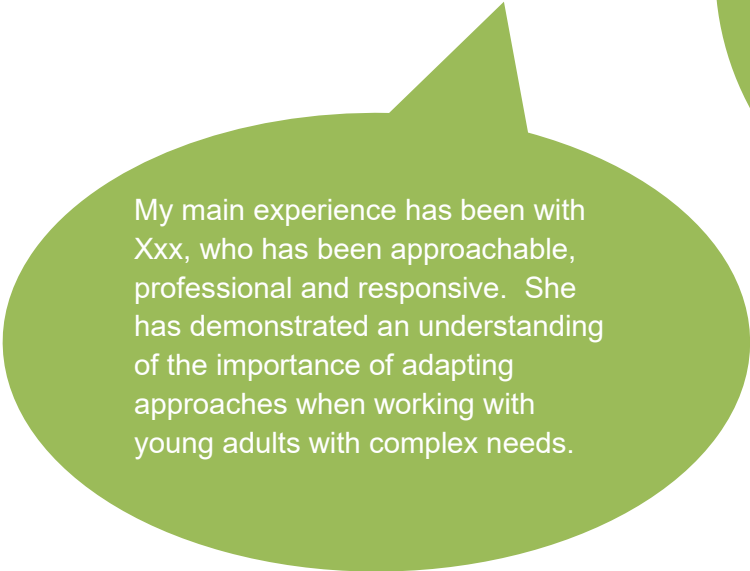
What a positive support the company is bringing to our family at such a rough time.



We are so fortunate to have the agency in our lives.

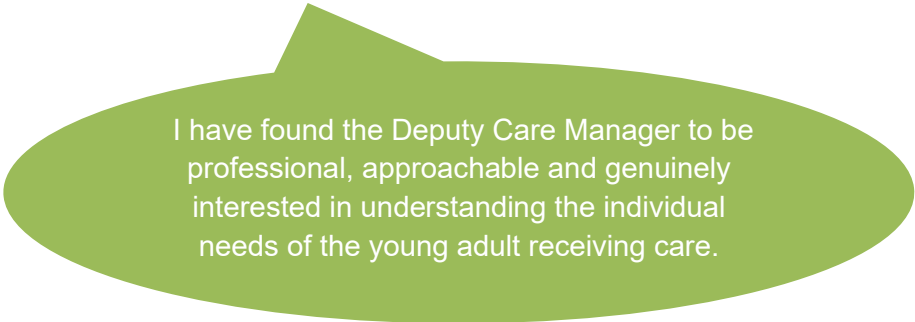


Everyone who is involved with our family are great. Nothing is too much for them always greeting us with warmth and most important is that my Xxx is so happy and relaxed around them. I wish to have the same people and agency in his adult life too.



My main experience has been with Xxx, who has been approachable, professional and responsive. She has demonstrated an understanding of the importance of adapting approaches when working with young adults with complex needs.

A professional's view:



I have found the Deputy Care Manager to be professional, approachable and genuinely interested in understanding the individual needs of the young adult receiving care.

IMPROVEMENT PLAN

There were no areas for improvement identified during this 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.



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