Jersey Care Commission

Summary Report

08 Children's Home

Children's Home Service

The Office of the Minister for Children and Families
Government of Jersey
Union Street
St Helier
JE2 3DN

Inspection Date
14 & 18 September 2026

SUMMARY OF INSPECTION FINDINGS

The following is a summary of what we found during this inspection. Further information about our findings is contained in the main body of this report.

4.1 Progress against areas for improvement identified at the last inspection

This is the home's first inspection.

4.2 Observations and overall findings from this inspection

This inspection found that the home was undergoing a period of development following the appointment of a new interim manager and wider organisational change. The Interim Manager brought previous experience of managing children's homes and had begun strengthening leadership arrangements, staff communication and management oversight. Team meeting structures had been expanded to include agreed values, safeguarding, children's participation, staff wellbeing, training, operational matters and clearly identified actions. Staff consulted during the inspection spoke positively about the direction of the home and the changes being introduced.

The home provided a welcoming environment and the children's records contained comprehensive information about their backgrounds, needs, education, health, family relationships and placement arrangements. A child-friendly 'Young Person's Guide' had been co-created with a care-experienced young person. Participation records showed that children were being supported to express their views through meetings, consultation workbooks, key-worker sessions and activity planning. Medication balances checked during the inspection corresponded with the amounts recorded by staff.

The Interim Manager had taken steps to strengthen oversight of agency recruitment and demonstrated access to recruitment information during the second inspection visit.

Assurance was also provided regarding the checks undertaken through the organisation’s Human Resources department before staff were engaged. However, the inspection identified that further improvement was required in relation to staff training and supervision.

The available supervision records did not demonstrate that all staff had received formal, critically reflective supervision at least every four weeks. Some staff had no recorded supervision, while other records were limited to particular periods or contained supervision sessions clustered within short timescales. The information provided did not consistently demonstrate the quality, reflective content or follow-up actions arising from supervision.

Training evidence showed gaps across both the permanent and agency workforce. Although permanent staff had evidence of completing a greater proportion of the required training, some statutory and mandatory subjects were not evidenced. More extensive gaps were identified in the records for agency workers. The information reviewed therefore did not provide sufficient assurance that all staff had completed the training required for their roles. These areas will require action by the Registered Provider and Interim Manager to ensure consistent staff competence, support and management oversight.

IMPROVEMENT PLAN

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

Area for Improvement 1 **Ref:** Standard 3.10 Regulation 17 **To be completed:** by 25/01/2027	The Registered Provider must ensure that all permanent and agency staff complete the statutory and mandatory training required for their roles, and that accurate evidence of completion is available for management oversight.
	Response by registered provider: A full review of staff training records has been completed and is ongoing through regular management oversight. Training records for both permanent and agency staff will be reviewed and updated routinely to ensure they accurately reflect all completed training. Any gaps in statutory or mandatory training have been identified and staff will be booked onto the relevant courses. Agency and permanent staff will be given equal opportunity to access required training, ensuring all staff possess the knowledge and skills necessary to undertake their roles safely and effectively. Accurate records of training completion will be maintained and monitored through the home's training matrix and quality assurance processes.

Area for Improvement 2 **Ref:** Standard 2.10, 3.11 Regulation 17 **To be completed:** With immediate effect	The Registered Provider must ensure that all staff are given regular opportunities to discuss their role and identify any issues through formal supervision at least every four weeks. All supervision sessions must be recorded.
	Response by registered provider: Formal supervision arrangements are now being implemented in line with organisational policy and Children's Home Standards.

	A supervision schedule has been established and supervision sessions are underway to ensure all staff receive reflective supervision at least every four weeks. Supervision dates are tracked through management oversight systems, with records maintained and monitored centrally to provide evidence of compliance, professional development discussions, and any actions arising from supervision. This will support staff wellbeing, accountability, and the continued delivery of high-quality care.

The full report can be accessed from here.