Jersey Care Commission

INSPECTION REPORT

Eden House

Care Home Service
(Short Breaks Centre)

Les Cloches
Le Squez Road
St Clements
JE2 6BG

Inspection Date
29 October 2026

Date Published
26 November 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 Eden House, a short-break children's home operated by The Office of the Minister for Children and Families. A registered manager is in place.

Registration Details	Detail
Type of regulated activity	Children's Home
Mandatory Conditions of Registration	
Category of care	Children and young people
Maximum number of care receivers	Three
Age range of care receivers	0-18
Maximum number of care receivers that can be accommodated in each room	Rooms 1-3 one person
Discretionary Conditions of Registration	
None.	
Additional information	
On the 18 June 2026 the Commission received an updated Statement of Purpose due to changes in the staffing arrangements for this home. On the 13 July 2026, the Commission changed the registered provider for this home, due to amendments to the Regulation of Care (Jersey) Law 2014.	

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

The inspection was announced seven days in advance to enable the children and young people to be appropriately prepared and informed of the visit. This was considered particularly important given the specialist short-break nature of the service and the individual communication, sensory and support needs of those accessing the home.

Inspection information	Detail
Dates and times of this inspection	29/10/2026 – 8.30 am to 2.10 pm 5.55 pm to 6.30 pm
Number of areas for improvement from this inspection	None
Number of care receivers accommodated on the day of the inspection	Two
Date of previous inspection	28/03/2025 and 15/05/2025
Areas for improvement noted at the last inspection	One
Link to the previous inspection report	2025 Inspection Report

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, one area for improvement was 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 improvement had been made. This means that there was evidence of written agreements for all children and young people receiving care.

4.2 Observations and overall findings from this inspection

The inspection found that Eden House continued to provide safe, caring and individualised short-break care, with children and young people supported by staff who understood their needs and promoted choice, independence, inclusion and positive experiences.

Despite recent challenges with staff availability, the service had continued to maintain appropriate staffing levels, supported by the flexibility and commitment of the existing staff team. This had enabled continuity of care to be maintained without a reported impact on care delivery. Rotas demonstrated an appropriate balance of skills and qualifications, supported by strong compliance with mandatory and needs-led training. Revised induction arrangements, development plans and regular supervision supported staff competence. Staff feedback indicated a positive, open culture with accessible and supportive management.

Safeguarding, incident management, health and safety and fire-safety arrangements were well established. Improvements had been made to incident analysis and post-incident support, encouraging reflection and learning. Medication management was generally safe; however, improved monitoring of minimum and maximum storage temperatures was required.

Care and support were informed by comprehensive assessments, effective multidisciplinary working and detailed short-break plans. Communication was a particular strength, with individualised approaches enabling children and young people, including those communicating non-verbally, to express choices, preferences and feelings. Preparation for each stay was thorough, and activities were planned and reviewed to promote enjoyment, wellbeing, independence and social inclusion.

Leadership and governance remained strong. Quality assurance arrangements included regular audits, management oversight, independent monitoring and newly introduced biannual service-development reporting. An area for improvement identified at the previous inspection concerning written family agreements had been fully addressed.

The service demonstrated a clear commitment to continuous improvement. Overall, the inspection provided positive assurance regarding the quality, safety and responsiveness of the service.

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 reports, the Statement of Purpose and notification of incidents.

The Regulation Officer observed two individuals receiving care during the inspection. Three representatives were invited to provide feedback; however, no responses were received. They also had discussions with the service's management and other staff. Additionally, feedback was provided by one professional external to the service.

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

At the conclusion of the inspection visit, the Regulation Officer provided verbal feedback to the Registered Manager and followed up on the findings of the inspection by email on 5 November 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.

Follow up on previous areas for improvement	
Focus	**Evidence Reviewed**
Written Agreements	Sample of three randomly selected care receiver files
Key lines of enquiry	
Focus	**Evidence Reviewed**
Is the service safe	Induction practice Staff training Staff rotas Staff development plans Review of notifiable events Health and Safety measures in the service Safeguarding practice Whistleblowing practice Environmental risk assessments Medications administration
Is the service effective and responsive	Statement of Purpose Information sharing with families Written agreements Staff culture Mult-agency working Communication approaches Transition planning
Is the service caring	Observations of care delivery Short break care plans Risk assessments Care records Sessional planning Surveys
Is the service well-led	Management reporting Quality assurance measures Policies Supervision and appraisal arrangements Internal communication arrangements Staff survey

6. INSPECTION FINDINGS

Is the service safe?

People are protected from abuse and avoidable harm.

No new employees had been recruited directly to Eden House since the previous inspection in March and May 2025. Two staff members had transferred from other residential homes. Consequently, it was not possible to examine a complete recruitment process undertaken specifically by the service. Through discussion, the Registered Manager evidenced an appropriate understanding of safer recruitment requirements and confirmed their involvement in interview panels and scrutiny of the relevant recruitment documentation.

The wider service had introduced differentiated induction arrangements since the last inspection. Staff who were new to the home completed a full induction, while existing employees transferring to Eden House undertook an express induction. The full induction operated as a working document throughout the probationary period and required employees to reflect on their experiences, learning and observations. This supported the structured development of knowledge and competence.

An additional emergency induction was available for experienced staff from other residential provision who might be required to provide short-notice cover. This document provided staff with essential information about the home and the children and young people using the service, supporting continuity and consistency of care.

The training matrix demonstrated high levels of compliance with mandatory and supplementary training. Training reflected the particular needs of the children and young people using the service and included autism, learning disability, communication, de-escalation and trauma-informed practice. This evidenced that care staff had access to relevant knowledge and skills to deliver safe and nurturing care.

Discussions with the Registered Manager and examination of a sample of duty rotas confirmed that planned staffing levels were consistently maintained. The service had experienced some staffing pressures since the last inspection, and several vacancies remained at the time of this inspection, however this was not currently impacting on care delivery, with the existing staff group demonstrating flexibility and a willingness to support the needs of the service.

Several care staff were trainee practitioners who required additional oversight and support. Comprehensive development plans were in place to assist these staff to progress safely in their roles.

The rotas demonstrated that an appropriate mixture of skills and experience was maintained. At least 50 per cent of staff on duty held the Regulated Qualifications Framework Level 3 Diploma in Children's Residential Care, providing assurance that suitably qualified staff were present to support the safe operation of the home.

Notifiable events were reviewed and had been appropriately reported. The immediate actions taken in response to these events were proportionate. Improvements had been made to the analysis of incidents and the support provided to children, young people and staff following an event.

Health and safety reporting was completed alongside recording within the child or young person's electronic care record. A revised debrief and notifiable incident report had also been introduced. The revised process prioritised the wellbeing of the child or young person and any staff involved, while encouraging reflection, organisational learning and improved outcomes.

No safeguarding referrals or concerns had been reported in relation to Eden House. Where children or young people were involved with statutory children's services, the home maintained appropriate awareness of their circumstances and was involved in relevant professional arrangements. This supported effective safeguarding and information sharing.

No complaints had been made directly to or about the service. The Registered Manager demonstrated an appropriate understanding of the complaints policy and the action that would be required should a concern be raised.

A whistleblowing policy was available, although staff had not needed to use it. Staff spoken with during the inspection reported that they were able to raise concerns openly. Their feedback indicated an open, transparent and no-blame culture in which learning and achieving the best possible outcomes for children and young people were prioritised.

Health and safety arrangements were well established. Infection prevention and control measures were in place, electrical equipment was routinely tested, and water safety checks included temperature monitoring, flushing and testing for waterborne disease.

Fire safety arrangements reflected recommendations made by the States of Jersey Fire and Rescue Service. These included the servicing and testing of alarms and firefighting equipment, emergency-lighting checks, testing of self-closing doors and regularly reviewed personal emergency evacuation plans for each child and young person. Care staff had completed the required fire-safety training, familiarised themselves with the fire risk assessment and participated in fire drills.

Environmental risk assessments were in place and reflected the individual needs of the children and young people. These arrangements demonstrated that environmental safety was given appropriate priority without unnecessarily restricting children and young people's experiences.

Medication management generally met the expectations of the Standards. As Eden House provides short breaks, the primary prescription for medications remains within the family home and the service is unable to obtain a duplicate prescription. Appropriately trained staff transcribe individual prescriptions onto the service's medication administration record (MAR) following best practice principles. The MAR is then independently checked and signed by a parent before the medication was administered.

Medication, including controlled drugs, was stored securely, with arrangements largely consistent with the Standards. However, minimum and maximum storage temperatures were not routinely recorded. Available records also showed that maximum temperatures had exceeded the recommended storage range on occasions, particularly during periods of hot weather earlier in 2026.

The service was advised to source suitable temperature monitoring equipment and implement a consistent recording process. Where temperatures continue to exceed the recommended range, prompt action must be taken to ensure medicines are stored within the manufacturer's specified conditions and their quality and effectiveness are not compromised.

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 largely met the requirements of the Standards. It described the aims and objectives of the service, how care was delivered and the governance arrangements in place. Minor amendments have been provided to the Registered Manager to ensure that the document became fully compliant with the Standards.

The service had a comprehensive information leaflet for children, young people and their families in place. Parents and family members were also invited to visit Eden House before the service commenced. These visits allowed families to view the environment, meet staff and obtain information about how the service would meet their child's individual needs.

An area for improvement identified at the previous inspection related to ensuring that every family had a written agreement had been fully addressed. The agreements clarified the responsibilities and expectations of the home and families, and the Registered Manager reported that the process had been positively received. This was no longer considered an area for improvement.

A positive culture of continuous improvement was evident, with staff encouraged to reflect on practice, learn from experiences and adapt their approach where activities or interventions did not achieve the intended outcome. This approach focused on supporting children and young people increase their independence and safely extend their experiences beyond familiar people, places and routines.

Eden House maintained strong working relationships with the allocated social workers for children and young people using the service. Social work assessments were supplemented by information from professionals including speech and language therapists, dietitians and Positive Behaviour Support services.

This information contributed to a holistic understanding of need and informed the development and review of short-break plans. Relevant professionals were consulted when necessary, supporting coordinated and responsive care.

A range of communication aids were in place and were clearly evident in the delivery of care. These aids supported children and young people to communicate their wishes, feelings, choices and concerns, including whether they felt safe or unsafe.

One staff member commented:

I love problem solving and seeing children and young people increasing their communication skills so they can be better understood.

Communication approaches included Makaton, Widget symbols, picture communication boards, Zones of Regulation and social stories. Where staff developed a communication aid that improved an individual child or young person's communication, this was shared with their school and family. This promoted consistency across the different settings in the person's life.

Social stories had been used successfully to explain situations, expectations and upcoming events in an accessible format. The communication arrangements demonstrated a strong commitment to recognising non-verbal communication and enabling each child or young person to participate meaningfully in decisions about their care.

The initial assessment process also gathered detailed information about food and drink preferences. This was reflected in the short-break plans examined during the inspection.

Staff respected established food and drink preferences while, with the agreement of parents and carers, supporting children and young people to gradually explore a wider range of options, including healthier choices. Examples demonstrated positive progress, with individuals becoming more confident in trying and accepting previously unfamiliar foods while maintaining choice and familiarity.

Children and young people were supported to become familiar with Eden House before their short break, at a pace that reflected their individual needs and preferences. Staff recognised that some children and young people developed the confidence to stay at the home relatively quickly, whereas others required a longer period of preparation before spending a night away from the family home.

Arrangements were also in place to support young people moving into adult services. The Registered Manager and staff had worked closely with another provider to support a recent transition, which had achieved a positive outcome for the young person.

Is the service caring?

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

Interactions observed during the inspection were warm, respectful and engaging. Staff adopted a child-centred and individualised approach and responded appropriately to each child or young person's preferred communication style.

A professional commented:

Staff are kind and compassionate about what they do and hold young people in mind in relation to what is best for them and how to work with them.

Appropriate humour and familiarity supported positive relationships while preserving dignity and respect. Staff did not focus solely on completing immediate care tasks. They consistently promoted choice, independence, development, social inclusion and access to meaningful experiences within the community.

Information about each child or young person's interests, preferences, likes and dislikes was gathered from parents and carers and incorporated into their short-break plan. This informed individualised planning for each stay, including relevant risks, appropriate control measures and intended outcomes. Children and young people were consulted about activities, snacks, meals and drinks, with staff observed offering meaningful choices and seeking consent in ways appropriate to individual communication needs.

Preparation before each stay was a notable strength. Staff ensured that the environment and support arrangements were appropriately tailored and that planned activities provided opportunities for enjoyment, new experiences, social inclusion and wellbeing. These were reviewed to establish whether children and young people continued to enjoy and benefit from them. This evidenced a responsive and person-centred approach, with individual preferences and assessed needs translated into the practical delivery of each short break.

Where appropriate, staff also undertook observations within the child or young person's school to develop a broader understanding of their communication and support needs. The Registered Manager demonstrated an appropriate understanding that behaviour or presentation within a busy educational environment may differ from that observed in a quieter residential setting, particularly where consistent and well-coordinated support strategies were in place. This displayed a thoughtful and individualised approach to understanding each child or young person across different environments, rather than relying on observations from a single setting

A sample of care records was examined. Files were consistently organised and contained comprehensive person-centred short-break plans and relevant risk assessments. Plans were agreed and signed by parents or carers and the Registered Manager.

Each child and young person was allocated a key worker. Key workers were responsible for maintaining the individual's file and reviewing short-break plans and risk assessments monthly, or sooner when needs changed. Records clearly evidenced what had been reviewed and the date on which the review had taken place.

With parental consent, care staff routinely took photographs of children and young people participating in activities and developing daily living skills. Photographs were shared with families to demonstrate how sessional plans were being delivered and to highlight achievements and progress, including increased community participation and success in broadening food and drink choices. This provided families with meaningful evidence of their child's experiences and progress during their short-break stay and supported ongoing communication between the service and home.

The service completed annual surveys with parents and carers, and the feedback received was consistently positive. This indicated that the service had a beneficial impact not only on the children and young people attending Eden House, but also on parents, carers and other family members.

The service recognised that conventional feedback methods were not appropriate for every child or young person. Staff therefore used direct questions, observation and individual communication aids to identify preferences and positive or negative responses. This enabled children and young people, including those communicating non-verbally, to have their experiences recognised and reflected in their care and support.

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.

Eden House had undergone significant refurbishment approximately two years previously. The premises remained fit for purpose, providing an environment that supported the needs of the children and young people using the service.

An Island-wide review of short-break services had recently taken place to consider whether Eden House was being used effectively and efficiently. Since the previous inspection, the wider service has introduced a biannual reporting process to support ongoing service development. The report completed by the Registered Manager identifies development priorities and planned actions, including targeted staff training aimed at strengthening practice and improving outcomes for children and young people.

Quality assurance arrangements included monthly independent visitor reports, monthly management reports, annual peer-review meetings, monthly audits of children and young people's records, weekly medication audits and daily audits of controlled drugs. These processes provided regular oversight of care delivery and service governance.

A new suite of policies and procedures had been introduced, including a policy specifically addressing short-break provision. The Registered Manager recognised that, as these policies were newly introduced, ongoing review and refinement would be required to ensure they reflected the specific needs and operation of the home. The revised framework was, however, already providing staff with clearer guidance and greater assurance in their day-to-day practice.

A comprehensive policy addressing discrimination was also available, although the service had not needed to implement it in response to a specific incident.

A business continuity plan was in place. The Registered Manager showed an appropriate understanding of how the service would respond to disruption and drew on previous experience of temporarily relocating the service during refurbishment. The Registered Manager reflected that continuity of experienced staff; familiar routines and a clear understanding of individual needs were more important to children and young people than the physical location in which care was provided. This showed a person-centred approach to continuity planning.

The supervision matrix evidenced that staff supervision was taking place at the frequency expected in the Standards. A sample of supervision records showed that sessions were of an appropriate quality and began with consideration of staff wellbeing.

Appraisals were linked to individual staff development plans and completed through the Government of Jersey's Connect People arrangements. Staff also had regular opportunities to provide feedback through post incident debriefing, daily handovers, weekly team meetings and supervision.

One staff member commented:

When we get is wrong, the team are good at being reflective and picking apart what went wrong and then making the necessary changes.

Leadership at Eden House remains strong. The home was well organised and inspection-ready, and staff were welcoming and supportive throughout the inspection process.

A staff survey undertaken by the Regulation Officer was positive regarding management support, supervision, training and workplace culture. Staff felt listened to and able to contribute to service development, describing a child-centred approach that promoted choice, independence and positive outcomes. Induction arrangements were also viewed positively.

The Registered Manager demonstrated a clear understanding of the service, the needs of the children and young people, and the areas requiring continued development. The culture promoted openness, reflection and continuous improvement, with a consistent focus on achieving positive outcomes for children and young people.

Additional feedback from care staff:

"I was attracted to working with children and young people with autism and complex needs. When we as carers better understand their communication, it helps improve outcomes and social inclusion."

"The environment I work in is amazing and is a brilliant space for children and young people. Over the years of working here. I have learnt how communication is such a big part of getting it right for children and young people. We are a supportive team, and I feel listened to and not just a number."

"We are a close team who are supportive of each other. We are open to challenging each other to improve outcomes and experiences for the children and young people who access this home. Not all children like the larger space, so it is great to have different areas in the home to meet individual needs."

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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