

**JOINT REPLY BY THE PRESIDENTS OF
THE COMMITTEE FOR HEALTH & SOCIAL CARE
& COMMITTEE FOR EDUCATION, SPORT AND CULTURE
TO QUESTIONS POSED BY DEPUTY GAVIN ST. PIER PURSUANT TO RULE 14 OF THE
RULES OF PROCEDURE**

Question

In February 2026, Mary Webb delivered a report, having been commissioned by the Committees to conduct an external review of Complaint 25123 and Appeal. In light of this, I am submitting the following questions to both Committees for a joint or separate responses, as appropriate.

1. Independent Review and Implementation

1. Could the Committees please tabulate what action, if any, has been taken to implement each recommendation?
2. What are the timelines for delivery and reporting against the recommendations?
3. What processes are in place to ensure findings from independent reviews are implemented, and how is progress monitored and reported publicly?

2. Legal Compliance and Framework

1. To what extent do the Committees consider services for children and families to be fully compliant with the Children (Guernsey and Alderney) Law 2008, and what assessment supports that view?
2. Are there any plans to review or amend the Law in light of recent findings, and if so, what is the proposed timeline?

3. Governance, Oversight and Accountability

1. What formal governance framework is in place to ensure children's services operate within a system of statutory accountability, and when was this last reviewed?
2. What mechanisms are in place to ensure senior level oversight of identified failings, and how is accountability maintained where systemic issues arise?
3. How do the Committees ensure complaints processes form part of a wider accountability framework, rather than operating in isolation?

4. Early Intervention and Thresholds

1. In light of the independent reviewer's observation that the Children Law's definition of neglect requires "persistent failure," creating a high evidential threshold, which is particularly difficult to meet in cases involving very young children, has any consideration been given to changing the definition of 'neglect' to remove any barriers to earlier intervention, particularly for very young children?

5. Independent review processes

1. What arrangements are in place to ensure that complainants can provide evidence directly to an independent reviewer for consideration during the course of a review or investigation?
2. What process exists for complainants to respond to or contribute to clarifications, fact check or follow up questions before finalisation of an independent report?

Answer

Whilst the majority of the questions asked by Deputy St Pier relate to services delivered under the mandate of the Committee *for* Health & Social Care, the Committee *for* Education, Sport & Culture has added to the responses made by the Committee *for* Health & Social Care where operational processes or approaches might differ.

1. Independent Review and Implementation

As with all recommendations arising from reviews, actions will be prioritised according to relative urgency and discharged as soon as practicable. Public reporting is undertaken where appropriate, having regard to confidentiality obligations and the nature of the matter under consideration.

In this particular case, processes in relation to this matter are ongoing, and with this regard a task and finish group is in the process of being organised to ensure that all the actions raised are appropriately completed.

Specifically in response to the six recommendations contained within the report, the Committees can provide the following update:

Recommendation 1

That the Committees of the States of Guernsey work together to produce an integrated complaints policy that is clear, simple, coordinated and transparent, with lines of responsibility and accountability.

Both Committees would welcome the introduction of an integrated States of Guernsey complaints policy, as they believe that the process of submitting a complaint should be simple and transparent, regardless of the service area concerned. While the creation of such a complaints policy is not within any one Committee's remit, the Committees understand that work has begun to address customer services standards across the board for the States and that such work will involve consideration of the various complaints processes and procedures that exist.

In addition, the Committee *for* Health & Social Care has set up a Complaints Learning and Working Group to look specifically at HSC's complaints process and this group will ensure that its findings are shared where to do so would be mutually beneficial.

Officers from the Committee *for* Education, Sport & Culture continue to work closely with colleagues in MASH (Multi Agency Support Hub) and right across HSC services to align and integrate complaints processes where appropriate.

Finally, the States Early Years Team (SEYT) was already reviewing and updating its complaints procedure when the initial complaint was submitted. Since then, the SEYT complaints process has been integrated into the wider Education, Sport & Culture Complaints Procedure.

Recommendation 2

That there is explicit information on the website about how to make a complaint, including clarity about when a concern is identified formally as a complaint.

The Committees expect this will be considered as part of the work to integrate complaints processes.

With regard to the States Early Years Team, information relating to complaints is available on the SEYT webpage and was updated in January 2025.

General complaints procedures are available on gov.gg.

Recommendation 3

That there is explicit information on the website about how to make a safeguarding referral about private providers of children's care and where responsibility lies for investigations.

Information on making a safeguarding referral is available on the Government of Guernsey Child Protection and Multi-Agency Support Hub (MASH) webpage on gov.gg.

The Islands Safeguarding Children Partnership (ISCP) has also developed a Guernsey & Alderney Safeguarding Procedures Manual which provides comprehensive guidance for professionals and members of the public on recognising safeguarding concerns, making referrals, information sharing, and the responsibilities of partner agencies. This is available on their website.

The current ISCP website can be difficult to navigate and would benefit from a refresh to improve accessibility and the user experience. Work is currently underway to develop the new ISCP website, which is planned to become operational from Quarter 4 2026.

The new website will provide a more accessible and intuitive platform and will include direct links to the publicly available ISCP Tri.x Manual, making safeguarding information and referral guidance easier to locate for both professionals and the public.

The appointment of the Designated Safeguarding Officer enables multiple service areas to develop a cross-Committee process to further strengthen and coordinate safeguarding referrals. This new role, their responsibilities and processes are all made available on the appropriate webpages.

Recommendation 4

That the oversight and review process of all daycare providers is robust, to ensure continuing improvements and raised standards.

The States Early Years Team has in recent years been working closely with the Law Officers to implement the Childcare Ordinance. This work includes the development of a Regulation and Compliance Policy and the strengthening of regulatory and quality assurance arrangements.

In addition, the Quality Assurance Framework has been reviewed and strengthened to align with the Childcare Ordinance and support a robust regulatory process. These arrangements include clear mechanisms for regulatory intervention where providers fail to meet required standards.

The Early Years Quality Standards and Regulation and Enforcement Policy has also been reviewed and updated, providing clearer mechanisms for monitoring, support, challenge and escalation where providers fail to meet required standards. SEYT had a separate external review in September 2025 and recommendations and resulting actions which formed part of the work to update and ensure robust processes are in place. The work on the regulations that sit under the Childcare Ordinance has enabled the cohesive coordination of this overall process. Further external reviews will become part of an ongoing quality assurance cycle for the SEYT.

Recommendation 5

That training in understanding the risks and vulnerabilities of children with additional needs and disabilities is made available to all staff working with children.

The States Early Years Team has significantly strengthened its support for inclusive practice across the early years sector in recent years.

The High Quality Inclusive Practice Guidance has been developed specifically for the early years sector, and ongoing training continues to support implementation of this guidance and promote high-quality teaching and learning for all children.

All early years practitioners are required to complete Level 2 Safeguarding Children training, while Safeguarding Leads and Deputy Leads must complete Level 3 Safeguarding Children training. In addition, SEYT facilitates termly Safeguarding Leaders Forums and ALNCo Forums to disseminate professional updates, guidance and training opportunities.

The CACHE Level 3 Early Years SENDCo Award has been fully funded by SEYT and ten Additional Learning Needs Coordinators (ALNCos) have, to date, successfully completed the qualification.

Specialist training is also delivered in partnership with practitioners and specialists to develop better understanding of autism and support early years professionals to adapt their interactions, environments and provision to meet children's needs effectively, with a clear focus on supporting the individual needs of the child.

In addition to workforce development, practical resources and support are available to settings through the Inclusion Resource Library, which enables providers to borrow specialist equipment and resources, including larger items such as rockers and spinners. Settings can also apply for Inclusion Funding to support additional staffing or resources where required to meet children's individual needs.

The SEYT's Early Years Inclusion Officer and Early Years Speech and Language Therapist work closely together to support settings, practitioners and families. They provide advice on inclusive practice, interventions and pathways to additional support, strengthening both the universal offer and early help provision available to children and families. This integrated approach also supports effective working across HSC and ESC services.

Recommendation 6

That senior staff meet with [the complainants] to hear how they would like to move forward following this review.

This recommendation relates to individual actions arising from the review and has been considered separately from the wider service improvements outlined above. It would not be appropriate for either Committee to comment in any detail, however the Head of Early Years met with the complainants in February 2026.

Conclusion

The Committees would note that a Designated Safeguarding Officer (equivalent of a Local Authority Designated Officer) has now been recruited and has very recently taken up this post and is currently being onboarded into their role. This will further strengthen Guernsey's safeguarding network and addresses an issue identified in the wider report.

The States Early Years Team has made significant progress in addressing the recommendations arising from the review and is committed to a cycle of continual review and improvement.

Complaint process alignment is intended to ensure processes are as simple and transparent as possible, and this work continues.

The Committees also remain dedicated to reviewing complaints processes more widely.

2. Legal Compliance and Framework

The Committee for Health & Social Care and the Committee for Education, Sport & Culture are committed to complying with their obligations under *The Children (Guernsey and Alderney) Law 2008*.

The Committee for Health & Social Care acts within a system of checks and balances so that anyone with concerns can raise them appropriately. These checks and balances include, but are not limited to, Independent Reviewing Officers for children in care, the Family Court, the Office of the Children's Convenor, the Child, Youth and Community Tribunal, complaints procedures for children, parents and carers (currently under review), the Administrative Review Board, and the availability of Judicial Review of decisions, acts or omissions. In addition, the Committee publishes its statutory Children's and Young People's Plan in accordance with section 28 of the Law, which are submitted to the States and publicly available at <https://www.gov.gg/CYPP>.

The Committee operates within this framework of oversight and accountability and is not aware of any independent assessment concluding that the legislative framework is inadequate to support compliance with the Committee's duties under the Law.

The Children (Guernsey and Alderney) Law, 2008 has been the subject of formal independent reviews, including those undertaken by Kathleen Marshall (2015) and Martin Thornton (2021).

The Outcomes Report arising from the Thornton Review contained a number of recommendations for legislative reform. The majority of these recommendations were considered by the States in November 2022. Amendments to the Law were approved by the States in April 2025 and received Royal Assent in April 2026. Work is currently underway to implement those changes, with commencement planned during 2026.

In addition, wider improvements continue to progress, including the development of secondary legislation relating to children in care and care leavers, together with a range of procedural and operational improvements identified through previous reviews.

Implementation of the approved legislative changes is an agreed priority within the Government Work Plan 2026–2029. A second phase of legislative modernisation, informed by the independent reviews and wider service developments, is expected to be progressed during the current political term. This includes proposed reforms to the regulation of private fostering, which the Committee intends to bring before the States for consideration during 2026.

3. Governance, Oversight & Accountability

Children and Family Community Services operate within a robust service-level governance framework that aligns with the wider Quality Governance arrangements underpinning health and social care provision. Performance information is reported monthly to the Corporate Management Team (CMT), providing oversight of service delivery and supporting organisational accountability.

Areas of risk, concern, emerging trends, and complaints are identified through established governance processes and escalated where appropriate. These matters are considered by a dedicated Task and Finish Group, which reviews findings and recommendations and oversees the implementation of any required actions and service improvements.

In addition, the current HSC Committee has introduced dedicated Operational Committee meetings. Held quarterly, these meetings provide Members with management information relating to the delivery and operational performance of children's services, strengthening oversight, scrutiny, and accountability.

Children's services are also subject to wider statutory accountability and safeguarding oversight through the Islands Safeguarding Children Partnership (ISCP), which now provides strategic multi-agency scrutiny of safeguarding practice, performance and outcomes across agencies, supporting a coordinated approach to protecting children and promoting their welfare.

The governance arrangements for the ISCP are set out in Regulations made in 2010 under the Children (Guernsey and Alderney) Law, 2008. These arrangements are currently under review in response to recommendations arising from the Outcomes Report following the Thornton Review. The ISCP is independently chaired and accountable to a Senior Officer Child Protection Group.

In children's services, accountability is further strengthened through multi-agency safeguarding arrangements. Risks or themes identified through complaints may inform consideration by the ISCP, ensuring that complaints are assessed alongside wider evidence relating to service quality, safety and system performance.

The complaints framework also includes requirements for monitoring, reporting and organisational learning. Complaint trends, root causes and resulting actions are reviewed through governance and quality assurance processes, enabling senior leadership to assess whether concerns are being appropriately addressed and improvements implemented.

Whilst the Committee is not routinely involved in the detailed operational analysis of individual cases, Members are provided with high-level management information regarding complaints, emerging themes and service-wide issues to support effective oversight.

Current work to develop a more integrated complaints approach—including independent audit activity, public and staff listening exercises, and the work of the Complaints Learning Working Group - is intended to further strengthen transparency, organisational learning and accountability across health and social care services.

Likewise for services operating under the Committee *for* Education, Sport & Culture mandate, complaints (and the processes that support the management of complaints) are subject to regular review by senior leaders. This enables recurring themes, risks and areas of concern to be identified and addressed. It also helps ensure that learning from complaints contributes to service improvement and wider organisational understanding, rather than being considered solely as individual cases.

4. Early Intervention and Thresholds

The independent reviewer stated in her report that:

"There is a definition of neglect in the Children (Guernsey and Alderney) Law 2008 which speaks of 'persistent failure...' which is hard to comprehensively evidence, particularly with such a young child."

However, the Committee *for* Health & Social Care notes that the *Children (Guernsey and Alderney) Law, 2008* does not contain a statutory definition of neglect. The Committee is therefore unable to identify the basis of this error to which the observation relates.

In Guernsey and Alderney, services working with children and families generally rely on the definition of neglect set out in the Islands Safeguarding Partnership's Neglect Strategy. That definition is the same as that set out in the UK Government's guide to multi-agency working to help, protect and promote the welfare of children, '*Working Together to Safeguard Children*' which applies to all organisations and agencies in England who have functions relating to children.

The Committee has considered the reviewer's observation that the definition creates a high evidential threshold, particularly in relation to very young children. However, the

Committee is not aware of evidence demonstrating that the definition of neglect currently used within local safeguarding arrangements acts as a barrier to earlier intervention. Nor is it aware of evidence suggesting that amendment of the definition is required in order to support timely safeguarding action.

The Committee considers that decisions regarding intervention are informed by a range of factors, including professional assessment, safeguarding procedures, multi-agency working and the individual circumstances of each child and family. Accordingly, there are currently no specific proposals to amend the definition of neglect on the basis identified by the reviewer.

5. Independent review processes

The arrangements for independent reviews are determined by the terms of reference established for the particular review and may therefore vary depending on the nature, scope and purpose of the exercise being undertaken.

Where appropriate, an independent reviewer may receive information from a range of sources, including relevant documentation, officers, professionals and other individuals considered necessary to inform the review. The manner in which evidence is gathered, considered and tested is a matter for the independent reviewer in accordance with the agreed terms of reference.

In general, this engagement will include complainants, where this is necessary and appropriate to fulfil the purpose of the review and its terms of reference. In most cases, this will provide complainants with an opportunity to share relevant information or evidence directly with the reviewer, unless the nature of the review or particular circumstances make this inappropriate.

There is no prescribed process requiring complainants to review, fact-check or comment upon draft findings prior to publication of an independent report. Independent reviewers are commissioned to reach their own conclusions based on the information available to them and in accordance with their terms of reference.

However, where clarification of factual matters is required during the course of a review, it is for the independent reviewer to determine what further enquiries are necessary, from whom information should be sought, and how any additional evidence should be considered before finalising their report.

Any Committee would generally expect any independent review to be conducted in a manner that is fair, proportionate and consistent with its agreed terms of reference and the principles of natural justice.