



**Jersey Care  
Commission**

# **INSPECTION REPORT**

**Jersey Women's Refuge**

**Care Home Service**

**PO Box 708**

**St Helier**

**JE4 0PW**

**28 April 2021**

## THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014, all providers of care homes, home care and adult day care services must be registered with the Jersey Care Commission ('the Commission').

This inspection was carried out in accordance with Regulation 32 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.

## ABOUT THE SERVICE

This is a report of the inspection of Jersey Women's Refuge. The service offers temporary emergency accommodation and personal support to women and their children who have been subjected to domestic or sexual violence. Through support and practical help, the refuge aims to support women deal with their crisis and plan for their future. As the refuge is considered a safe house, the address and location of the service will be kept confidential. The service address has a PO Box reference which is considered essential for keeping women and children safe. The service is in proximity to local amenities.

The age range of care receivers is from five years and above, which means that children who are admitted with their mothers may receive a programme of personal support if considered necessary. Not all children will require a programme of support to be provided to them. The service became registered with the Jersey Care Commission on 9 October 2020.

Regulated Activity	Care Home
Conditions of Registration	<u>Mandatory</u>  Type of care: Personal support Category of care: Domestic violence Maximum number of care receivers: 22 Maximum number in receipt of personal support: 22 Age range of care receivers: 5 years and above  <u>Discretionary</u>  The registered manager must obtain a Level 5 Diploma in Leadership in Health and Social Care by 9 October 2023.
Date of Inspection	28 April 2021
Time of Inspection	11:30am – 3:15pm
Type of Inspection	Announced

Number of areas for improvement	Three
Number of women accommodated on the day of the inspection	One

The Care Home is operated by Jersey Women’s Refuge and the registered manager is Marine Oliveira.

The home’s Statement of Purpose was provided for registration purposes and a revised version was submitted to the Commission on 2 December 2020, which reflected a change to the service whereby women who have experienced sexual abuse will also be offered accommodation and personal support.

This is the first inspection since the care home was registered on 9 October 2020.

## 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.

The home offers temporary crisis accommodation to women and their children who have experienced domestic and sexual violence. The service provides good practical support and advice to women at a time of crisis in their lives; this was evidenced by one woman’s feedback who was resident in the home at the time of the inspection. She spoke of the immediate response that she had received when she made telephone contact with the service and described the staff team as being non-judgemental.

Women are allocated a key worker when they move into the home who provide support on a one to one basis and help signpost them to appropriate services in the community. The person residing in the home at the time of inspection, spoke positively of her keyworker and the opportunity to meet and discuss issues of relevance. There are courses provided to help people cope with their previous experiences and to help prepare to keep themselves safe in the future.

There were some gaps within the recruitment process in that there was an absence of criminal records checks for some newly recruited staff. This had been acknowledged prior to the inspection, and suitable arrangements had been put in place to remove those staff from having contact with women and their children until all recruitment checks are provided. Nonetheless, the provider must ensure that a safe recruitment policy is developed to underpin safe recruitment practices and be able to demonstrate that all staff are recruited safely. This is an area for improvement.

The registered manager has completed specialist training in domestic abuse and is completing a diploma in leadership in health and social care. The manager is supported by an all-female staff team, the majority of whom were recruited into their

roles last year. Permanent staff have access to relevant training and supervision; and bank staff will be provided with the same opportunities to ensure their skills and knowledge are kept up to date.

There is a robust approach to quality monitoring which recognises the areas to improve upon and strengthen the service's operation. A comprehensive review is completed each month and gaps are highlighted with the expectation that these are addressed. Feedback from the person who was spoken with during the inspection, confirmed that her views had been sought as part of the most recent quality review.

There are some areas for improvement in terms of developing and implementing several key policies which will assist in the safeguarding of all women admitted into the home. Women should be informed of how to raise complaints outside of the organisation and this is another area for improvement.

## INSPECTION PROCESS

This inspection was announced and notice of the inspection visit was given to the registered manager five days in advance. This was to ensure that the registered manager would be available during the visit and to also give notice of the inspection visit to people residing in the home. The inspection was carried out by one female Regulation Officer who adhered to the service's infection prevention measures.

The Care Home Standards were referenced throughout the inspection.<sup>1</sup>

This inspection focussed on the following lines of enquiry:

- Staff recruitment, training and development
- Safety
- Staff competence relating to categories of care provided
- Management of services
- Governance and quality

Prior to our inspection visit, all of the information held by the Commission about this service was reviewed.

The Regulation Officer sought the views of one person who was residing in the home at the time of inspection and spoke with the manager and two members of support staff. We requested, through the manager, to request feedback from four people who had previously accessed the refuge earlier in the year although no responses were received.

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<sup>1</sup> The Care Home and all other Care Standards can be accessed on the Commission's website at <https://carecommission.je/Standards/>

The Regulation Officer contacted several health professionals by email to request feedback of their experiences and one person provided a summary relating to the support provided to women by the independent domestic violence adviser in the community.

During the inspection, records including policies, care records, quality monitoring reports and complaints were examined. This inspection included a limited tour of the premises.

At the conclusion of the inspection, the Regulation Officer provided feedback to the registered manager.

This report sets out our findings and includes areas of good practice identified during the inspection. Where areas for improvement have been identified, these are described in the report and an action plan attached at the end of the report.

## INSPECTION FINDINGS

### Staff recruitment, training and development

Reference was made to Standard 3 of the Care Home Standards which states: "You will be cared for and helped by the right people with the right values, attitudes, understanding and training."

The discretionary condition on registration relates to the manager's qualifications. The registered manager advised that they had enrolled on a Level 5 Diploma in Leadership in Health and Social Care although the course had been temporarily put on hold due to the pandemic. The manager expressed a level of dissatisfaction with the limited support that they had been provided with from the education provider. However, they anticipated being able to obtain the qualification within the identified timeframe for completion. The manager has also completed specialist training in domestic violence.

The registered manager explained that staff turnover during 2020 was high with several support staff having left the service. There is an all-female staff team of five support workers who were recruited last year. The manager spoke in positive terms of the new staff team and a confidence in their abilities to fulfil their roles. An examination of staff personnel files highlighted some gaps in the recruitment process. This had been identified as part of the service's quality monitoring arrangements and appropriate measures taken to remove staff from working with women and children until all safe recruitment checks are provided.

Some examples included an absence of criminal records checks and the reference obtained for one recently recruited domestic worker was not from the worker's current employer. The failure to evidence a safe recruitment process and supply staff to work in the home has the potential to place women and their children at risk.

This is an area for improvement. It has been recognised as part of the service's ongoing quality assurance processes that the safe recruitment policy is to be updated. The home should have a safe recruitment policy in place to set out the values, principles and policies underpinning the approach to recruitment and selection. This is an area for improvement.

The staffing levels in the home and the on call managerial arrangements were described by the registered manager who explained that they are in the process of being reviewed. This is in recognition that the duration of shifts worked by support staff may be excessive in length and have a negative impact upon work performance. One member of support staff who was spoken with as part of the inspection, explained to the Regulation Officer that the length of their shift was demanding, and that they felt fatigued and ineffective at times as a consequence.

The registered manager and two support staff described the opportunities for sharing communication amongst the team and the arrangements for supervision. This allows the team to meet weekly to share their experiences and knowledge with each other and monthly case management reviews allow for discussions about caseloads and practice issues. Support staff described that they also are provided with regular supervision with the manager to discuss their work and issues that may have arisen and additionally all front-line staff can benefit from supervision from an external professional. Bank staff however have not been provided with the same level of supervision as full-time staff and there is a plan in place to address this.

One member of support staff described their induction programme as comprehensive and detailed and they felt that it had equipped them with a good level of knowledge to carry out their role. They spoke of the ways in which they had responded to various enquiries to support women in crisis situations. Both members of support staff spoken with, described that there are supportive management structures in place and expressed confidence that any issues would be dealt with. The registered manager suggested that the induction programme for new support staff could be improved upon and aims to review the content so that it is specific to the requirements of the role.

The manager explained that essential training subjects for all staff include the safeguarding of adults and children, principles of confidentiality and domestic abuse awareness. One member of support staff described that they were in the process of preparing some work for accreditation in a domestic abuse course they had completed. Another member of staff is undertaking a Level 4 counselling course. Arrangements are being put into place so that bank staff can be provided with relevant training during the evenings and weekends to fit around their work schedules.

Due to the pandemic, the majority of training for staff was provided online. The manager explained that training is an area of focus and she has been in consultation with a local training provider to provide vocational training relevant to the type of support that is provided by the refuge. The outcome of the most recent monthly quality report showed that the records relating to staff training and evidence of certificates needs to be improved upon. The manager confirmed that this is being

addressed and that the training matrix will be updated to reflect staff training achievements.

## Safety

Reference was made to Standard 4 of the Care Home Standards which states: “You will feel safe”.

The home was found to be clean, tidy, and suitably equipped during the inspection visit. Measures to maximise the safety of people whilst residing in the home and the security arrangements of the building were explained. The home was found to be as domestic in appearance as possible and women are provided with their own bedrooms and share communal facilities. The bedrooms are of various dimensions to allow for family units to be accommodated where necessary. The children’s playroom was, at the time of the inspection visit, out of action due to the pandemic, although the manager confirmed that this was to be reintroduced in line with the easing of restrictions.

Support staff who were spoken with, described the practical support and guidance that they provide to women about keeping themselves and others safe whilst they are living in the refuge. Women are provided with written information which explains about the rules of the home and how to maintain people’s confidentiality and safety. During a discussion with one person who was residing in the home at the time of inspection, she said that she felt extremely safe and commented that the staff presence was extremely reassuring for her. She explained that she had received an almost instant response to her request for help and arrangements were put into place to allow a move into the refuge.

The manager and support staff described that they make referrals to various agencies as part of their safeguarding responsibilities and make referrals to MASH (Multi Agency Safeguarding Hub) where children are admitted into the refuge. One member of staff attends the MARAC (Multi Agency Risk Assessment Conference) which is aimed at ensuring risks to women and children are minimised. Support staff explained that part of their role is to signpost women to relevant services and if necessary, can also provide support to women to attend appointments with external agencies.

The Commission received a notification of incident which related to one person’s termination of accommodation and the manager explained the circumstances surrounding the incident. The manager explained the steps that would ordinarily be taken regarding terminating someone’s accommodation and the likely reasons for doing so, however there is no policy in place which would assist staff to deal with these issues. The manager had already acknowledged that there were some gaps in key policy documents and explained that plans were in place to address this. However, this policy should be developed, implemented and shared with staff as a matter of priority. This is an area for improvement. The policy relating to visitors in the home is explained in the house rules document booklet.

After the inspection, the manager submitted a notification of incident form which related to an event last year. Any future notifications must be brought to the Commission's attention in line with the Regulations and Standards.

Women are offered outreach support upon discharge and can attend group support programmes in relation to enabling women to explore and share their experiences of domestic violence. The manager explained that positive feedback has been provided about these groups and the individual residing in the refuge during the inspection, described that they were planning on attending the 'journey to freedom' course. They described this as a group activity for women to explore their experiences of domestic violence to empower them to move on in their lives.

In response to the pandemic in 2020, the provider opened a secondary safe house for a time, in response to an increase in domestic violence. An amendment to the Regulation of Care (Jersey) Law<sup>2</sup> meant that the home was not required to be registered, although the manager proactively made contact with the Commission to explain of its operation and use. The Commission was also provided with assurances that the Minister had determined the need for this additional service.

### **Approaches to care and welfare of care receivers**

Reference was made to Standard 5 of the Care Home Standards which states: "You will be supported to make your own decisions and you will receive care and support which respects your lifestyle, wishes and preferences."

There is a comprehensive website that provides information about the refuge and includes helpful information about the services on offer and how to access them. The service has a manned 24-hour helpline also. The service works within a framework of initial crisis support, support and guidance and helping to move onto independence. The person who was residing in the home during the inspection told the Regulation Officer that she had accessed the website and found it very helpful which allowed her to make contact and request help. She described the support that she had received as being 'wonderful' and spoke of staff being 'non-judgemental' in their approach towards her. She spoke about remaining in control of her life and that the support staff had taken some stressors away and had provided some practical support to allow her to plan for the future. She explained that she was surprised by the quality and standard of the environment and said it was not at all like she had expected it to be.

Women are provided with a key worker when they move in and are offered weekly meetings with their key worker to discuss their safety and support needs. A key worker discussion was taking place during the inspection and the woman described it in positive terms to the Regulation Officer and said it was valuable in terms of the practical support she had received. She also described being able to talk to support staff at any time, outside of the scheduled key worker sessions and commented 'I'm never made to feel like I'm in the way, they always have time to talk to you'. One

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<sup>2</sup> Regulation of Care (Amendment of Law) (Covid-19 Temporary Amendment No 2) (Jersey) Regulations 2020



member of support staff described that their role during key worker sessions is to provide support and guidance and not to advise or direct women how to lead their life.

The support plan and records were examined which showed that the initial assessment identifies baseline information about the individual's health and medical needs, children, housing, and employment. The support plan that is developed thereafter, records the person's priorities for moving forward in their life and the ways in which their goals can be met. The person spoke of their exit plan to leave the refuge.

The care and supervision of children remains the sole responsibility of the mother whilst they are living in the refuge.

The home still needs to develop an admissions and discharge policy, which was acknowledged in October 2020 as part of the quality monitoring arrangements and was identified as part of a learning outcome in relation to an incident. The absence of an admissions policy is considered a weakness of the organisation and which should be addressed without further delay.

### **Management of services**

Reference was made to Standard 11 of the Care Home Standards which states: "The care service will be well managed."
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The registered manager has many years' experience of working within the service and is supported by several support staff who were recruited during 2020. The manager spoke of the challenges of inducting a new staff team during the pandemic and of having to manage an additional refuge for a period. However, she was complimentary of the new staff team and spoke positively of their abilities.

The service has a complaints system in place and an examination of the records showed that complaints are taken seriously, investigated and that actions and outcomes are recorded. The manager explained that in response to one complaint that was made, the service's website had been updated with a privacy notice. The registered manager explained that the complaints process is to be incorporated into the service user handbook. For some people making a complaint may be difficult and taking this into account, the service should make women aware of how to raise complaints outside of the organisation. This is an area for improvement.

### **Reviewing quality of service**

Reference was made to Standard 12 of the Care Home Standards which states: "The care service will be checked and reviewed regularly to sort out any issues and make things better for you and others".
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The provider's quality assurance systems are robust and are used to gain an evaluation of the service provision within the refuge. A sample of monthly reports

was examined which showed that the service has identified some areas where the Standards have not been met and action plans have been developed where improvements are needed. It was noted that there remain some outstanding actions, such as the development and implementation of critical policies which should be addressed as a matter of priority, or the welfare or safety of women may be compromised.

Feedback from the person residing in the home and who was spoken with during the inspection, confirmed that they had been involved in and consulted as part of the recent quality monitoring visit by the provider representative. The manager also seeks routine qualitative and quantitative feedback from women who have resided in the refuge, most of which was found to be positive in nature in relation to the support provided whilst in the refuge.

There are longer term plans to find more suitable accommodation which will allow for wider range of individuals to be accommodated as there are limitations with the current premises.

## IMPROVEMENT PLAN

There were three areas for improvement identified during this inspection. The table below is the registered provider's response to the inspection findings.

<p><b>Area for Improvement 1</b></p> <p><b>Ref:</b> Standard 3.6</p> <p><b>To be completed by:</b> with immediate effect</p>	<p>The registered provider must ensure all staff employed in the home are recruited safely.</p> <p><b>Response by registered provider:</b> A new on-boarding system was put in place at the time of the inspection to ensure all pre-employment checks would be conducted prior to any employee starting their induction. This system included increased scrutiny over the process. In addition, JWR Recruitment Policy is being reviewed and replaced by a Safe Recruitment Policy.</p>
<p><b>Area for Improvement 2</b></p> <p><b>Ref:</b> Appendix 2</p> <p><b>To be completed by:</b> with immediate effect</p>	<p>Key policies relating to the protection of people receiving support to include safe recruitment of staff and admissions, termination of accommodation should be prepared and implemented.</p> <p><b>Response by registered provider:</b> The above key policies as well as a Service User handbook are being prepared. The Safe Recruitment Policy and an Admission Policy will be in place by the 28/06/21. The termination of accommodation policy will be in place by end of July 2021.</p>
<p><b>Area for Improvement 3</b></p> <p><b>Ref:</b> Standard 10.2</p> <p><b>To be completed by:</b> two months from the date of this inspection (28 June 2021)</p>	<p>The registered provider must ensure that people who use the service are aware of the service's complaints policy, which should include the contact details of the Jersey Care Commission.</p> <p><b>Response by registered provider:</b> The Complaint &amp; Comment Policy is being updated to include contact details of the Jersey Care Commission and will be in place by the 28/06/21. In addition, a Whistleblowing Policy referring to the Jersey Care Commission is also being prepared, in view of being implemented by the 28/06/21.</p>



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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