

INSPECTION REPORT

Jersey Women's Refuge

Care Home Service

PO Box 708 St Helier JE4 0PW

11 and 13 July 2022

THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014, 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 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 personal support and safe accommodation to women and their children who may have been subjected to domestic or sexual violence. Women can be accommodated for up to twelve weeks and provided with emotional and practical support to empower them to plan for their future. The service provides a comprehensive support service which, in addition to the Refuge, includes a 24-hour helpline and outreach services. However, it is only the Refuge premises, where women are provided with accommodation and personal support, which are regulated rather than the wider service provision. Personal support includes, 1:1 key worker support, safety planning and providing information about access to other services.

As the Refuge is considered a safe house, its address and location are confidential and not in the public domain. This is deemed to be essential for keeping women and children safe.

The service became registered with the Commission on 23 October 2020, and this is its second inspection since registration.

Whilst the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 refer to 'care receivers' to describe people in receipt of care, the home's Statement of Purpose refers to 'women' and the home is registered to provide personal support. Therefore, for the purpose of this inspection report the same terminology will be used.

Regulated Activity	Care home
Conditions of Registration	Mandatory
	Type of care: Personal support
	Category of care: Domestic violence
	Maximum number of care receivers: 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.
Dates of Inspection	11 and 13 July 2022
Times of Inspection	1.15pm – 4.30pm and 12.15 – 2.15pm
Type of Inspection	Announced
Number of areas for	None
improvement	
Number of women	Four
accommodated on the day of	
the inspection	

The Care Home is operated by Jersey Women's Refuge and the Registered Manager is Marine Oliveira.

The discretionary condition on the service's registration was discussed and the Registered Manager is progressing through her qualification and expects to complete this award within the expected timeframe.

Since the last inspection, which was completed on 28 April 2021, the Commission received an updated copy of the service's Statement of Purpose. The Registered Manager has also initiated contact with the Commission at various intervals throughout the year to discuss issues and matters as they have arisen.

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 Refuge provides a comprehensive support service to women who are in need of temporary accommodation due to their experiences of domestic abuse. Women advised that the staff team are very caring, competent, and non-judgmental towards them and good at responding to their support needs. Women confirmed feeling safe and supported whilst in the Refuge and described the home having an open ethos which has enabled them to share their experiences with any member of staff at any time for support.

Staff are recruited safely, and they are provided with relevant training to help them in their role. From a review of some personnel files, staff have a wide range of skills, experience, and academic qualifications. There are good opportunities for further learning and professional development.

The staff team were motivated and committed to providing a good service to the women residing in the Refuge and there are several languages spoken to help women, whose first language may not be English. The staff team were passionate about their roles, and they were insightful about the impact of domestic abuse. The morale amongst the team was high and staff felt empowered to continually review their practice and any suggestions to make improvements is welcomed by the management team.

There are detailed individualised support plans and risk assessments in place which demonstrated that support provided to each woman is informed on assessed needs and their unique situation. There are plans in place for the Refuge to move to more improved premises and work is underway for this to happen. There are no areas for improvement resulting from this inspection and the evidence demonstrates that the service is operating within its registration conditions and in accordance with the Statement of Purpose.

INSPECTION PROCESS

This inspection was announced and was completed on 13 July 2022. The inspection date was arranged with the Registered Manager some days in advance. This was to establish the availability of any women to consult with as part of the inspection. The Regulation Officer took the opportunity to arrange the inspection to speak with the women and gain their views and experiences of the Refuge.

The Care Home Standards were referenced throughout the inspection.¹ This inspection focussed on the following lines of enquiry:

- Safety
- Support
- Training

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection report. The Regulation Officer sought the views of the people who use the service and spoke with the Registered Manager and other staff.

In alignment with the home's Statement of Purpose, function and sensitive issues that may arise from discussions, one female Regulation Officer carried out the inspection and spoke with three women who were resident in the home at the time of inspection.

During the inspection, records including policies, personal plans, risk assessments, staff personnel files and fire safety records were examined. At the conclusion of the inspection, the Regulation Officer provided feedback to the Registered Manager and provided an email summarising no areas for improvement had been identified.

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

This report sets out our findings and includes areas of good practice identified during the inspection.

INSPECTION FINDINGS

At the last inspection, three areas for improvement were 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 all the improvements had been made. This confirmed safe recruitment practices and a number of new policies had been implemented.

Safety

The Standards outline the Provider's responsibility to ensure that people will feel safe and are kept safe. Women will have the right to live safely and free from harm.

The Statement of Purpose recognises that women and children must feel safe in the Refuge and safety is therefore given the utmost priority. Only the Refuge's emergency telephone number is published and women seeking help are only given the address once they go to the Refuge. Sometimes, they are collected in a public place by prior arrangement and escorted there. Security is a key objective in the Refuge and there are a range of safety measures in place so that the home is safe, which includes secure entry and CCTV. All visitors to the Refuge are screened before being let in and the confidential location is an additional safety feature and safeguard, which women referred to.

The Regulation Officer was informed by the women spoken with that they felt safe in the home and the following comments were made:

"I've had no problems sleeping here and I know I'm completely safe. I have a sense of peace and comfort. I'm constantly reassured that I'm safe here and I feel more relaxed than I have done in a long time". "I feel really safe here, it's nice and quiet. We have house rules which helps keep us all safe and we're all aware of confidentiality".

"It's amazing and it's a very secure place. I really do feel safe here and when I moved in, I was given lots of information about safety for me and the other women here".

The accommodation is just one aspect of promoting safety. Upon admission, an evaluation of the needs and risks of harm to the woman (and her child/children if applicable) is carried out using a recognised tool (Domestic Abuse Stalking and Honour Based Violence, DASH). Personal safety plans are created thereafter which are developed with the woman's involvement and consent. An example was reviewed which showed how risks had been assessed. The records were clearly written and are accessible to all support staff working in the Refuge.

The outcome of the DASH risk assessment may lead to referrals to other agencies as part of the service's safeguarding responsibilities. This may include referrals to MARAC (Multi Agency Risk Assessment Conference) where information is shared about domestic abuse with the police, domestic violence advisors and others. Referrals are made to MASH (Multi Agency Safeguarding Hub) when children are admitted into the Refuge if there are safeguarding concerns. The service maintains close links with the police and the Registered Manager provided some examples where the police had been notified where urgent requests for assistance were necessary.

The service uses the Women's Aid secure case management and outcomes monitoring system which details support and safety planning. Samples of support plans were examined which showed information such as finances, physical and emotional health needs were assessed and addressed to achieve goals. The records evidenced that there are regular reviews in place whereby discussions are held with the woman and her key worker to discuss progress.

This was directly observed on the day of inspection, where one woman told the Regulation Officer they were meeting with their key worker and were seen to meet in a quiet area to discuss progress.

In house policies and procedures also form part of the Refuge's approach to the safety of women, children, and staff. Women told the Regulation Officer that they had all received important information about the home once they had arrived and were familiar with and appreciative of all safety measures implemented.

The Provider has continued to build on practice standards by introducing and embedding policies and procedures into all aspects of the service. These included an admission, termination of service and a staying out of the safe house policy, which is currently in draft format. The draft policy recognises that whilst safety is a fundamental aspect of residency in the Refuge, a risk-based approach to safety should be considered in circumstances where women request to stay out in order to reflect the principles of normalisation and promoting independence. The Registered Manager described a situation where this is being trialled which would appear to be having a positive influence on one woman's life.

The Provider ensures that there is a monthly review of aspects of support to ensure that the home is operating in accordance with the Regulations and relevant Standards. A sample of monthly monitoring reports were examined, which showed that the service is continually reviewing practices and ways of working, to ensure the support is in line with the Statement of Purpose and to make improvements to benefit the women receiving support. The monthly quality monitoring reports are shared with the Registered Manager with action plans and time specific objectives identified.

A revised Safe Recruitment Policy has been developed since the last inspection. A sample of personnel files relating to the recruitment of staff of various job roles were examined, which showed that the Standards were being consistently met. There was evidence to support decision making regarding recruitment, as necessary.

There is a robust approach to health and safety with routine checks carried out to identify workplace hazards. Fire drills, tests and safety checks are carried out in accordance with the Fire Service's requirements. There are plans in place to carry out procedures in response to emergency situations that may arise so that staff become familiar with actions to be taken.

All staff are provided with foundation level safeguarding adults and children training as a minimum. The Registered Manager confirmed that she has confidence in staff members' ability to uphold their responsibilities in safeguarding women and children and to work in partnership with relevant agencies to share information appropriately. The service has made the Commission aware of notifiable events as they have occurred.

Support

The Standards outline that people in receipt of care and support should experience compassion, dignity and respect. Women, where appropriate should be involved in all decisions relating to their support in a way that respects their rights, individuality and beliefs.

Since the last inspection, the service has extended the period of accommodation from eight to twelve weeks' duration. This has been in response to feedback from women and their anxieties related to the shorter duration. This change shows that women's' experiences and views are considered in improving the quality of services provided. One woman told the Regulation Officer that they had been informed she could stay for this longer period which she had found comforting.

The service has also recognised that a more supportive, risk-based approach should be adopted on occasions where women request to stay out, whilst accommodated in the Refuge. As such, a draft policy has been implemented which looks to weigh up risks to safety and the benefits of well-being. The Registered Manager described this approach as being more in line with the service's ethos in terms of empowerment and promoting independence. The draft policy is being trialled for one woman and so far, has been positive in terms of meeting her desired outcomes. The feedback received from three women during the inspection was very positive about the relationships they had built with staff members, and they felt staff could not be any more helpful. They made the following comments;

"Psychologically it's like a breath of fresh air, there's been no judgment made, no mention of my circumstances and they've given me validation and boosted my self-esteem. They've been considerate to my health, and they've put a lot of thought into the small things. Everything has been done at my pace and they listen and just remember to ask you about your day. Staff are available at any time, and I know who's on shift as they introduce themselves, but you don't always have to speak to them if you don't want as they respect your space".

"It's been amazing and it's a very secure space. The staff are excellent, the response I've had from them has been excellent and there's never any pressure to talk. I feel like the staff are all experienced in their field and I'm confident in their abilities. I've been working with my keyworker on a support programme and I'm rebuilding myself. I've found that they place the same importance on all types of abuse, they don't differentiate between physical and emotional abuse"

"Straight away I found them warm and friendly and when I came here, they explained all the rules of the house and I immediately felt safe. I've met with my keyworker to check in and I've had loads of support with things I didn't know how to do myself. I find it peaceful and quiet here and I know that everything's confidential and private which is reassuring"

The service provides support in a range of ways. Practical support is delivered to address issues such as housing, finances, employment and women can attend group programmes to help them gain a better understanding of the nature of abusive relationships. The Registered Manager reported that feedback from women who have accessed such programmes has been overwhelmingly positive. Women told the Regulation Officer that the opportunities to meet with other women in the Refuge had helped them overcome some of their anxieties. They described that the support that they had received was helping them to recover, keep themselves safe, build on their self- confidence and improve their well-being.

The Statement of Purpose refers to women having access to a dedicated key worker who helps provide practical and emotional support. All women confirmed that they had been provided with a key worker and had found their support invaluable. They also described frequent, informal interactions with staff other than their key worker which they had valued.

Weekly case management team meetings are held where the staff team jointly discuss and monitor progress and outcomes. One member of staff said they found these discussions to be useful but considered the duration of discussions to be excessive.

On one of the inspection visits, arrangements had been made for one woman and her children to be admitted. The atmosphere in the home was found to be calm and hospitable and staff confirmed that relevant information had been shared by the domestic violence worker in advance of the admission.

Records of discharge placements are maintained and shared with the Homelessness cluster group. The statistics show that a high percentage of women leaving the Refuge move into temporary accommodation which is outside of the service's control.

Support to children and young people residing with their mothers in the Refuge is currently under review. The staff team, speak a number of languages including English and some written information is available in other languages, including Portuguese and Polish, so that women for whom English is not their first language can access appropriate support.

The management team have recognised that there are limitations with certain aspects of the accommodation and a move to an alternative environment is being planned.

Training

The Standards outline that at all times there should be competent and skilled staff available. Staff should be provided with a range of relevant training and development opportunities.

Staff that were spoken with, presented as compassionate and insightful about the impact of domestic abuse on the women they support. They had good access to training relevant to the needs of women they support. Training provided to staff includes mandatory subjects including, first aid, safeguarding adults and children, moving and handling and data protection. All staff are provided with Level 2 or Level 3 accredited training in domestic abuse matters. From a review of staff personnel files, there was evidence that some staff brought a wide range of relevant skills, academic qualifications, and relevant experience to their roles. The managerial team are currently working towards Diplomas in management.

The service had experienced some staff turnover over the past year and the result of feedback provided by staff exiting the service, some changes had been made which has resulted in the same bank staff team being used to fill vacancies. This means that a more consistent staff team who have received relevant training and are familiar with the service's operational policies and procedures in place.

The Regulation Officer considered there was a positive work culture, staff were motivated, and the team morale was strong. Staff said they could access managerial support at any time, receive supervision and spoke highly of their colleagues and the role they play in supporting women. Some of the staff made the following comments:

"The team is brilliant here, there's great support for each other and the Manager is approachable. You're encouraged to have a voice, share ideas and have a say in developing and reviewing things. We have really supportive colleagues, and we have formalised processes for supervision, but colleagues are they best form of support and we all share the load"

"I feel so valued, the staff team are so committed and the manager's go above and beyond to make sure our well-being is looked after. I find the communication is

excellent, we are listened to and we are empowered. I've learned so much and I know I will continually learn to grow with the support of the staff team"

"I feel I am fully supported by my line manager in all areas of my work. My line Manager is very approachable, vigilant, considerate to other people's moods and feelings, and her communication skills are excellent. All these qualities I believe are a must in our line of work, to enable all staff to feel motivated and valued as much as I do"

"I really love working here, there's a good team. They come up with some really creative ideas to make the women's lives better"

Another staff member provided an overview of their induction process, details of initial and subsequent training that had been provided and said their experience of working in the home was extremely positive and they felt that the staff team are committed to empowering women to live independent and dignified lives. The worker said, "there's no judgment made by the staff, they're not paternalistic and there's a fine line between recognising safeguards and not making decisions for women. It's a really person centred approach and the staff are all about supporting decision making and sign posting to other services. There's great communication across the team and I feel really valued and respected as a team member".

Staff described being encouraged to reflect and review their ways of working and they perceived that they had a voice in the organisation. They provided examples where their views had been considered by the management team and that alternative ways of working being explored to promote a healthier work/ life balance.

IMPROVEMENT PLAN

There were no areas for improvement identified during this inspection and an Improvement Plan has not been issued.

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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