



**Jersey Care  
Commission**

# **INSPECTION REPORT**

**Freeda**

**Care Home Service**

**PO Box 708**

**St Helier**

**JE4 0PW**

**22 July 2024**

## **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 80 of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 (as amended) 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 report details the inspection of Freeda, a secure safe house with a confidential address and location to ensure the safety of women, children, and young people.

The facility includes eight bedrooms, each with en-suite amenities, providing privacy and comfort for its residents. Additionally, there is an adjoining room to the accessible unit and a self-contained one-bedroom flat that offers a private living space with its own facilities. This flat serves as an independent accommodation option for individuals or families who need additional privacy or have specific requirements.

The safe house also features communal areas, such as a kitchen, dining room, and lounge, which promotes social interaction and allows residents to connect with the staff. A dedicated playroom is available for children, offering a secure environment for play. The playroom is monitored and located next to the dining area, allowing parents to keep an eye on their children while attending to other tasks, such as meal preparation.

Residents also have access to a secure enclosed garden at the back of the property, as well as a separate enclosed patio designated for the self-contained flat.

Regulated Activity	Care Home Service
Mandatory Conditions of Registration	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: 0 years and above
Discretionary Condition of Registration	None
Date of Inspection	22 July 2024
Time of Inspection	09:00- 14:00
Type of Inspection	Announced
Number of areas for improvement	Three
Number of care receivers using the service on the day of the inspection	Eight

The Care Home service is operated by Freeda and there is a Registered Manager in place. Since the last inspection on 24 October 2023 the Commission has received an updated copy of the service's Statement of Purpose. This was submitted on 14 August 2024.

## 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 inspection at Freeda reviewed risk assessments, staffing, and medicine management. Risk assessments begin with referral and continue throughout the stay. A current review of staffing is underway and was discussed as part of the inspection. Medicine management emphasises resident autonomy, with self-administration of medication supported by staff guidance.

The Regulation Officer reviewed support planning, collaboration with other services, and adherence to consent and self-determination laws. Support plans are individualised and voluntary, including specialised plans for children. Freeda collaborates with organisations like the police, Jersey Domestic Abuse Service (JDAS), and Mind Jersey to enhance support, and offers a new clinic for benefit advice. The inspection highlighted the need for training on the Capacity and Self-Determination Law. The facility respects residents' autonomy, ensures confidentiality, and accommodates diverse needs, including those with disabilities.

The inspection assessed whether Freeda's service is caring by examining personalised care initiatives, such as 'New Beginnings Sessions' and 'Journey to Freedom', which support residents recovering from domestic abuse through creative methods like role-playing and sensory activities. Residents can also personalise their living spaces to feel more at home. While there is internal support for staff, the inspection identified a need for more regular supervision, appraisals, and external emotional support to improve workforce well-being and enhance staff well-being by addressing work place stressors through listening to residents experiences.

The Regulation Officer evaluated Freeda's leadership, focusing on staff's ability to raise concerns and the effectiveness of the whistleblowing policy. The Registered Manager acknowledged past inconsistencies and is working on a standardised process to improve clarity and address concerns promptly.

The inspection also noted limited linguistic diversity and the need for cultural sensitivity training to better support non-English-speaking residents. Additionally, while key policies are up-to-date and compliant with legislation, further policy development and updates were identified as areas for improvement.

## INSPECTION PROCESS

This inspection was announced, and completed on the 22 July 2024 and notice of the inspection visit was given to the Registered Manager four days before the visit. This was to ensure that the Registered Manager would be available during the visit.

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

This inspection focussed on the following lines of enquiry:

- **Is the service safe**
- **Is the service effective and responsive**
- **Is the service caring**
- **Is the service well-led**

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

The Regulation Officer had discussions with the service's management and five staff. Additionally, feedback was provided by two professionals external to the service.

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

At the conclusion of the inspection, the Regulation Officer provided feedback to the Registered Manager.

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

This report outlines 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 improvement plan is attached at the end of the report.

## INSPECTION FINDINGS

At the last inspection, no areas for improvement were identified.

### **Is the Service Safe?**

Emphasising the importance of creating a safe environment so care receivers are protected from avoidable harm, with a focus on policies and procedures.

The inspection focused on the procedures and effectiveness of risk assessments at Freeda, particularly their contribution to resident safety. The risk assessment process begins as soon as a referral is made and continues throughout the resident's stay. When a resident is referred, they arrive with referral paperwork and two key assessments: the Domestic Abuse, Stalking, Harassment, and Honour-Based Violence (DASH) and the Risk Identification Checklist (RIC). For self-referrals, Freeda staff conduct these assessments in person. These tools help quantify the potential risk to the individual.

Within the first 24 to 48 hours of admission, staff complete an Admission Risk Check (ARC), which is crucial for developing the initial support plan. These documents are signed by both the resident and the staff member, ensuring mutual agreement and understanding. A comprehensive Risk Assessment and Management Plan (RAMP) covering 15 areas is then implemented. The residents information is securely stored on Oasis, a cloud-based case management system, with additional support from SharePoint which is an online document which can be updated and shared by multiple people.

Risk assessment updates are disseminated through a digital daybook, an online form that logs updates, client meetings, and staff notifications. Staff review this at the beginning of each shift, ensuring all team members are informed of any changes.

Risk assessments and support plans are shared with residents either digitally or in print, based on their preference. When residents exit the facility, they are offered continued outreach support, including ongoing risk assessments and safety planning. The structured approach to risk assessments at Freeda ensures that residents are continually evaluated for safety risks, and staff are kept up-to-date, contributing to a safer environment for all.

Staffing and recruitment were key focus areas during the inspection. The facility is currently undergoing an HR review aimed at optimising staffing structures and improving recruitment and retention strategies. The recruitment of two new bank staff has been completed, with further restructuring anticipated by the end of the summer. The current staffing includes six full-time members, one child and family worker, five bank staff, and a management team consisting of the Registered Manager, Outreach Team Leader, Residential Team Leader, and Human Resources (HR) Manager.

All staff have participated in the HR review, which examines staffing patterns, shift distribution, and the need for additional administrative staff. Recent initiatives include a salary adjustment and consideration of performance-related pay. The staff morale is supported through measures such as a funded team-building day and personalised gestures like welcome gifts for new staff. The HR review findings is expected to inform future strategies to maintain a stable and motivated workforce.

Medicines management was briefly discussed, highlighting the autonomy granted to residents in managing their own medication. All residents are responsible for their own medication, which is securely stored in locked cabinets within their rooms. Staff do not oversee or administer medications. Medication management is included in the initial risk assessment process, where staff discuss the medications residents are taking and how to identify signs of missed doses or overdoses. This empowers staff to support residents while respecting their independence. This approach aligns with the principles of autonomy and personal responsibility, with staff equipped to respond to medication-related risks without infringing on residents' independence.

One professional said:

*“I think Freeda has appropriate assessment for families who reside at the refuge. Freeda has helped to inform our (Assessment & Support Team [A&ST]) own assessments by sharing relevant information pertaining to the families we work with.”*

### **Is the Service Effective and Responsive?**

Assessing the organisation of the service so that care receiver’s needs are respected and met.
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The inspection examined the processes used at Freeda to assess and address residents' care needs. The Residential Team Leader explained that support plans are created for both residents living in the home and those receiving outreach support. The approach to support planning varies depending on whether the resident is new to Freeda or previously known through outreach services. Support plans are tailored to the individual needs of each resident, and participation is voluntary. Residents are given options regarding how often and in what manner they wish to engage in support planning and reviews. For children residing at Freeda, the Children and Family Support Worker, a role established in March 2024 which replaced a similar role formerly Children's and Young Person's Support Worker. This worker engages directly with older children who wish to participate and provides two hours of support per child per week, with parental consent and handles their specific support plans. For instance, the support worker recently cared for a baby while the parent attended a job interview.

Support plans are stored within the Oasis online server, and the service is working on setting up a live system for continuous updates. The Risk Assessment and Management Process (RAMP) document has already transitioned to a live system using SharePoint, allowing for real-time editing and updates.



The inspection explored how Freeda collaborates with other services to ensure effective and responsive care. The Registered Manager and the Residential Team Leader discussed their partnerships with various organisations, including the Police, JDAS, Income Support, Housing Gateway, Jersey Employment Trust (JET), Mind Jersey, The Listening Lounge, Brighter Futures, and Venetia House.

A new clinic has been initiated in collaboration with Customer and Local Services (CLS) to provide residents with a dedicated point of contact for benefit entitlements, especially housing benefits. Before these fortnightly meetings, the appointed CLS representative receives relevant information about each resident to assist them better. The Registered Manager also plans to reinstate monthly meetings with legal and financial advisors, offering residents free advice on relationship separation. Freeda collaborates with other service providers by offering training programmes that educate them about Freeda's services and how to access them.

Monthly team meetings at Freeda include presentations and information sessions from other service providers, enhancing staff knowledge and supporting collaboration. This integration of external expertise ensures that Freeda's staff are well-informed, and residents receive comprehensive support.

The inspection also focused on issues related to consent, capacity and self-determination law within Freeda. The Residential Team Leader provided information about the process of signing confidentiality agreements for new residents, which are reviewed every three months. This ensures that the location of Freeda remains confidential and that any information residents learn about other residents is kept private, which is crucial to the support provided.

Supporting residents with fluctuating capacity, such as those who might arrive intoxicated, was also discussed. Although such situations are infrequent, staff assist these residents by guiding them to their rooms, ensuring their safety, and addressing support planning the following day. This approach respects the individual's autonomy and decision-making ability.

Freeda has rules regarding behaviour that may impact other residents. Consequences for breaking these rules range from verbal and written warnings to seven days' notice to leave or immediate notice in high-risk scenarios. Staff daily notes outline the support provided to each resident and their engagement with it. All residents at Freeda are assumed to have capacity and, therefore, the ability to make their own decisions.

The Regulation Officer inquired about residents' use of advanced decisions to refuse treatment. The Registered Manager noted that this topic had been recently discussed within the team, highlighting the need for training to better support residents in this area. In the past, some residents have inquired about making advanced decisions, and staff expressed a desire for further training to assist them more effectively. The inspection identified that staff require training in relation to Capacity and Self-Determination Law Jersey to ensure they are meeting mandatory requirements, this has been identified as an area for improvement.

The discussion also covered psychological and spiritual support, emphasising respect for individual beliefs and cultures in the shared environment. For example, during Christmas, consent is obtained from all residents regarding the use of decorations in communal areas. If any resident objects, only individual rooms are decorated. For occasions like Christmas dinner, residents dine together, with staff providing meal options that cater to residents' preferences, including halal meats and vegan choices.

Following the move to new premises at the end of last year, the building is now accessible to individuals with disabilities. It features level access at the rear and lift access to all floors, making the service more inclusive for those with physical impairments. Additionally, there are rooms equipped with profiling beds and chairs suitable for individuals with additional mobility needs.

Professionals who work alongside Freeda commented:

*“Great response times and all staff members are proactive in supporting the residents and providing information when required.”*

*“Freeda works positively with our team by ensuring the safety of the families we work with and share safeguarding concerns, if any, or as they rise, and provide up to date information about the families’ situations and the progress of whatever work being completed to support the families. They attend meetings with positive contributions, and this helps to monitor the progress of the plans.”*

### **Is the Service Caring?**

Evidencing fundamental aspects of care and support are provided to care receivers by appropriately trained and competent staff.

The inspection evaluated whether Freeda’s service is caring by focusing on the personalised care provided to residents, emphasising their unique cultures, characteristics, strengths, aspirations, and the fundamentals of care. The Residential Team Leader outlined the emotional support initiatives at Freeda, highlighting two key programmes: ‘New Beginnings Sessions’ and ‘Journey to Freedom’.

These initiatives allow key workers to creatively support residents in their journey to live free from domestic abuse. For instance, role-playing exercises have been employed to help residents explore and navigate difficult situations, resulting in positive outcomes. For residents who benefit from sensory interactions, key workers tailor sessions to incorporate sensory elements, further personalising the care provided.

‘Journey to Freedom’ involves using handouts and collaborating closely with residents to identify and emphasise key themes that promote positive change and outcomes.

Within the Freeda House, residents are encouraged to personalise their living spaces, which is especially important for those staying with children. This approach allows residents to create a comfortable and individualised environment, helping them feel more at home during their stay.

The inspection also considered workforce well-being, particularly focusing on the supervision and appraisal processes. The Registered Manager was asked to provide a spreadsheet detailing which staff members have received supervisions and appraisals, along with the timing of these sessions. The inspection identified a gap in staff receiving regular supervision and appraisal, which may be due to the recent changes in management. The need for staff to receive regular supervision has been identified as an area for improvement.

The Registered Manager has the capacity to conduct debriefing sessions for staff working under challenging circumstances, which is crucial for addressing emotional support to improve workforce well-being and enhance staff well-being by addressing work place stressors through listening to resident's experiences offering emotional support. However, the inspection noted a lack of external support for staff to help them manage the emotional impact of their work, highlighting an area that may need further development to ensure staff well-being.

When talking to staff who work from Freeda they feedback:

*"The support provided is person centred, the staff are great advocates who are reflective practitioners."*

*"Communication between the team was difficult earlier in the year, this has now much improved which has made a great difference."*

### **Is the Service Well-Led?**

Evaluating the effectiveness of the service leadership and management.
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The inspection also focused on whether the service is well-led, particularly in relation to staffs' freedom to speak up, the whistleblowing policy, and the processes for raising concerns. The Registered Manager recognised the opportunity for improvement in handling concerns consistently and is actively working towards establishing a more consistent and transparent process. The Registered Manager is working on implementing a standardised approach to ensure that all staff understand the procedures for escalating concerns. This effort aims to enhance clarity and

consistency, making it easier for staff to raise issues without fear of reprisal and ensuring that concerns are addressed promptly and appropriately.

The inspection also explored workforce equality, diversity, and inclusion under the well-led category. The Registered Manager highlighted that signage throughout the building is available in other languages to support care receivers from diverse backgrounds. Currently, the service employs only one non-native English-speaking staff member highlighting the limited linguistic diversity within the team.

Freeda serves victims of domestic abuse from various cultural backgrounds, which presents challenges, particularly when residents do not speak English. The use of online translation services can sometimes hinder effective communication, especially when providing sensitive support during critical moments. Recognising this challenge, the Registered Manager expressed a desire to introduce training on cultural sensitivity. This training would aim to equip staff with the knowledge and skills necessary to support residents from diverse backgrounds effectively, thereby improving the overall quality of care.

The Regulation Officer reviewed roles, responsibilities, governance, and policies. They identified a need for several new policies and updates to existing ones. Key policies were examined, and it was found that they are up-to-date, comply with Jersey's legislation, and align with local standards. However, the need for further policy development and updates was noted as an area for improvement.

Staff working for Freeda said:

*“I love my job, my induction into the service was good.”*

*“It would be good if we had access to support from outside the organisation, as it is really tough to process other people's trauma.”*

*“Support to outreach workers is really good.”*

## 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 3.11</p> <p><b>To be completed by:</b> with immediate effect</p>	<p>The registered person will ensure that all care/support workers complete and remain up to date with statutory and mandatory training requirements. Training in Capacity and Self-Determination Law and Data Protection.</p>
	<p><b>Response of Registered Provider:</b></p> <p>Enquiries have been made into the recommended CSDL in-person training through Care College (booked for 23rd/24th September). Online Data Protection training has been included in all staff training requirements, effective immediately.</p>

<p><b>Area for Improvement 2</b></p> <p><b>Ref:</b> Standard 1.6</p> <p><b>To be completed by:</b> within six months</p>	<p>There will be policies and procedures in place that are based on current best practice and evidence which will be available and accessible to people receiving care and others.</p>
	<p><b>Response of Registered Provider:</b></p> <p>A rolling programme of policy writing and reviews is in place to address gaps and will be ongoing.</p>

<p><b>Area for Improvement 3</b></p> <p><b>Ref:</b> Standard 3.14</p> <p><b>To be completed by:</b> with immediate effect</p>	<p>The registered person will ensure that all care/support workers are given regular opportunities to discuss their role and identify any issues through formal supervision and appraisal.</p>
	<p><b>Response of Registered Provider:</b></p> <p>In the period between the inspection and the draft report being received, external supervision has been sourced, implemented and taken up by staff.</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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