

Summary Report

Freeda

Care Home Service

PO Box 708 St Helier JE4 0PW

22 July 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.

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.

Area for Improvement 1

Ref: Standard 3.11

To be completed by: with

immediate effect

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.

Response of Registered Provider:

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.

Area for Improvement 2

Ref: Standard 1.6

To be completed by:

within six months

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.

Response of Registered Provider:

A rolling programme of policy writing and reviews is in place to address gaps and will be ongoing.

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

The full report can be accessed from here.