Jersey Care Commission

INSPECTION REPORT

FREEDA

Care Home Service

PO Box 708
St Helier
JE4 0PW

31 July & 3 August 2026

Date Published
14 August 2026

1. THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014 ('the Law'), 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 to monitor compliance with the Law and Regulations, to review and evaluate the effectiveness of the regulated activity and to encourage improvement.

2. ABOUT THE SERVICE

This is a report of the inspection of FREEDA, which is a secure premise. To protect the safety and well-being of women and their children who may reside there, the service address and location remain confidential. The care home is operated by FREEDA and there is a registered manager in place.

Registration Details	Detail
Type of regulated activity	Care Home
Mandatory Conditions of Registration	
Category of care	Domestic Violence
Type of care	Personal support
Maximum number of care receivers	22
Age range of care receivers	All age groups
Discretionary Conditions of Registration	
The Registered Manager must complete a Level 5 Diploma in Leadership in Health and Social Care by 6 June 2028.	
Additional information	
A revised Statement of Purpose was submitted to the Commission on 23 April 2026.	

As part of the inspection process, the Regulation Officer evaluated the home's compliance with the mandatory and discretionary conditions of registration required under the Law. The Regulation Officer concluded that all requirements have been met.

3. ABOUT THE INSPECTION

3.1 Inspection Details

This inspection was announced and notice of the inspection visit was given to the Registered Manager one day prior to the first inspection. Limited notice was provided to obtain an accurate reflection of the day-to-day operation of the home. This ensured that both the Registered Manager would be available and the women and children residing at the home could be given advance notice of the visit.

The home refers to 'women and children' in its Statement of Purpose, therefore for consistency the same terms will be used throughout this inspection report when referring to individuals supported by the home.

Inspection information	Detail
Dates and times of this inspection	31 July 2026 11am – 3.45pm 3 August 2026 10am – 11.45am
Number of areas for improvement from this inspection	None
Number of women and children accommodated on the day of the inspection	4 women and 4 children (First Day) 5 women and 6 children (Second Day)
Dates of previous inspection	10 October and 3 November 2025
Areas for improvement noted at the last inspection	None
Link to the previous inspection report	RPT_FDA_Inspection_20251103.pdf

3.2 Focus for this inspection

This inspection included a focus on these specific lines of enquiry:

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

4. SUMMARY OF INSPECTION FINDINGS

4.1 Progress against areas for improvement identified at the last inspection

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

4.2 Observations and overall findings from this inspection

The findings from this inspection show that the home is delivering its stated aims and objectives and delivering support consistent with the Statement of Purpose. The safety and wellbeing of women and their children are given a high priority as evidenced through observations, discussions with staff and a review of records. Appropriate arrangements are in place to identify, assess, and manage risk which ensures women are supported in a safe and responsive manner.

Women receive support based on their individual circumstances and needs. Strong multi agency working was evident which also confirmed that the home recognises its limitations and works within the conditions of registration, scope of service and the Statement of Purpose.

Recruitment practices were found to be robust and in line with the Standards, which also extend to staff working withing the non-regulated aspect of FREEDA. Staff are suitably trained and supported in their roles and have completed accredited specialist training across a range of domestic abuse related areas. Staff spoken with during the inspection described the learning and development opportunities available to them and provided examples of training they had completed. Induction records were found to be comprehensive and helped provide staff with the knowledge and skills required for their roles.

The home was found to be well maintained, welcoming and domestic in nature. The environment provided a respectful and uplifting space for women and there were areas provided dedicated to the needs of children.

Governance arrangements are effective, with Provider oversight helping to ensure the home operates in a way that meets legal requirements.

The Registered Manager provides consistent leadership and direction and maintains oversight of the day-to-day operation of the home. There are no areas for improvement resulting from this inspection.

5. INSPECTION PROCESS

5.1 How the inspection was undertaken

The Care and Support Services with Accommodation Standards were referenced throughout the inspection.[1]

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection report, the Statement of Purpose, and notification of incidents.

Women were offered the opportunity to speak with the Regulation Officer about their experiences of the home. The Regulation Officer recognised that, given the nature of the service and the personal circumstances of women accessing support, speaking directly with someone external to the service may not have felt appropriate or comfortable at that time. Women were therefore not expected to take part in discussion during the inspection. To ensure feedback could still be shared a QR code linking to a confidential questionnaire was also made available. The contact details of the Regulation Officer were also provided, should women wish to make contact at a later point.

The Regulation Officer had discussions with the service's management and other staff. Some staff provided feedback by email. Feedback was requested from two external agencies; however, no responses were received.

As part of the inspection process, documents including policies, care records, risk assessments, assessment records, monthly provider reports, staffing rotas, appraisal records, staff files and minutes from team meetings were examined.

[1] All Care Standards can be accessed on the Commission's website at https://carecommission.je/

At the conclusion of the inspection visit, the Regulation Officer provided verbal feedback to the Registered Manager and followed up on the inspection findings by email on 6 August 2026.

This report presents our findings from the inspection and outlines the range of observations made. Throughout the report, we may highlight any areas of good practice identified, along with suggestions where practice could be strengthened or further enhanced.

5.2 Sources of evidence.

Key lines of enquiry	
Focus	**Evidence Reviewed**
Is the service safe	Samples of staff recruitment files Discussion with staff member responsible for recruitment process Fire logbook Consent to share information records DASH (Domestic Abuse, Stalking and Harassment) Risk Assessments
Is the service effective and responsive	Support Plans Daily records Confidentiality agreement House agreement Subject Access Request records Monthly Provider reports Referral records from GP
Is the service caring	Welcome pack Review of environment and bedrooms Discussion with staff Feedback surveys Empowerment tool – impact assessments Outcome tracker system
Is the service well-led	Discussions with the Registered Manager and other staff Samples of staff qualification certificates Appraisal records Competency framework and self-assessment Induction programme Staff training manual Sample Policies and Policies matrix

6. INSPECTION FINDINGS

Is the service safe?

People are protected from abuse and avoidable harm.

The location of the home is kept strictly confidential and is only shared on a need-to-know basis. The home has a range of confidentiality measures in place to protect women and their children one of which includes the screening of all visitors to the home. This was evident during both inspection visits, where visitors were required to undergo screening prior to gaining entry, were required to sign into the home using an electronic system, have their photograph taken, and be recorded on a visitor log.

The home places a strong emphasis on safeguarding practices, and all staff receive mandatory training in relation to both adult and children's safeguarding. Staff spoken with demonstrated a clear understanding of their responsibilities to safeguard women and children, by describing how safeguarding is embedded within their day-to-day practice to promote the safety and well-being of women in the home. This also included sharing information where appropriate with the woman's consent. One newly recruited staff member confirmed that they had completed safeguarding training as part of their induction at the commencement of their employment.

As part of its safeguarding practices, the home works in close partnership with other agencies to ensure women receive the most appropriate response to meet their individual needs. This included working collaboratively with children's and adult social care services, the police, employment, social security and housing. Staff explained that social workers and other relevant agencies are contacted whenever required to help assess situations, and explore options, which was evident during the inspection where staff were actively liaising with a social worker to ensure one woman received the most appropriate support in response to her circumstances.

Robust admission processes were in place which included risk assessments specific to individual situations, risks and support needs of each woman.

Samples of admission records were reviewed which showed that both planned and unplanned admissions are completed in a similar way.

Records seen confirmed that detailed assessments relating to immediate safety concerns, risk assessments, including DASHRA (Domestic Abuse, Stalking and Harassment Risk Assessment), including children's needs, individual safety plans, health needs, and consent and information sharing arrangements. The records showed that the assessment process was detailed and thorough, and specific to each woman's individual circumstances. The information was then used to develop support plans which included the woman's specific goals and desired outcomes during their stay. The plans are reviewed regularly to ensure changing risks and needs are identified and managed.

The house guide that is provided on admission makes clear that women remain fully responsible for the care of their children throughout their stay in the home. Because of this, measures are in place to support their supervision. This includes CCTV coverage of the children's play area, which enables mothers to observe their children whilst undertaking cooking tasks and preparing meals within the kitchen. This arrangement was observed in practice during the inspection visit.

Processes are in place to support staff when they are working alone, and staff described the lone working arrangements and explained the measures in place to maintain their safety and wellbeing. All staff confirmed they always had full managerial access if they needed support. An example was provided where staffing arrangements had been reviewed in advance of an admission, and additional staffing was put in place to manage potential risks to both staff and other women residing in the home.

Samples of staff files were reviewed which evidenced that safe recruitment practices were consistently followed for staff recruited since the last inspection. This showed that all safe recruitment checks had been completed prior to staff starting work. The same robust recruitment standards are applied to staff who do not work directly in the regulated aspect of the service, which reflects a strong commitment to safeguarding and safe recruitment all round.

The staff member responsible for recruitment was knowledgeable about the process and they confirmed they had recently undertaken additional training on safer recruitment practices.

The fire safety logbook issued by the Fire and Rescue service was reviewed which showed all safety checks were being completed and recorded appropriately in line with the Fire Service's expectations.

Is the service effective and responsive?

Care, treatment, and support achieves good outcomes, promotes a good quality of life and is based on the best available evidence.

The Registered Manager provided an example of an instance where an admission decision had been carefully considered based on the woman's additional risks and support needs. Records and the manager's description demonstrated that risks had been assessed, which included discussions with the staff team, management strategies identified and implemented, and an admission decision taken in line with all information known to the home.

A further example was provided where it was identified that the home was no longer the most appropriate setting to meet a woman's needs. Records and discussions showed that the home followed its procedures and considered the woman's ongoing safety, wellbeing and support needs. The home liaised promptly and effectively with relevant agencies to help ensure that ongoing support was coordinated. To protect the woman's privacy and minimise the risk of identifying individual circumstances, further details have been intentionally omitted from this report.

However, the Regulation Officer was satisfied that, in both examples, the service demonstrated a prompt, responsive and person-centred approach. The actions taken reflected a clear understanding of the women's individual needs and circumstances, with staff responding swiftly to changing situations and implementing appropriate support measures without delay. Both examples evidenced effective risk assessment, sound decision-making and partnership working with relevant agencies.

Taken together, these examples provided assurance that the home is able to respond flexibly and appropriately when women's circumstances change. The actions taken showed a continued focus on women's safety, wellbeing and individual outcomes. The home demonstrated a sensitive and trauma-informed approach, balancing the need to assess and manage risk with respect for women's individual circumstances, choices and support needs.

The home identified a gap in communication with women whose first language is not English and invested in a real time translation tool which instantly converts spoken or written language into English. Staff commented that the tool has helped to reduce potential communication barriers and support more effective communication with women. The home also has additional plans to strengthen engagement and raise awareness of its services with communities and groups who may experience barriers to accessing support, helping to ensure information about the service is available to those who may need it.

The home has also reviewed its approach to a 11pm restriction to a more individualised assessment of need and risk. This enables women's personal circumstances, routines and lifestyles to be considered, supporting a more flexible and person-centred approach. To support this approach the resident staying out policy and Statement of Purpose have been updated to account for this change.

As evidenced, the home demonstrated an effective and responsive approach to meeting the needs of women accessing support. These actions reflected a service that is reflective, adaptable and committed to continually improving the support provided to women.

Is the service caring?

Care is respectful, compassionate, and dignified. Care meets people's unique needs.

Copies of the house agreement are in each bedroom, so they are available for women upon arrival into the home. It is clear in setting out the house rules and responsibilities of women during their stay. The house agreement was recently reviewed and includes a confidentiality agreement. A sample of unoccupied bedrooms were seen which found them to be clean, well-presented and prepared with essential toiletries available. This reflected a dignified and respectful approach for women on arrival into the home, recognising the difficult circumstances in which they may arrive at the home.

The home is registered to provide personal support rather than personal care, consistent with its Statement of Purpose. Staff demonstrated a clear understanding of the scope of the service and how they support women to maintain independence whilst ensuring access to alternative services where needed. Arrangements can be put into place to ensure women who require personal care needs can be provided with this type of support should they need it. A designated bedroom has been identified and equipped specifically to accommodate women who may need additional support.

Staff spoken with during the inspection, alongside feedback received by email demonstrated a non-judgemental and compassionate approach towards the women and children they support, recognising the impact of their experiences. They also demonstrated a strong awareness of the importance of maintaining privacy and confidentiality. All staff spoke positively about their roles and came across as motivated, passionate and committed to achieve positive outcomes for women and children.

Staff demonstrated an understanding of the impact that domestic abuse can have on children and described that children's needs also form part of the assessment alongside their mothers. A child and family support worker has been recruited and will be starting in the home in September.

Support plans, records and discussions with staff and the Registered Manager showed that support is tailored to each woman's individual circumstances, risks and personal goals. Women are encouraged and supported to make informed decisions about their own lives and future, with staff providing signposting and access to a range of external agencies and organisations where additional specialist support is required.

Although women did not provide feedback during the inspection, the records reviewed indicated that staff had built trusting relationships with women. An example of this was seen where one woman who was admitted during the inspection phase had placed her trust in the home at a time of significant vulnerability, and where her admission has been arranged at unsociable hours when she most needed assistance.

A structured key worker system is in place, providing women with regular one-to-one opportunities to discuss their progress, review goals and identify any additional support needs. Staff explained that these sessions are used to help women recognise achievements, build confidence and maintain motivation, particularly during periods when they may feel that progress is slow or difficult to achieve. Staff showed the outcome tracker system which can help women visualise their progress as a tool to boost their morale as and when needed.

The caring approach towards women in the home also extends upon their discharge. Records showed that women are offered ongoing contact once they leave the home which is based entirely on their preferences. The level and duration of contact is agreed with women and recorded and reviewed regularly. This shows that support is offered dependent upon individual preference to maintain safety and check in on women's wellbeing where necessary.

Is the service well led?

The leadership, management and governance of the organisation assures delivery of high-quality care, supports learning and innovation, and promotes an open and fair culture.

Six members of staff provided feedback to the Regulation Officer, representing a range of experience within the home, from those who had worked in the home for many years to more recently recruited staff. Feedback was consistently positive and indicated strong staff morale. They described the management team and their colleagues as supportive and highlighted a shared commitment to helping women to progress towards their individual goals. Staff commented:

> The team are brilliant, and the manager is supportive. There's a warmth about the team, everyone supports each other.

> We're very lucky and there's really good support. There are no problems going to the management team. They're very logical and empathetic.

One staff member also commented that they felt the home provides a safe, supportive and non-judgmental environment for women and children. They highlighted the team's collaborative approach, explaining that all staff try to understand each woman's circumstances to ensure consistent emotional and practical support throughout their stay.

The staff team spoke highly of the Registered Manager and their knowledge, passion and commitment to improving the lives of women using the home. Additionally, effective governance processes are in place through monthly Provider visits and oversight. Samples of monthly reports were seen which were detailed which provided assurance that the home's performance against the Standards was regularly reviewed.

> I feel valued as part of the team and feel my opinions are considered. This reflects the positive and supportive culture that exists within the service.

The service is currently recruiting for a new CEO (Chief Executive Officer).

Induction records were seen which evidenced a structured and comprehensive induction process for new staff. This included working alongside experienced colleagues during the day and night and reflecting on learning and practice. Competency assessments are signed off by the Registered Manager. One staff member spoke positively of their induction and support provided by the whole staff team.

Staff are encouraged and supported to develop in the roles and undertake both mandatory and specialist training relevant to women and children. Training records and sample certificates were reviewed which were well maintained and evidenced that priority is given to staff training. Staff also confirmed they were supported to undertake training and other professional development opportunities afforded to them.

All staff had completed specialist domestic abuse training, some in specialist aspects and all described they had sufficient knowledge to carry out their roles effectively. The core training completed by staff team is accredited and recognised as equivalent to a Level 3 vocational award which is tailored to the needs of women experiencing domestic abuse.

Minutes of team meetings were reviewed which showed that relevant operational matters were discussed, with clear actions identified where necessary. Staff told the Regulation Officer that they were encouraged to share ideas, discuss practice and reflect on their work in various ways which they found helpful. They described a positive culture in which professional discussion and constructive challenge are encouraged. One staff member commented "*I feel comfortable raising concerns or challenging practice where necessary, and these conversations are always approached in a constructive and professional manner. I feel listened to and respected by both the team and management and genuinely feel valued as part of the team and feel that my opinions are considered. This has made me feel included and appreciated, and it reflects the positive and supportive culture that exists within the service.*"

A team development day is planned for September providing a further opportunity for the team to come together, reflect on practice and consider ways of strengthening their approach to supporting women.

Samples of staffing rotas were seen which identified staff, on call management cover, start and finish times, and cover for staff sickness. Whilst there are minimum staffing levels planned over the 24-hour period, the home takes a flexible approach to staffing and will adjust as necessary as was seen by one example in response to identified risks and needs.

Arrangements for staff supervision are in place and the Registered Manager spoke of the need to promote the well-being of staff whilst supporting women and hearing of their personal situations. In addition to the formal in house and external supervision opportunities, staff said they gained lots of informal support on a regular basis from colleagues.

The Registered Manager has recently strengthened the appraisal process with the introduction of a competency framework that focuses on knowledge, skills and behaviours. Staff complete a self-assessment against the framework, which is then discussed during the appraisal with a focus on recognising individual strengths. This process will be reviewed and compared year on year, showing a measurement of personal development and progress and recognising and building upon the staff members' strengths.

The Registered Manager demonstrated a strong knowledge and understanding of the service, its ethos, and the needs of the women the home supports. They are progressing through a Level 5 leadership and management qualification, and during the inspection they were being assessed by their assessor. The Regulation Officer concluded that the Registered Manager was well organised, knowledgeable and has clear oversight and involvement in the day-to-day operation of the home.

IMPROVEMENT PLAN

There were no areas for improvement identified during this inspection, therefore; an improvement plan is not required.

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.

Jersey Care Commission

Jersey Care Commission
1st Floor, Capital House
8 Church Street
Jersey JE2 3NN

Tel: 01534 445801
Website: www.carecommission.je
Enquiries: enquiries@carecommission.je