

East Fife Women's Aid**Service name**

East Fife Women's Aid

Service address

Cupar

Type of care service

Housing Support Service

Provider name

East Fife Women's Aid

Service number

CS2004074976

Date of inspection

13 July 2007

Type of inspection

Announced

Care Commission OfficeLargo House, Carnegie Avenue,
Dunfermline, Fife , KY11 8PE**Period since last inspection**

37 weeks

Introduction

East Fife Women's Aid is one of three Women's Aid groups in Fife providing crisis support services to women and children affected by domestic abuse. It is affiliated to Scottish Women's Aid and has been established for eleven years.

East Fife Women's Aid is a charitable organisation which offers support, information and temporary accommodation for women and their children (if any) where women have experienced domestic abuse. A follow-on support service for women leaving the refuge accommodation and an outreach service for women who have not accessed the refuge is also available.

There are ten single occupancy refuge properties. East Fife Women's Aid is registered with the Care Commission to provide a housing support service to women and their children in Fife.

The group provides an office-based information/support service that operates during office hours. In addition there is a children's support service, providing opportunities to meet the education and emotional needs of children affected by domestic abuse. The children's service is subject to a separate inspection.

One refuge property is fully equipped to accommodate a service user with additional support needs, for example, wheelchair accessible. The office does not have disabled access; however, it is understood that alternative arrangements can be made by staff to meet service users outwith the office base.

East Fife Women's Aid also operate an on-call service outwith office hours 365 days per year, where one staff member is available to provide telephone advice and assistance.

All staff are employed in accordance with East Fife Women's Aid recruitment and selection procedure, which includes an application form, two written references (one of whom should be the current or most recent employer), an Enhanced Disclosure Scotland check and an individual interview.

Basis of Report

This was an announced inspection and was carried out in line with The Regulation of Care (Scotland) Act 2001, the Regulations which follow the Act, mainly Scottish Statutory Instrument 114 - the Regulation of Care Requirements as to Care Services) (Scotland) Regulations 2002.

A Regulation Support Assessment (RSA) was carried out to determine what level of inspection activity was necessary. The (RSA) is an assessment undertaken by the Care Commission Officer which considers: complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service and action taken upon requirements. This service was assessed as (2) requiring a low level of regulation support.

The service was assessed against the National Care Standards for Housing Support Services, and selected:

Standard 3 - Management and Staffing arrangements

Standard 7 - Exercising Your Rights (Housing Support Services)

The Inspection Focus Areas for 2007/08 of Protecting People and Quality Assurance have been selected for inclusion in this inspection and are reported on.

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at www.infoscotland.com/firelaw.

The inspection process commenced on 13/07/07 and was carried out by Care Commission Officers Morag Peggie and Lorna Shewan. The registered Manager and two team leaders were present and provided assistance in a professional and competent manner.

Information for the report was obtained from the self-evaluation documentation completed by the Manager prior to the visit and submitted within the agreed timescales.

The views of service users and staff were sought.

A questionnaire from one service user was completed and returned. The Care Commission Officer would like to thank this service user for taking the time to provide information for the inspection

report.

Questionnaires were distributed to staff within the registered service. A total of eight questionnaires were completed and returned.

The Care Commission Officer appreciated the time taken by staff to provide information for this report.

Action taken on requirements in last Inspection Reports

It is Recommended (1) that the written agreement should include information on the terms and conditions for changing or ending the agreement. With reference to the National Care Standards, housing support services, standard 9.

This has been addressed

It is Recommended (2) that a policy is developed to support and guide staff if in receipt of an unsatisfactory enhanced Disclosure Scotland check. With reference to The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002. Scottish Statutory Instrument 114, 9 (1).

This has been addressed and was viewed during the inspection visit.

A Recommendation (3) is made, where existing staff apply for internal appointments within the organisation, they should be subject to the organisation's recruitment and selection procedures, which should also include an up-to-date enhanced Disclosure Scotland check. Evidence that this has been carried out should be available within the staff member's file. With reference to The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002. Scottish Statutory Instrument 114, 9 (1), 19 (2) (a-e).

This has been addressed.

It is Recommended (4) that a record of all complaints/ concerns is maintained indicating action taken and outcome. The information can then be cross-referenced to the more detailed account as required. With reference to The Regulation of Care (Requirements as to Care Services) (Scotland)

Regulations 2002. Scottish Statutory Instrument 114, 25 97).

This has been addressed. The complaints/concerns record was viewed as part of the inspection process.

It is Recommended (5) that this arrangement is made clear in the support agreement, and that the service user's agreement or alternative arrangements are recorded in each instance. With reference to the National Care Standards, housing support services standard 7 (1), (2), (3).

This is commented on more fully in the body of the report.

Comment on Self-Evaluation

The self-evaluation document was completed on-line by the Manager and submitted within the agreed timescales. Information provided demonstrated an understanding of the National Care Standards, identified strengths and areas for development

View of Service Users

A questionnaire from 1 service user was completed and returned. The Care Commission Officer would like to thank this service user for taking the time to provide information for the inspection report. Comments with regard to the service were generally positive.

It is appreciated that the care service carried out an independent customer review, December 2006 - January 2007. The review investigated specific aspects of the service delivery, and how these may be improved. Service user opinions were collated by means of questionnaires, telephone interview and group discussion. Service user comments have been responded to and agreed changes to improve service delivery are being implemented. This is considered good practice. A copy of this report was made available to the inspection officers.

View of Carers

This was an announced inspection visit and prior notification of the date was given. The Care Commission Officer was not approached with views from carers for this inspection report.

Regulations / Principles

National Care Standards

National Care Standard Number 3: Housing Support Services - Management and Staffing Arrangements

Strengths

At the time of the inspection visit there were 6.35 whole time equivalent staff (based on 40 hours per week), who work a variety of hours to provide a housing support service to twenty-three women and their children in Fife.

Strategic direction, policy and procedure decision making is provided by a Board of Directors.

The aim of the service is to offer support, information and temporary accommodation for women and their children (if any) where women have experienced domestic abuse. Residents have occupancy agreements where refuge accommodation is provided. "Follow on support" can be provided for an agreed period of time to women moving into their own tenancies.

The service has adopted all relevant policies and procedures developed by Scottish Women's Aid.

All staff are employed in accordance with East Fife Women's Aid recruitment and selection procedure which includes; an application form, two written references (one of whom should be the current or most recent employer), an enhanced Disclosure Scotland check and an individual interview. A total of 3 staff files were viewed during the inspection visit.

Staff training needs, on an individual and team basis, were assessed on a regular basis with both professional and personal interest training needs met. All staff undertook core induction training which included health and safety, child protection and the policies and procedures of the service. Staff were supported to undertake training, confirmed their motivation and commitment to training and valued this in the ongoing development of their roles. The effectiveness of training was monitored through team and individual discussion with staff.

All staff had been made aware of the Scottish Social Services Council (SSSC), its role and Codes of Practice. They were also aware of the requirements for registration with the SSSC

A total of eight staff questionnaires were completed and returned. Staff indicated that there are open

communication systems and that they feel well supported as part of the team. Staff indicated that there has been adequate training opportunities made available to them, and one staff member indicated that they have an identified training need in IT.

The Care Commission Officers would like to thank staff for giving up their time to provide information for this report.

Areas for Development

The annual training plan and a training and development policy were being reviewed and developed at the time of inspection.

The service is currently implementing individual staff supervision. It is understood that annual staff appraisals are to be implemented within the year. Progress in this area will be reviewed at the next inspection visit.

The service does not currently operate a student placement policy. A Recommendation (1) is made. It is recommended that policy and procedure documentation be developed to cover student placement and/or volunteer workers within the service. With reference to The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002. Scottish Statutory Instrument 114 (2), and the National Care Standards, Housing Support Services, standard 3 (1), (2).

The service does not currently operate a policy with regard to the management of staff records. A Recommendation (2) is made. It is recommended that policy and procedure documentation be developed to cover the management of staff records. With reference to the National Care Standards, Housing Support Services, standard 3 (1).

Staff do not receive training in direct physical restraint as they would not be involved in direct physical restraint. A Recommendation (3) is made. Staff should receive appropriate training/education in relation to restraint issues, including assessment and record keeping associated with restraint. This is in order to comply with The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002. Scottish Statutory Instrument 114, Regulation 13.

National Care Standard Number 7: Housing Support Services - Exercising Your Rights

Strengths

All service users have individualised support plans which define the service to be provided and what the service user can expect from the organisation. Risk assessment details, reports and support plan review information are also available. Individual files for five service users were viewed during the inspection visit. Information is detailed and clearly recorded. Support plans are held in the service user's own home and copies of this information is readily available to staff.

Records are securely held within the office base.

The service has detailed policy and procedure documentation which includes: confidentiality, protection from abuse and how to raise a complaint.

Areas for Development

The service currently operates a system where staff may enter refuge properties to carry out maintenance checks/work when the service user is not present. This is not considered good practice. It is Recommended (4) that where possible, all maintenance checks/work should be carried out in the presence of the service user. Where this may not be possible, due a prior commitment, then the service user's agreement should always be sought or an alternative arrangement made. This information should be clearly recorded in each instance. With reference to The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002. Scottish Statutory Instrument 114 (2), (4 b).

Enforcement

There has been no enforcement action against this service.

Other Information

The Inspection Focus Areas for 2007/08 of Protecting People and Quality Assurance have been selected for inclusion in this inspection and are reported on:

Child Protection in services for adults - children may have visiting contact or be living with service users. The service currently operates a comprehensive Child Protection Policy. This is good practice.

Restraint - it is acknowledged that the service operates a non restraint policy and individual risk assessments for service users are in place as appropriate.

From discussion with staff it is understood that any occasion of restraint would be recorded on an incident form; however, the service is considering developing a specific form to record any incidence of restraint. This would include details of the form of restraint or control, the reason why it was necessary and the name of the person authorising it. Progress in this area will be reviewed at the next inspection visit.

The service does not have a copy of "Rights, Risks and Limits to Freedom" and "Safe to Wander", Mental Welfare Commission Best Practice Guidance. It is Recommended (5) that the service will obtain and implement these documents as a basis for decision making in respect of restraint. With reference to the National Care Standards, housing support services, standard 4.

Adult Protection - the service does not have a copy of Fife Multi-agency Vulnerable Adult Protection Procedures. A Recommendation (6) is made. The care service will obtain and implement the local inter-agency policy. With reference to the National Care Standards, housing support services, standard 3.1.

Staff within the service have not been provided with training in adult abuse and adult protection. A Requirement (1) is made. The care service will ensure access to appropriate training in adult abuse issues and use of associated policy and procedures to all staff with access to service users. This is in order to comply with The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002. Scottish Statutory Instrument 114, 4 (1) (a), 13 (c) (i).

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This is in order to comply with The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002. Scottish Statutory Instrument 114, 4 (1) (a), 13 (c) (i).

Recommendations

A Recommendation (1) is made. It is recommended that policy and procedure documentation be developed to cover student placement and/or volunteer workers within the service. With reference to The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002. Scottish Statutory Instrument 114 (2), and the National Care Standards, Housing Support Services, standard 3 (1), (2).

A Recommendation (2) is made. It is recommended that policy and procedure documentation be developed to cover the management of staff records. With reference to the National Care Standards, Housing Support Services, standard 3 (1).

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Lorna Shewan
Care Commission Officer