

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

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Service address

Cupar

Type of care service

Housing Support Service

Provider name

East Fife Women's Aid

Service number

CS2004074976

Date of inspection

26 October 2006

Type of inspection

Announced

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

33 weeks

Introduction

East Fife Women's Aid are 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 ten 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 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.

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

Standard 2 - Your Legal Rights

Standard 3 - Management and Staffing arrangements

Standard 4 - Housing Support Planning

Standard 6 - Choice and Communication

The inspection process commenced on 26/10/06 and was carried out by Care Commission Officers Morag Peggie and Lorna Shewan.

Information for the report was obtained from pre-inspection and self-evaluation documentation completed by the Registered Manager prior to the visit and submitted within the agreed time scales.

The views of service users, their relative/representative and staff were sought.

The Care Commission Officer would like to thank service users for giving up their time to provide information for this report.

Seven staff 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

There were no Requirements made from the last inspection report. Progress with recommendations is reported on below;

It is Recommended (1) that the information pack is further developed to include:

(a) how the quality of housing support service is monitored

(b) policies and procedures for managing risk and recording and reporting

accidents and incidents

(c) the relevant policies and procedures of the housing support service

(d) the most recent Care Commission inspection report.

With reference to the National Care Standards, housing support services, Standard 1 (1).

This has been addressed

It is Recommended (2) that this information be further developed to form a written agreement which clearly defines the service to be provided, the terms and conditions for receiving the service, and arrangements for changing or ending the agreement. With reference to the National Care Standards, housing support services, Standard 2 (1).

This has been addressed and is commented on in the body of the report.

It is Recommended (3) that the personal support plan is further developed to contain information on the following; what the service user prefers to be called, which other services must be contacted if there is an important change in health or personal circumstances, an independent person to contact if the service user wishes to make a complaint or raise a concern, who else may be contributing to the support and care package and when the housing support is being provided. With reference to the National Care Standards, housing support services, Standard 4 (2).

This has been addressed.

Comment on Self-Evaluation

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

View of Service Users

Information provided by service users indicated that the service was considered important and the support provided is of a high standard. Staff were considered to behave in an appropriate and respectful manner. Service users are aware of the complaints procedure and all service users have a written support plan.

The Care Commission Officers would like to take this opportunity to thank service users for taking

the time to provide information for this inspection visit.

View of Carers

Although this was an announced inspection visit and prior notification of the date was given. The Care Commission Officers were not approached by carers with views of the service.

Regulations / Principles

National Care Standards

National Care Standard Number 2: Housing Support Services - Your Legal Rights

Strengths

There is detailed information contained within the "welcome pack" which includes what services are available, the charter of rights, the complaints procedure, the most recent inspection report and summaries of important policies and procedures. A support statement is completed on admission with regard to who will provide the support and how often this will be delivered.

Areas for Development

It is understood that the refuge rules are currently under review, and that an independent service user coordinator for homeless people is involved in the review process to provide impartial feedback of service provision and any proposed changes. Although information within the pack is not readily available in different formats it is understood that this is currently being explored as an area for development.

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.

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

Strengths

Up until February 2006, the day to day management of the service was operated through a flat management structure. All staff were of equal status, with defined responsibilities for managerial aspects of the organisation. From February 2006, a Temporary Change Manager was in place and more recently (31/07/06) an overall Manager has been appointed to follow through the organisation's 2006/07 Action Plan which is providing to be a positive move for the group.

At the time of the inspection visit there were 5.8 whole time equivalent staff (based of 40 hours per week), who work a variety of hours to provide a housing support service to nine women and their children in Fife. There is currently a vacancy for one staff member.

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; 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 4 staff files were viewed during the inspection visit. Consideration should be given to develop a checklist/system to record the process of recruitment, and that this should be retained at the front of each file to evidence that the relevant checks etc have been carried out and the date received/completed.

A total of six 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 a lack of training opportunities during the period of restructure. Progress in this area will be subject to examination at the next inspection visit.

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

Areas for Development

It is appreciated that the Manager is a recent appointment to the team and that some work has commenced to develop staff files. From the four staff files randomly selected it was noted that not all files had evidence of skills and experience and, if appropriate qualifications. This is not good practice.

The organisation does not currently operate a policy in relation to unsatisfactory enhanced disclosure Scotland checks. 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).

It is understood from discussion with the Manager that the organisation intends to implement a system to re check enhanced disclosure Scotland checks, this is good practice. Progress in this area will be reviewed at the next inspection visit.

A Recommendation (3) is made, where existing staff apply for internal appointments within the organisation, they should be subject to the organisations 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 members 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).

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 record of complaints, although it is understood that the written details of any complaints relating to staff or service users would be retained within the individuals file. 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).

The incident/accident recording document should be further developed to include sufficient information which can then be cross referenced to the separately filed more detailed account as required.

National Care Standard Number 4: Housing Support Services - Housing Support Planning

Strengths

All service users have a personal support record and a personal support plan. This is good practice. These documents are completed after a settling in period, and incorporate a self assessment of

need. Information contained in the plan outlines areas and levels of support. These include financial assistance ranging from claiming appropriate benefits to managing debts, living in the refuge, healthy living, household skills, communication/literacy skills, personal safety, and general support needs.

Areas for Development

As an area for development the service is aiming to provide all service users with eight weekly reviews and this will involve other agencies as appropriate. Progress in this area will be examined at the next inspection visit.

The organisation has a procedure to regularly enter refuge properties to carry out maintenance checks/work. It is understood that this may be undertaken when the service user is not present. It is Recommended (5) that this arrangement is made clear in the support agreement and the service users agreement or alternative arrangements are recorded in each instance. With reference to the National Care Standards, housing support services standard 7 (1), (2), (3).

National Care Standard Number 6: Housing Support Services - Choice and Communication

Strengths

Every effort is made to support service users with communication and to make choices about their day to day life. Staff have experience in a variety of communication techniques and advice is sought from the appropriate professional, for example speech and language therapy, and independent advocacy as appropriate. Information is clearly recorded within individual plans to support and guide staff and further discussed and shared during team meetings.

The inspection Officers viewed four residents records; information was appropriately detailed and clearly documented.

Areas for Development

It is understood that the service is currently reviewing the visitors policy to promote positive support from friends/family

Enforcement

There has been no enforcement action against this service.

Other Information

While reviewing the "Warning and Appeal System" for service users it was noted that the information contained in this document stated that "Appeals should be in writing.." Consideration should be given to ensure that service users who are unable to write or whose first language is not English are not disadvantaged.

Requirements

Recommendations

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.

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).

It is understood from discussion with the Manager that the organisation intends to implement a system to re check enhanced disclosure Scotland checks, this is good practice.

A Recommendation (3) is made, where existing staff apply for internal appointments within the organisation, they should be subject to the organisations 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 members 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).

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to the National Care Standards, housing support services standard 7 (1), (2), (3).

Lorna Shewan
Care Commission Officer