



Contract and Service Review Report:

Provider: Cross Keys Support Group

Review Date: 17th & 20th June 2008

Review Officers: Alison Flood and Keily Proctor

This report was presented to Provider: Thursday 17th July 08 – 9am

4 Week Action Plan Review: Friday 15th August 08 – 9am

6 Month Action Plan Review: Tuesday 20th January 09 – 9am

NOTE: This Report only refers to the support service operated by this organisation, it does not report on any aspect of buildings owned by the landlord. Concerns raised by service users have been referred to Isle of Wight Council - Housing Renewal Manager.

Providers are reminded that under the terms of the steady state contract they must achieve and maintain a minimum of level C as assessed against the Quality Assessment Framework. Failure to meet minimum standards will be addressed consistent with the terms and conditions of the contract.

Part One

Introduction

1.1 Cross Keys Support Group

Cross Keys Support Group is an organisation operated by Private Individuals: Mr & Mrs Cox. Mr & Mrs Cox are the landlords and Mr Cox manages the support side of this organisation.

The service is an accommodation based service delivering support to 24 units of accommodation spread across 7 locations in Ryde. The service is overseen on a daily basis by Chris Cox, who is supported by one Administrator/Support Worker, and 2 Support Workers.

1.2 The Service Users

The service user information pack states that the service users will be provided with all relevant Cross Key's policies and procedures, however this needs to be updated

1.2.1 Urgent Action

- To include a section summarising Health & Safety policy and procedures
- A short summary of the IOW Multi Agency Safeguarding Adults Policy needs to be added to the information pack

1.2.1 Action Completed 20/02/09

The Review Officers received feedback from 10 service users, in the form of informal chats and questionnaires. Below are some of the comments that were made, both positive and some negative. Please see Appendix 2 for a complete report of these responses

1.2.2 Comments made by the service users included:

- Made it possible to face life with all the turmoil over children.
- Made it a lot better for my future & health has improved, also my drinking has improved
- Made me feel back to my usual self. I had a bad marriage, but my support worker made me feel human again.
- I feel if I ever have a problem or something is bothering me, I feel there is always someone to help me

- I would like to know when they are coming; I get no feedback, gets frustrating. staff are hard to get hold of.
- I would like regular visits and those to be pre arranged. Confidentiality is a worry for me, I would like some sort of re-assurance that I will not be talked about to other service users. Issues that are raised, to be acted upon and not just forgotten about and ignored.
- There are issues regarding the lack of confidentiality.

1.2.3 Urgent Action:

- Ensure that all new service users are offered information about the service.
- Offer all service users the opportunity to have pre-arranged and regular visits.
- Ensure complainants are given clear feedback about their concerns. (Written evidence is required in service user's files).
- Ensure all service users are offered copies of the information about them and they are aware they can look at their file on request.
- Ensure the confidentiality policy is not breached (please see Confidentiality section).

1.2.3 Action now completed 20/02/09

1.3 The Staff

The Review officers received feedback from the staff members via questionnaires and an informal chat. Please see Appendix 1 for full responses.

A staff pack was given to the Supporting People team. This includes most of the relevant policy and procedure documents together with a simple declaration of understanding form for completion by the staff member. Staff have received an induction and staff sign the element off when they understand it.

A policy states that supervisions are carried out annually and twice a year for newer members of staff and appraisals are carried out annually however this is not being carried out.

1.3.1 Urgent Action

To ensure that supervisions are carried at least annually, along with annual appraisals.

1.3.1 Action now completed 22/08/08

Some staff did not have references available. This is required under the contract and as part of the Quality Assessment Framework; these are required for 2 staff members

1.3.2 Urgent Action

To provide references for 2 staff members

1.3.2 Action now completed 22/08/08.

1.3.3 Urgent Action

To introduce a signing sheet for all policy updates/training.

1.3.3 Action now completed 20/02/09

1.4 Financial Information

Copies of the latest set of accounts were not provided.

1.4.1 Urgent Action:

Chris Cox to provide the latest set of accounts, as specified in the contract.

1.4.1 Action now completed 20/02/09

1.5 Policies & procedures

None of the Policies and Procedures appears to bear a version date.

1.5.1 Recommendation:

It would be recommended that one be included (together possibly with a version number) to help minimise the risk of more than one version being in circulation at any one time.

1.5.1 Action now completed 20/01/09

1.6 Organisational Chart

An organisational Chart was given to the team; however this has historical information on it.

1.6.1 Urgent Action

The organisational chart needs updating to include current members of staff.

1.6.1 Action now completed 22/08/08

1.7 Business Recovery Plan

Cross Keys have not got a Business Recovery Plan in place, although situations have arose in the past and the problems encountered regarding re-housing service users was sorted out on the same day, as Chris Cox stated that he has lots of contacts in local hotels and numerous properties where he can re-house service users. Also, he is hoping to open an additional accommodation to provide him with greater flexibility.

1.7.1 Urgent Action:

Chris Cox needs to put this Plan into writing.

1.7.1 Action now completed 22/08/08

1.8 Business Plan

A business plan is in place and was created in 2006. It was difficult, however, to determine whether or not it has been reviewed since.

1.8.1 Urgent Action:

To review and revise the business plan and to include future review dates.

1.8.1 Action now completed 22/08/08

1.9 Exit Strategy

An Exit Strategy is not in place for withdrawal of support; however staff did explain how this would be carried out.

1.9.1 Urgent Action

To produce an exit strategy for the withdrawal of support and move on.

1.9.1 Action now completed 22/08/08

1.10 Confidentiality

A Confidentiality Policy was received and staff have signed a declaration, however there was no evidence that Chris Cox had signed this. All members of the team are required to abide by this according to Section 11 of the contract which states:

All details regarding Service Users are confidential and must not be divulged unless with the evidenced informed consent of the Service User or their Advocate and the Provider must abide by the Authority's Caldicott Guidelines a copy of which is provided as Appendix 4 of the contract, except in the following circumstances:

- 1) when permitted by the Data Protection Act 1998 or other lawful means*
- 2) in the case of an emergency*
- 3) when transferring required information to their Staff or sub contractors who need to be aware of any information concerning the Service User;*
- 4) to either Party or their auditors, an officer of Inland Revenue, and officer of HM Customs and excise, a court of competent jurisdiction, governmental body or applicable regulatory body, legal and professional advisors and any other persons or bodies having a right duty or obligation to know the business of the other party and then only in pursuance of such right duty or obligation.*

Failure to meet minimum standards will be addressed consistent with the terms and conditions of the contract.

1.10.1 Urgent Action:

The policy needs amending to take out we “**will try harder next time.**”, as the Review Officers felt that this was not appropriate to the policy.

1.10.1 Action now completed 22/08/08

After looking through service users files, it became apparent that not all had signed a confidentiality statement.

1.10.2 Urgent Action

Chris Cox is required to sign a Confidentiality Declaration, and to ensure that all staff are aware of the implications of breaching confidentiality.

1.10.2 Action now completed 22/08/08

1.10.3 Urgent Action

To amend the policy to include Supporting People contact details to report any concerns regarding confidentiality.

1.10.3 Action now completed 22/08/08

1.10.4 Urgent Action

A Confidentiality Statement needs to be signed by all service users and kept in their files.

1.10.4 Action now completed 22/08/08

1.11 Landlord Issues

Further to feedback from service users regarding the state of the properties, various issues were passed onto the Housing Department for action. Cross Keys have been informed that the Housing Department will be contacting the service users and Cross Keys to attempt to rectify these issues.

Environmental Health has also been notified regarding rats. Further to this being communicated to Cross Keys, a staff member stated that this issue is now under control. However, it has been left with Environmental Health to confirm this.

Service users reported issues regarding leaking gutters. The Service Review Officers would like to refer to Section 3.3 of the Assured Short hold Tenancy Agreement Terms and Conditions which states that:

The landlord will: keep in repair the structure and exterior of the property (including drains, gutters and external pipes).

1.11.1 Recommendation:

Cross Keys to abide by all Terms and Conditions stated in the Assured Short hold Tenancy Agreement relating to the landlords responsibilities.

1.11.1 Recommendation now completed 20/01/09

1.11.2 Recommendation:

Cross Keys and the service users concerned have been advised that they should contact the Warmahome Scheme regarding cavity insulation and the Warmfront Scheme to apply for a Central Heating grant.

1.11.2 Recommendation now completed 20/01/09

1.12 Rent Deposits

As of 6th April 2007 all deposits provided by service users should be paid into a Rent Deposit Protection Scheme. The Terms and Conditions Section of the Assured Short hold Tenancy Agreement does not reflect this.

1.12.1 Recommendation:

Section 5 of the Terms and Conditions needs to be updated and if a Service User has signed a new Tenancy Agreement since this date, their deposit needs to be transferred into one of these schemes. The service user is entitled to know which scheme their deposit has been transferred into. Please refer to the information provided.

1.12.1 Recommendation now completed 20/01/09

C1.1 Needs and Risk Assessment

2 Needs & Risk Assessment.

Cross Keys are using the IOW Supporting People Needs and Risk Assessment that was given to providers, however not all of the service users files are up to date with the new template. Cross Keys have not carried out annual needs assessments of their clients.

As part of the needs assessment, a written process is also included, which staff are currently using.

The assessments offer the opportunity for Service Users views to be incorporated, any disagreements are recorded and if applicable an appeals process will begin. After receiving feedback from some service users, they were unsure whether they were able to obtain information about themselves.

2.0.1 Urgent Action

Ensure all service users are offered copies of the information written about them and that they are aware they can look at their file on request.

2.0.1 Action now completed on 22/08/08

2.0.2 Urgent Action:

Ensure that service users receive an annual needs assessment using the new template.

2.0.2 Action now completed on 20/01/09

2.1 Training Programmes

After speaking to the staff team, it was apparent that they were aware of the assessment process, although they were not aware of the frequency of reviews & assessments.

2.1.1 Urgent Action

The training/induction of the Needs & Risk Assessment needs to include the frequency with which reviews should be undertaken.

2.1.1 Action now completed on 22/08/08

2.2 Risk Assessment

Like the needs assessments, Cross Keys are using the Risk Assessment template provided by the Supporting People Team. All service users had Risk Assessments on their file, although not all of them had the new template.

2.2.1 Action:

When the service users are due for their Risk Assessment to be reviewed, ensure the new template is implemented.

2.2.1 Action completed on 20/01/09

2.2.2 Recommendation:

Add Risk Assessment at the front of the Service Users file to ensure all staff are aware of any perceived risks.

C1.2 Support Planning

3 Support Planning

Cross Keys are using the IOW Supporting People Support Plan which addresses the needs which have been identified from the needs assessment. The plan is outcome focussed and copies are placed on Service Users files.

3.1 Service User Awareness

After receiving feedback from service users, there were mixed answers regarding receiving copies of support plans, awareness of initiating reviews and receiving an information pack at the beginning of their support.

3.1.1 Urgent Action

Ensure that all service users are offered copies of their support plan and are aware of the reason behind having a support plan.

3.1.1 Action now completed on 22/08/08

3.1.2 Urgent Action

Ensure that all service users are given guidance and information about the service.

3.1.2 Action now completed on 22/08/08

3.2 Staff Awareness

After speaking with staff and receiving feedback, it was apparent they all knew the purpose of a support plan and what housing related support is. There were positive comments about the standard client record form, which will be used for all service users in the near future.

C1.3 Health & Safety

4 Health & Safety

A Health and Safety Policy statement was provided at the visit, however there was not a current and signed Health & Safety Poster displayed in the office. The Review Officers provided information regarding how to obtain this.

After speaking with staff members, they all seemed confident and knowledgeable regarding Health & Safety. This is also an element in the induction.

4.0.1 Urgent Action:

To display a Health & Safety Poster in the office.

4.0.1 Action now completed on 22/08/08

4.1 Health & Safety Policy

Two documents were provided: 'Health and Safety Policy Statement' and 'Health and Safety Risk Assessment'. The first of these acts as a Health & Safety Statement, demonstrating an acceptance of responsibility and definition of individual responsibilities, those being Chris Cox and a staff member. A policy was not provided that covered all of the required Health and Safety elements.

4.1.1 Urgent Action:

The Health and Safety Policy Statement needs to be expanded to include the following:

- Accident Investigation
- Alcohol & Substance Abuse
- Contractors
- COSHH (Control of Substances Hazardous to Health Regulation)
- RIDDOR (Reporting of Injuries, Diseases & Dangerous Occurrences Regulations)
- Disabled Workers
- First Aid
- Hazard Reporting and Safety Complaints
- Health & Safety Training
- Manual handling
- Personal Protective Equipment
- Pregnant Workers
- Workplace Standards

Please see examples provided to use the elements required.

4.1.1 Action completed on 22/08/08

4.1.2 Urgent Action:

The Health & Safety training will need to be updated and revised once the policy & procedures have been revised.

4.1.2 Action now completed on 20/01/09

4.2 First Aid

There are trained First Aiders who have completed training in December 2007. Cross Keys have two First Aid boxes which are both maintained and there is a valid accident book in the office.

4.3 Fire Alarm System

The office premises, does not have a Fire Alarm system, smoke alarms, extinguishers or an evacuation system in place. After discussing this matter with the IW Council's Fire Department it was advised that Cross keys should conduct a Risk Assessment for the office premises.

4.3.1 Urgent Action:

A Risk Assessment for the office needs to be carried to determine the level of precautions needed to be taken. Please see guidance provided.

4.3.1 Action now completed on 22/08/08

4.4 PAT Testing

The Health and Safety Risk Assessment policy states that faulty wiring or electrical appliances that can cause fires must be checked periodically; however Portable Appliance Testing (PAT) was not being carried out on electrical equipment in the office or in the rented properties. Guidance was provided by the Review Officers at the visit to clarify this information.

4.4.1 Urgent Action:

To develop and carry out an inspection programme in respect of Portable Appliance Testing. Evidence of this will be required.

4.4.1 Action now completed on 20/02/09

4.5 Identity Cards

Identity cards are not currently being used by staff.

4.5.1 Urgent Action:

To ensure all staff members are provided with identity cards that need to be worn when visiting service users.

4.5.1 Action now completed on 20/02/09

4.6 Lone Working Policy and Procedures

The Lone Working document provided makes reference to the potential for personal risk and a commitment to attempt to minimise or avoid the risks identified. However, there needs to be supportive document which gives guidance to the practices to be employed by staff and those that are monitoring them. Timescales should be given for periods without contact, inclusion of a key word or code that can be used where a 'situation' exists and clearer definitions are needed on ways to avoid provoking an individual. Please see guidance provided for wider issues relating to Lone Working.

4.6.1 Urgent Action:

To produce procedures relating to lone working considering the above and to ensure that all staff members have read and understood this. Evidence will be required.

4.6.1 Action now completed on 22/08/08

4.6.2 Urgent Action:

The Lone Working training will need to be updated and revised once the policy & procedures have been revised.

4.6.2 Action now completed on 20/02/09

4.7 Health and Safety Concerns

A book is held in the office to log concerns for the landlord to action, this is signed off once actions have been completed, it was stated by the staff that this was effective way of dealing with service user's concerns. Although after receiving feedback from service users, they felt that concerns raised were not followed up.

4.7.1 Urgent Action:

Ensure that all concerns are written in the service user's file and feedback is given to the service user including timescales of when issues will be resolved. It would be beneficial that this information is fed back to the service users in writing. Evidence of this will be required to the Review Officers.

4.7.1 Action now completed on 22/08/08

4.8 Risk Assessment of Premises

A Health & Safety Risk Assessment was provided by Cross Keys but there is no provision for it to be completed. An example office risk assessment template was provided by the Review Officers at the visit, and Cross Keys are now using the IOW Supporting People Sample Risk Assessment, which when utilised will ensure that all environmental risks are identified within service users' homes.

The Health and Safety Risk Assessment document states that there is an aim to reduce the fire risks as much as possible. This document in Step 3 outlines numerous fire precautions that need to be in place including all flats and stairwells having smoke alarms, extinguishers are to be in place and checked annually, kitchens have to have fire blankets etc. When visiting the properties this was not evident in all accommodation.

4.8.1 Urgent Action:

To ensure that all guidance stated in Cross Key's Health and Safety Risk Assessment is adhered to.

4.8.1 Action now completed on 22/08/08

4.8.2 Urgent Action:

Ensure all service users have the new version of the risk assessment carried out to allow them to have home risk assessments.

4.8.2 Action completed on 20/02/09

4.9 Emergency Call-Out Procedures

There is a statement that Office Hours are 9-5 and that out of hours contact numbers are given to all service users. It was stated by staff that Chris Cox's number is provided to all service users as an emergency number and the other support workers are also available on their mobiles, however numerous service users reported that Chris Cox does not always answer phone calls.

4.9.1 Urgent Action:

To provide an out of hours contact number that is guaranteed to be answered. This will then need to be communicated to all of the service users and evidence of this will be required.

4.9.1 Action now completed on 22/08/08

C1.4 Adult Abuse

5 Adult Abuse

The Isle of Wight Multi-agency Safeguarding Adults Policy supersedes any previous documentation, one staff member has written a summary of this policy for all staff members to read.

5.0.1 Urgent Action:

This policy needs to be read by all staff members and signed to state that it has been understood. Evidence of this will be required.

5.0.1 Action completed on 20/01/09

5.1 Recording Information

A log is not currently maintained to record all complaints or concerns about abuse made by either the service user or a member of staff. Please see example provided.

5.1.1 Urgent Action:

To adopt and maintain a log provided.

5.1.1 Action now completed on 22/08/08

5.2 CRB Checks

It was stated that the majority of staff had CRB checks carried out however they were not aware that they needed to be submitted every three years. One staff member stated that her CRB check had been carried out within the last three years.

5.2.1 Urgent Action:

To submit CRB checks for staff members who have not had them carried out within the last three years and provide the numbers as evidence. The staff member will also need to provide the number of her last check.

5.2.1 Action now completed on 22/08/08

5.2.2 Action:

To be aware that it is necessary to inform the Supporting People Team of any significant disclosures and to disclose all future convictions.

5.2.2 Action completed on 22/08/08

5.2.3 Action:

Need to take out the guidance regarding CRB checks from the old abuse policy and include it on a new policy.

5.2.3 Action now completed on 20/02/09

5.3 Whistle blowing

A “whistle-blowing” policy is in place that provides protocols for use by staff to report concerns about abuse. After receiving feedback from staff members, it was apparent that they would feel confident in whistleblowing.

5.4 Recruitment and Selection

A Recruitment and Selection Policy was provided however this needs revising.

5.4.1 Urgent Action:

To revise the Recruitment and Selection Policy to include:

Advert

Application Form,

Job description (template was provided)

Person Specifications

Skill profiles

Interview Panel

Question Format

Timescales

Induction Period

Minimum of 2 References

Other Checks

Need to make reference to the Employment Age Regulation 2006

5.4.1 Action now completed on 22/08/08

5.5 Boundaries

A 'Code of Conduct – Boundaries (Material/Financial and Personal)' policy was provided. This document deals with providing a statement of the services approach to dealing with each of the above headings. As with all other documents, a version date is not included and it is not possible to establish how recently this document was written or is intended to be reviewed. Also there was no reference to boundaries included in the induction. It is important that all staff are aware of boundaries and the implications.

5.5.1 Urgent Action:

To review this policy and include a version date to the document

5.5.1 Action now completed on 22/08/08

5.5.2 Urgent Action:

Need to include Boundaries to the induction checklist.

5.5.2 Action now completed on 22/08/08

5.5.3 Urgent Action:

Ensure staff have read & understood the policy and sign off to confirm this.

5.5.3 Action now completed on 22/08/08.

C1.5 Diversity

6 Diversity

It was stated that on- going modifications have already been provided for a service user that required adaptations in their home. Chris Cox stated that these are made as and when required.

6.1 Eligibility Criteria and Application Policy

An eligibility criteria was included that lists a range of criteria that would qualify for accommodation and support at Cross Keys. However, there is no reference to how they prioritise potential service users. Cross keys stated that they prioritise based on need.

6.1.1 Urgent Action:

To ensure that the prioritisation of service users, is included into the eligibility criteria and to include a review date on the document.

6.1.1 Action now completed on 22/08/08

6.2 Equal Opportunities, Anti-Discriminatory and Harassment Policies

A policy was provided that includes discrimination on grounds of gender, age, religion, disability, nationality and sexuality. However this needs to be explained to the service users.

6.2.1 Urgent Action

To revise the service user's pack to include a brief summary about Equal Opportunities, Anti Discriminatory and Harassment.

6.2.1 Action completed on 22/08/08

6.2.2 Urgent Action:

The Equal Opportunities section is in need of updating to include Employment Equality (Age) regulations and Human Rights Act 1998

6.2.2 Action now completed on 22/08/08

6.2.3 Urgent Action:

The Anti Discriminatory Policy needs to be expanded to include everyone including service users.

6.2.3 Action now completed on 22/08/08

6.2.4 Urgent Action:

A process needs to be included on what action to take if staff or service users are discriminated against.

6.2.4 Action now completed on 22/08/08

6.3 Induction and Training Programmes

Equal Opportunities, Anti-Discriminatory and Harassment is included in the staff induction.

6.3.1 Urgent Action:

Ensure that staff have read & understood the amended version of the policy.

6.3.1 Action now completed on 22/08/08

6.4 Cultural and Religious Resources

Service Users are provided with guidance about local religious and cultural facilities.

6.4.1 Urgent Action:

Cross Keys need to review this booklet to ensure up to date information is distributed. A version date & number needs to be added.

6.4.1 Action now completed on 20/01/09

C1.6 Complaints

7 Complaints

Cross Keys have a complaints procedure that is clearly set out in three stages which includes timescales for responses, who to complain to and how to escalate the complaint. The procedures apply to a range of individuals who feels that they are dissatisfied with the service. There is no version date on the policy.

7.0.1 Urgent Action.

The Complaints policy needs to be amended to include the following:

- State who deals with a complaint at stages 1 and 2.

- Stage one should clearly state that a discussion between Service user and Support Worker should firstly be had to try and resolve the matter.
- Make reference to the service user's right to be represented by a friend, family member advocate or professional.
- Make reference to Supporting People complaints & appeals procedure and a phone number needs to be added to the policy
- A version date needs to be added to the policy

A complaints form was provided but it needs to be revised.

7.0.1 Action now completed on 22/08/08

7.0.2 Urgent Action:

A Complaints log need to include a breakdown of the outcomes reached, together with the actions taken and the time taken to respond at each stage applied and that these are 'reasonable' is required (please see example)

7.0.2 Action now completed on 22/08/08

7.1 Service User Awareness

A copy of the Complaints procedure is included in the pack provided to service users, however feedback from service users stated that complaints are not followed up and feedback is not given. The review officers will send out the Supporting People complaints leaflet to all service users.

7.1.1 Urgent Action:

Ensure that all complaints are recorded into the service users file and feedback is given.

7.1.1 Action now completed on 20/01/09

7.2 Staff Awareness

All staff were aware, on how to deal with complaints and the procedure to be followed.

Quality Assessment Framework	Self Assessment	Current Grading at review Jul 09	Grading as at Feb 09
C 1.1 Needs & Risk Assessment	B	D*	C
C 1.2 Support Planning	B	D*	C
C 1.3 Health & Safety	B	D*	C
C 1.4 Adult Abuse	B	D*	C
C 1.5 Diversity	B	D*	C
C 1.6 Complaints	B	D*	C

*** Will attain a higher grade once the action plan is satisfactory completed.**

Review Officer
Alison Flood

Review Officer
Keily Proctor

Date.....

Authorised by

Manager.....
Paul Bakewell

Date.....