



Contract and Service Review Report:

Medina Housing Association

Services included under the review:

Coburg Court	Crocker Street
Gobles Close	Gordon Lodge
Holyrood Street	Malthouse Court
Park Court	St Cross Court
The London	Wallace Court

Review Date: July 2008

Review Officers: Alison Flood and Keily Proctor

This report was presented to Provider: Friday 19th September.

4 Week Action Plan Review: Friday 24th October – 9am.

6 Month Action Plan Review: Friday 3rd April 2009- 9am.

Please note, recommendations regarding landlord issues have been highlighted in the appendices. Although these are not part of the service review, the Supporting People Team strongly recommend that these are followed up.

1.0 Introduction

Medina Housing Association (MHA) is an exempt charitable Registered Social Landlord (RSL) created in 1990 to receive the housing stock of the former Medina Borough Council on the Isle of Wight. It manages 3,000 homes for rent and sale from two offices in Newport.

Medina Housing Association owns and manages 320 sheltered rented housing units plus 28 leasehold bungalows. The rented schemes are located at 9 separate sites on the Island in Ryde, Newport, Cowes & East Cowes. Schemes are managed by non resident scheme managers who provide daily and weekend cover with an out of hours response cover provided by the Isle of Wight Council's Wightcare service. The Neighbourhood Housing Manager oversees the Scheme Managers.

1.1 Business Recovery Plan

A business Recovery Plan was provided which is outlined in the Sheltered Handbook which includes fire, medical emergencies and other emergencies that may arise.

1.2 Medina Housing Associations Business Plan

MHA's current Business Plan is built on the original plan set in 2001. A statement provided, stated that MHA has been successful in operating within the terms of the Business Plan and achieving or outperforming annual budgets.

1.3 Exit Strategy

Although an Exit Strategy had not been produced, MHA explained the process regarding when tenants moves on and a Relinquishment Form is used, which is a questionnaire filled out by the tenants before moving on.

1.4 The Tenants Meetings

The Review Officers invited all tenants, in all schemes to coffee mornings/afternoons. Some schemes had a really good attendance, where other tenants preferred to fill out the questionnaires that were sent.

1.5 Tenants Questionnaires

Questionnaires were sent out to all tenants in all of the sheltered schemes. The Supporting People Team received 59% back with varying positive and negative comments.

1.6 Feedback from Tenants with the Related Actions:

Please see **Appendices 2 -14** for a full report of the meeting and questionnaire responses for each scheme.

1.6.1 Crocker St, St Cross Court, Malthouse Court and Holyrood St

“It would be nice to have a scheme manager in the evenings as often tenants are confused and walking around the place and other tenants have to help them.”

1.6.1.1 Urgent Action:

To ensure that tenants that need more care are re-assessed and the appropriate help is put in place.

Action 1.6.1.1 has now been completed-07/11/08

“Make sure all main doors are kept closed, as we are told to not jam them open.”

1.6.1.2 Urgent Action:

To ensure that all tenants are aware of the security issues regarding opening the main doors.

Action 1.6.1.2 has now been raised with MHA – 14/05/09

“When MHA asked to see us, make sure they come, not to keep you waiting most of the day.”

1.6.1.3 Urgent Action:

To ensure that when MHA asked to see tenants that they turn up at the specified time.

Action 1.6.1.3 has now been completed – 24/10/08

“Let us know over the speaker when the scheme manager goes to a meeting, we are usually left in the dark.”

1.6.1.4 Urgent Action:

To inform tenants when the scheme manager is attending a meeting.

Action 1.6.1.4 has now been completed – 24/10/08

Make sure everything is written down by the scheme manager, not to find later on it hasn't been.”

1.6.1.5 Urgent Action:

To ensure all support provided by the Scheme Manager is recorded.

Action 1.6.1.5 has now been completed – 24/10/08

“MHA only tell us what they want us to know and we would like to be more informed. We would like more general feedback from MHA.”

1.6.1.6 Urgent Action:

To discuss with the tenants how they would like to be kept informed about general issues and provide regular feedback.

Action 1.6.1.6 has now been completed – 24/10/08

1.6.2 Gordon Lodge

Not all tenants stated that they had received a welcome pack when they joined the service.

1.6.2.1 Urgent Action:

To ensure that all tenants receive a welcome pack when they join the service.

Action 1.6.2.1 has now been completed – 24/10/08

1.6.3 Park Court

“I don't really understand what supporting people is all about? Would like some explanation.” “Would like to know what Supporting People means.”

1.6.3.1 Urgent Action:

To ensure that all tenants are informed about the Supporting People programme

Action 1.6.3.1 has now been completed – 24/10/08.

1.6.4 The London

“Sometimes I do not feel safe here at the London because some tenants let in strangers they do not know. Teenagers are let in from the youth centre across the road. I'm very happy with the scheme manager in everything she has to do. “

“We have 2 or 3 people here who let anyone in at the front door although they do not know them. So it's not very safe here now as you don't know who is being let in. I don't know why we have the buzzers on the front door, because so many outsiders have keys these days. People could just ring the bell and get let in but now you don't know who you meet in the building these days.”

1.6.4.1 Urgent Action:

The security issue regarding the front door needs to be discussed with the tenants and resolved.

Action 1.6.4.1 has now been completed – 24/10/08

“Scheme managers go to lots of meetings and we are not told where they are.”

1.6.4.2 Urgent Action: (Please see 1.6.1.4)

To ensure tenants are aware when Scheme managers attend meetings.

Action 1.6.4.2 has now been completed – 24/10/08

1.6.5 Wallace Court

Only 60% of the tenants stated that they received a welcome pack when they joined the service.

1.6.5.1 Urgent Action: (Please see 1.6.2.1)

To ensure that all tenants receive a welcome pack when they join the service.

Action 1.6.5.1 has now been completed – 24/10/08

“Scheme managers hours need to be increased, too many tenants not enough hours. 3 hours for 28 tenants is not enough.” The Review Officers checked this against the quarterly workbook returns and there seems to be a discrepancy.

1.6.5.2 Urgent Action:

To re-assess the tenants to establish whether they require further housing related support from a floating support provider.

Action 1.6.5.2 has now been completed – 24/10/08

1.7 Services Currently Available to Tenants

The tenants have a range of activities on offer within the schemes, with the exception of Wallace Court, which has no communal area. Some of the activities available are coffee mornings, chair exercises, line dancing, bingo, focus groups, gardening club, breakfast club, exercise clubs, fire and safety talks, garden party, American suppers, raffles, quizzes, knitting circle and church services at Easter and Christmas.

1.7.1 Recommendation:

To allocate an area at Wallace Court that can be used for social activities.

Recommendation 1.7.1 was passed onto to MHA for consideration.

1.8 Positive Feedback from the Tenants Included:

- You can rely on their support when needed.
- It has allowed me to stay in my own home which I would be unable to without the assistance as I have virtually no sight at all.
- I am very happy and satisfied and glad I came here to live.
- It feels like a safety net around me always there if needed.

1.9 Comments from tenants about the Scheme Managers included:

- Yes I feel secure and safe knowing the scheme manager is there every day.
- We are all happy with the scheme manager, she couldn't do any better.

- Just having them around makes a difference.

1.10 Staff Feedback:

Please see **Appendix 1** for staff results from the questionnaires. Below are some of the comments made by scheme managers when the review officers had a meeting with them:

- Some staff are currently unhappy with the MHA forms used
- Difficult to arrange social activities due to lack of time.
- Have to be here when activities are carried out
- My immediate manager is very good but find other departments difficult – lack of communication
- Difficult to fit everything into a few hours a day
- Have to push things along if anything needs attention raised from Risk Assessment.
- MHA paperwork could be easier to complete.

1.11 Induction & Training

Induction of staff is carried out and a template was provided to the Supporting People team in addition to the corporate induction, which is more specific to Supporting People. When checking staff files there was no evidence of Inductions taking place, due to the staff being employed for many years, however the Supporting People team did receive an induction for one Scheme Manager.

1.11.1 Urgent Action:

Ensure that all new staff commencing employment are inducted and a copy of their induction is retained on file.

Action 1.11.1 has now been completed – 24/10/08

An Appraisal Policy was provided which also refers to the Personal Development Plans which are carried out annually with the staff member and their Line Manager.

1.12 Stakeholder Feedback

The Supporting People Team received stakeholder feedback from another Registered Social Landlord.

1.12.1 Stakeholder Comments included:

- I think both MHA and SWHA need to work and train together a lot more. We both work within the same age range of clients, and sharing knowledge/ideas

would be beneficial to not only the staff team, but to the clients we support.

- Further develop effective lines of communication (SWHA)
- Further develop move-on arrangements between services. (SWHA)
- SWHA work well with MHA and find staff enthusiastic to develop joint initiatives and partner working.

1.13 Confidentiality

A Confidentiality, Privacy and Data Protection Policy is in place that was last reviewed in November 2007. The policy makes reference to the Data Protection Act and the rights of the individual. In the policy the Caldicott Guidelines are abided by using the full guidance provided in the policy and there is appropriate guidance given on how information is recorded, stored and retained.

Principle 6 states that personal information shall be processed in accordance with the rights of the individual. Also, tenants will be asked to give their consent to the processing of data. Considerations relating to The Data Protection Act of 1998, The Human Rights Act 1998 and the Freedom of Information are clearly stated in the policy.

A Data Protection Leaflet was also supplied that explains to the tenants their rights about information that is being stored about them by the organisation.

1.14 Staff Awareness regarding Confidentiality

Evidence showed that all staff are required to sign a Confidentiality Agreement as part of their contract of employment. Staff attend training sessions every three years which is conducted by the Policy and Compliance Officer. Managers are responsible for ensuring that their staff are up to date with all training sessions.

C1.1 Needs and Risk Assessment

2 Needs Assessment

There is a needs assessment in place that forms part of the sheltered housing support plan that is appropriate to the client group. The Neighbourhood Housing Manager notified the Supporting People Team that this is currently known as a Home Risk assessment, but is in the process of being renamed to include needs assessments. There was no document explaining the purpose of referrals and assessments or guidance on how to complete a needs assessment.

The Support Planning Leaflet provides specific guidance that describes the client's views.

2.0.1 Urgent Action:

A document needs to be developed that explains the purpose of referrals and needs assessment and how to complete a needs assessment. Alternatively, the Supporting People Client record template has been provided.

Action 2.0.1 has now been completed – 24/10/08.

2.1 Resident's Risk Assessment

All tenants had a received risk assessments, however when the Review Officers visited the schemes, numerous templates were being used. There was no reference to Abuse or Lone working on the Risk Assessments and it did not consider probability or likelihood to a risk occurring.

When checking the tenants' files, not all Risk Assessments were reviewed annually, and review dates had not been set. Not all Risk Assessments had space for tenants' comments or a space for the tenant to sign.

2.1.1 Urgent Action

To adopt the Supporting People Risk Assessment Template and Minimising and Controlling Risk Guidance or to amend the existing documents to include the reference to abuse, lone working, a scoring mechanism, a review date for the next risk assessment and to ensure a comments box is provided and the tenants have signed the assessment.

Action 2.1.1 has now been completed – 24/10/08

2.2 Staff awareness

The procedures for Assessment and Review are included in staff inductions and evidence showed that staff also attended training.

C1.2 Support Planning

3 Support Planning

A "Support Planning in Sheltered Housing" leaflet is given to the tenants that describe what a support plan is, the reasons behind it and what should be done if a client disagrees with an outcome of the assessment. It also explained the frequency of when reviews should take place. This is also explained in the Sheltered Housing Support Plan document. According to the leaflet it clearly states that this is done with the client. There was evidence shown when visiting the schemes that the tenants are

involved by signing documents to confirm this.

The majority of the files that the review officers looked through showed that tenants had a support plan in place which took into consideration the wider support needs, not just housing related needs. There were clear links to the support plan from the needs assessments as it is a combined document. All copies were retained on the tenants file and the majority of the support plans were offered to the tenants. The Review Officers noticed that some tenants had a different version of the support plan. The service can demonstrate interagency liaison/networking by staff naming contact within other agencies and copies of meetings and staff also attend professionals meetings

3.0.1 Recommendation:

[That all scheme managers are using the latest version of the support plan document.](#)

Recommendation 3.0.1 has been passed onto MHA for consideration.

C1.3 Health & Safety

4 Health & Safety

A Health & Safety Policy is in place which includes delegated responsibilities. There are current and signed Health & Safety Declarations in all of the schemes and at the main office in Lugley Street.

4.0.1 Urgent Action:

[H & S Policy for MHA needs amending as it is dated 2004 with historical staff details.](#)

Action 4.0.1 has now been completed – 24/10/08

4.1 Reporting Health & Safety Concerns

The tenant handbook explains how to report concerns by setting out the procedure to be followed and an out of hour's phone number is provided. Tenants also complete a satisfaction questionnaire, once any work has been completed.

4.2 First Aid

First Aid boxes were available and maintained in all of the schemes. An Accident reporting tool was available and maintained in the majority of the schemes, although Wallace Court were unable to locate it when the Review Officers visited.

4.2.1 Urgent Action:

Ensure that all of the scheme managers are aware of the location of the accident book.

Action 4.2.1 has now been completed – 24/10/08

4.3 Fire Alarm System

Fire alarm systems and evacuation systems are in place for all of the schemes, except Wallace Court which has not got a Fire Panel, this is due to the flats being self contained, however the flats do have individual smoke detectors.

Alarms and fire extinguishers are subject to weekly testing and they are serviced annually and checked by Wight Fire. The Fire Panel is checked four times a year by Lifeline. Evacuations currently only take place in Park Court, Cowes, however Neighbourhood Housing Manager notified the Review Officers that they are in the process of re-introducing this in the remaining schemes. All tenants are given an evacuation procedure and they have to sign to say they understand this.

4.3.1 Urgent Action:

Ensure that regular fire evacuations take place in all schemes. Evidence will be required.

Action 4.3.1 has now been completed – 24/10/08.

4.4 PAT Testing

An Inspection programme is in place in respect of Portable Appliance Testing and it is conducted annually, the last inspection was carried out in December 2007 on the majority of the schemes. However, after checking the offices at Wallace Court, the appliances had not been PAT tested.

4.4.1 Urgent Action:

Ensure that PAT is carried out at Wallace Court.

Action 4.4.1 has now been completed – 24/10/08

4.5 Identity Cards

The Spinnaker Staff handbook states that all employees will be issued with identity cards that must be worn at all times, when visiting all schemes, staff had them on display.

4.6 Lone Working Policy and Procedures

A Lone Working Policy is in place that sets out procedures to minimise the risks to people working alone and is included in the Spinnaker Staff Handbook. Controls are

in place to monitor how and when contact should be made. The Policy was last reviewed in 2004. Lone working is also part of staff inductions.

4.6.1 Recommendation:

To review the policy and add next review date.

Recommendation 4.6.1 has been passed onto MHA for consideration.

4.7 Risk Assessment of Premises

A process is in place for Home Risk Assessments which includes a scoring mechanism with an explanation. Yearly premises risk assessments are carried out by MHA for the majority of the sheltered schemes, although evidence was not available at Wallace Court or Park Court.

4.7.1 Urgent Action:

Ensure that Wallace Court and Park Court have a completed Risk Assessment on site and is updated and distributed annually

Action 4.7.1 has now been completed – 24/10/08

4.8 RIDDOR & COSHH

RIDDOR and COSHH are explained in the main Health & Safety Policy, it also states that training will be provided to staff. All staff members are required to carry out risk assessments on COSHH to minimise risks.

4.9 Staff Training

All scheme managers had either Appointed Person training or a Full First Aid Certificate. After receiving feedback from staff, some were unsure whether they had received refresher training in Health & Safety.

After checking the training files, there was not evidence that staff had received Health & Safety training. The Review Officers also received correspondence from the Human Resources department at MHA that stated: *“Apparently, we don’t have a structured H&S training course for these parts of the organisation. It is under review currently”*. A variety of training is available, but evidence was not provided regarding what courses the newer members have attended.

4.9.1 Urgent Action:

Ensure that all staff receive Health & Safety training/awareness. Evidence of this will be required, showing that a course has been booked or confirmation of an awareness briefing has been attended by all staff members.

Action 4.9.1 has now been completed – 24/10/08

4.9.2 Urgent Action:

Ensure that training records are up to date and courses booked on are on file.

Action 4.9.2 has now been completed – 24/10/08

4.10 Security in Schemes

All schemes have an intercom facility to access the property which needs to be answered by either the individual tenant or the scheme manager. However, tenants at The London raised concerns about tenants not finding out who it is before letting them in, and in some cases it is teenagers from the Youth Club. This has been addressed in Section 1.6.4.1 of this report.

4.11. Out of Hours

The out of hour's service is provided by Wightcare. This is explained in the tenants' handbook. After discussions with tenants and feedback from questionnaires, there were mixed views on the Wightcare service provided.

4.11.1 Recommendation:

To have a meeting with Wightcare to discuss methods of improving the service and response rate.

Recommendation 4.11.1 has been passed onto MHA who had a meeting with Wightcare.

C1.4 Adult Abuse

5 Adult Abuse

A representative from MHA attended the IOW Multi Agency Safeguarding Adults training and this was cascaded to the current staff members across the schemes. However, the policy that the review officers received was not in line with the IOW Multi Agency Safeguarding Adults policy.

5.0.1 Urgent Action:

Medina Housing Association needs to adopt the Isle of Wight Multi Agency Safeguarding Adults Policy and Procedures. This information will then need to be reflected in any leaflets or handbooks produced and future inductions that take place. Evidence of this will be required.

Action 5.0.1 has now been completed – 24/10/08

5.1 Staff Awareness.

After receiving feedback from staff questionnaires it showed that staff were aware of the types of abuse that can take place and how to report any concerns.

5.2 Tenants Awareness

Harassment is included in the residents' handbook but there is not an explanation regarding abuse.

5.2.1 Urgent Action:

To include a brief summary of adult abuse, and how to report any concerns into the tenants handbook.

Action 5.2.1 has now been completed – 24/10/08

5.3 Whistle blowing

A "whistle-blowing" policy is in place that provides protocols for use by staff to report concerns about abuse. Protocols are in place to include who to report concerns to and three alternative contacts are given. The Policy demonstrates a commitment to openness and 'no secrets'. It states in the policy that Whistleblowing is part of the induction and staff briefing sessions, however there was no evidence of either of these. It is, however included in the Spinnaker handbook.

5.3.1 Urgent Action:

To include Whistleblowing onto the Induction checklist and Training Need Assessment document.

Action 5.3.1 has now been completed – 24/10/08

5.3.2 Urgent Action:

To ensure all staff members understand the Whistle blowing policy and evidence of this will be required.

Action 5.3.2 has now been completed – 24/10/08

5.4 CRB Checks

The CRB policy is outlined in the Spinnaker Staff Handbook and CRB checks are an element in the induction. Human Resources stated that some staff member's CRB checks had not been renewed every three years and were in need of updating.

5.4.1 Urgent Action:

Ensure that 4 Scheme Managers have up to date CRB checks carried out.

Action 5.4.1 has now been completed – 24/10/08.

5.5 Boundaries

Boundaries Policy is included on the staff induction and after receiving feedback from staff, it was apparent that they all knew the main features. There was no date on the policy so was difficult to determine whether or not it had been reviewed.

5.5.1 Urgent Action:

To add a date on the Boundaries policy and a future review date.

Action 5.5.1 has now been completed – 24/10/08.

5.6 Abuse Log

A log is not maintained to record all complaints or concerns about abuse made by either the tenants or a member of staff.

5.6.1 Urgent Action:

The log needs to sufficiently detail:

- The detail of what resultant action/s was taken and the timeframe within which they were taken to investigate the complaint or concern.
- The detail of the outcome for each investigation and actions taken in response to the findings made.

Alternatively, an example has been provided.

Action 5.6.1 has now been completed – 24/10/08

C1.5 Diversity

6.1 Eligibility Criteria and Application Policy

The sheltered handbook refers to an application process however no eligibility criteria was provided. The Allocations Flowchart was provided showing how applications are processed and how clients are assessed and prioritised. However, this flowchart was difficult to understand and there was no evidence of when it was reviewed or written.

6.1.1 Urgent Action:

To date the Allocations Flowchart.

Action 6.1.1 has now been completed – 24/10/08

6.1.2 Recommendation:

That the flowchart is revised and re-written using plain language.

Recommendation 6.1.2 has been passed onto MHA for consideration.

6.2 Equal Opportunities, Anti-Discriminatory and Harassment Policies

A policy was provided called 'Equality, Diversity & Inclusion' which covers discrimination, this was updated in December 2007. The policy applies to staff and tenants and addresses issues such as accessing the service and employment. No reference is given to any of the relevant legislation in the main policy however the Spinnaker handbook Equality Diversity & Inclusion policy refers to:

- Human Rights Act 1998
- Race Relations Act 1976
- DDA 1995
- Sex Discrimination Act 1975

There is a written policy covering Anti-Discriminatory practice and harassment included in the Equality, Diversity & Inclusion policy and included in the tenant's handbook. Tenants are made aware of harassment and issues regarding being treated equally.

6.2.1 Urgent Action:

To include guidance on Employment Equality (Age) Regulations 2006 in the Equality, Diversity and Inclusion Policy.

Action 6.2.1 has now been completed – 24/10/08

6.3 Recruitment and Selection Policy

A detailed Recruitment & Selection Policy is in place and the procedure to be followed is outlined and the policy aims to eliminate discrimination when applying the process.

According to the policy two references must be obtained in respect of every employee / volunteer who is employed, however after checking the files not all staff members had two references.

6.3.1 Urgent Action:

All future staff members to have two references.

Action 6.3.1 has now been completed – 24/10/08

6.4 Cultural and Religious Resources

Tenants in Gobles Close, Ryde have access on the notice board, to guidance about local religious and cultural facilities; however this could not be established throughout the other schemes.

6.4.1 Urgent Action:

To provide guidance about local religious and cultural facilities to all the tenants across all the schemes.

Action 6.4.1 has now been completed – 24/10/08

6.5 Staff Awareness

Equality, Diversity & Inclusion is included in the Spectrum Induction. It also became apparent from training information provided by MHA Human Resources Department, that not all staff had received the Equality & Diversity training, which was stated to be mandatory.

6.5.1 Urgent Action:

Ensure that 3 Scheme Managers attend Equality & Diversity Training. Evidence of a course being booked will be required.

Action 6.5.1 has now been completed – 24/10/08

C1.6 Complaints

7 Complaints

The Complaints procedure describes the process to be followed in three clear stages. It states who to complain to and describes how to escalate a complaint, with clear timescales. A complaints & appeals form is used to record issues. The log provides a breakdown of the outcomes/conclusions reached, together with the actions taken and the time taken to respond at each stage. There is appropriate reference made to an Appeals Process for use by tenants in respect of outcomes to assessments and reviews as well as complaints.

The complaints policy did not make reference to the Supporting People leaflet or state that staff and tenants can make a complaint to the Isle of Wight Supporting People Team regarding support issues.

7.0.1 Urgent Action:

To ensure that reference is made to the Supporting People complaints leaflet.

Action 7.0.1 has now been completed – 24/10/08

7.0.2 Urgent Action:

Ensure that Supporting People is added as an independent body to which tenants can make a complaint to regarding their support they receive.

Action 7.0.2 has now been completed – 24/10/08

7.1 Tenants' Awareness

The procedure is written in language appropriate to the client group and is available in forms appropriate to the needs of as many tenants as is reasonably possible. The complaints procedure is clearly stated in the tenant's handbook and an outline is provided of what to do if tenants are unhappy with the outcome.

After speaking with tenants, most of the tenants in the schemes except Wallace Court stated that they were aware of how to make a complaint, however tenants were unhappy as they stated that feedback was not always given.

7.1.1 Urgent Action:

Ensure that all tenants receive the complaints procedure. Evidence will be required.

Action 7.1.1 has now been completed – 24/10/08

7.1.2 Urgent Action:

To ensure that staff abide by the complaints policy and provide feedback within 14 days of when issues are raised.

Action 7.1.1 has now been completed – 24/10/08

7.2 Staff Awareness

From the feedback received staff members were aware of the complaints policy and were confident in dealing with complaints.

Quality Assessment Framework	Self Assessment	Current Grading at Review – Sept 08	Grading at 6 month Review – April 09
C 1.1 Needs & Risk Assessment	C	D*	C
C 1.2 Support Planning	B	B	B
C 1.3 Health & Safety	B	D*	C
C 1.4 Adult Abuse	C	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.....