



Contract and Service Review Report:

Stonham

Services included under the review:

Stonham Floating Support
Stonham Residential Support
Stonham Offender Support

Review Date: 12th & 14th June 2007

Review Officers: Alison Flood and Keily Proctor

This report was presented to Stonham: 18th September 2007

4 Week Action Plan Review took place on: 16th October 2007

6 Month Action Plan Review: 18th March 2008

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

1. Introduction

1.1 Stonham

Stonham Housing Association is part of the Home Group Organisation; it runs numerous directly managed services, nationally working in partnership with local authorities, health care providers, probation and other delivery services.

As well as providing housing, care and practical support, much of Stonham's work is about ensuring that people can live securely and independently.

Stonham's Isle of Wight Floating Support Services are funded by Supporting People and are intended for people who are currently living in their own homes and those living in temporary accommodation; it can also extend to homeless people or those who live in sheltered accommodation.

1.2 The Service Users

The Review Officers had the opportunity to speak to 9% of the service users across the 3 services. A questionnaire was distributed to the remaining service users and we received responses from 11% of those mailed. 94% of clients responding thought that working with the support worker had made a difference to their life and the majority were positive about the services that they were receiving.

Please see Appendix 1 for a complete report of these responses.

1.2.1 Comments made by the service users included:

"I have become more independent & confident"

"I am now moving to a self contained flat, my first home for many years and am moving forward with confidence thanks to my support worker"

"It has given me the knowledge & ability to undertake tasks on my own"

1.3 The Staff

The Stonham Isle of Wight Team consists of two Service Managers, 6 residential support workers, 3 floating support workers, and 2 offender support workers. All members of staff were given the opportunity to provide input towards the review. 4 members of staff were interviewed and 4 members of staff completed a postal questionnaire.

The majority of staff enjoy working for Stonham and thought that it is a good employer.

Please see Appendix 2 for a complete report of these responses.

To attain a Level C

1.3.2 Urgent Action

Please check that all staff members are fully inducted as this was not evidenced in all areas when speaking to staff and viewing files. (Please see Appendix 2 section D)

1.3.2 Action now completed 16/10/07

1.3.3 Comments made by the staff included:

“Excellent team and line managers”

“Too much paperwork”

“Too many reports needed and statistics always having to be compiled”

“I really enjoy my job”

1.3 Stakeholder Feedback:

The feedback provided by the 6 stakeholders that returned questionnaires were all positive.

75% of the stakeholders have frequent contact with Stonham.

67% of the stakeholders believed that the relevance to the Island's needs are high.

83% of the stakeholders thought that the service demand on the Island was high

80% of stakeholders thought that the standard of service provided was high.

1.4.1 Comments included:

“Stonham are a much needed service”

“Increased joint working particularly of vulnerable clients enables them to live in the community.”

Part Two

C1.1 Needs and Risk Assessment

1 Needs & Risk Assessment

1.1 About You Booklet

There is a comprehensive assessments and planning tool known as the “About You” booklet, which incorporates both a needs and a risk assessment and an area for recorded support, which is appropriate to all client groups.

This booklet appears to involve the need for repeated signatures by the client – indicated to be required at the beginning of the assessment and at each page for which support is to be applied. Rosemary Draper & Mark Chambers stated that there have been problems with requesting large number of signatures from service users; however the purpose for this is to show that they are taking ownership of their support.

The About You guidance was updated in 2005 and the Service Support Practice Manual was reviewed in January 2006.

To attain a level C

1.1.1 Action:

The About You booklet needs to include reference to the service user being offered a copy of the assessments and to registering their response.

1.1.1. Action now completed 16/10/07

1.2 Training Programmes

A structured approach to training in Assessment and Review was outlined in the policy documents provided. All staff should receive a full days training relating to using the About You tool within their induction programme.

While checking staff files it was evident that most of the staff have received training in these areas and while speaking to staff the majority were able to describe the procedures that were followed while conducting assessments.

1.3 Risk Assessment

The support issues identified through the assessment process are subsequently summarised in to the same sheet as the support issues.

When contacting service users some stated that they had not had a risk assessment carried out on their property.

To attain level C

1.3.1 Urgent Action:

Ensure that service users have had home risk assessments carried out and that they take part in the process. Written evidence is required.

1.3.1. Action completed 16/10/07

1.3.2 Recommendation

It is recommended that the outcomes from risk assessments should be summarised onto a single sheet that could be placed at the front of a service user's file, which will allow any staff member who is viewing the file to be notified of any potential risks at a glance.

1.4 Assessment Outcomes

Explaining the outcomes to assessments and reviews is covered in detail within the procedures and guidance included in the Services Support Practice Manual.

It was evident from copies of letters sent to referral agencies that the outcomes of assessments are explained to them, which has been agreed by the service user. If a service user disagrees with the assessment outcomes they are encouraged to add their comments to the assessment document and are offered a copy of this document.

Referral agencies have also confirmed this when completing the stakeholder feedback questionnaire.

Successful applicants are informed via an offer of acceptance letter which is placed on their file along with the relevant assessment documentation. Unsuccessful applicants are advised by a letter, which is retained in the unsuccessful applications file along with the reason for the decision. All such letters contain information relating to alternative options. Possible options are also discussed with the client or their referrer.

1.5 Right of Appeal

The 'Tell Us' policy includes a detailed appeal section for use in relation to any decision made by Stonham staff. This process requires the involvement of at least one manager who is not connected with the original decision to carry out the appeal review, with a further escalation process if the complainant is unhappy with the initial appeal outcome. There is also a local appeals policy in situ.

The service user is provided with written details of the appeals process in the induction pack which explains who will be involved, when and where the appeal will take place and also states that the client can be accompanied by a friend relative or other professional. Unsuccessful applicants receive a copy of this along with the refusal letter.

1.6 Interagency Liaison

Stonham are able to demonstrate interagency liaison with various agencies including the Special Needs Housing Panel, The Mental Health Housing Forum, The Care Programme Approach, MAPPA Meetings, and Inclusive Forums etc. This has been evidenced through minutes and various correspondences.

Staff were able to name individual contacts in all of the key agencies that they liaised with and evidenced examples of regular information sharing.

Stonham seeks regular feedback from key agencies as part of service planning and review. This was in the form of three different types of questionnaires, the results of which are recorded and incorporated into the service business plan.

C1.2 Support Planning

2 Support Planning

2.1 About You Booklet

Service Users have up to date support plans which form part of the “About You” support/risk management plan. These demonstrate clear links between assessments of their needs and their support plan. They show the outcomes that service user wants to secure from the service and copies of these booklets are placed in the individual service user files and are reviewed regularly.

Individual support plans are revised to reflect outcomes of reviews and records demonstrate clear links between change of need, client’s outcomes and support plans. The support plans show that the wider needs of the service user’s are taken into account.

2.2 Interagency Liaison

External agencies are involved in support planning. Where appropriate recorded evidence given to the involvement of professionals such as CPN’s, Probation, Mental Health Teams, etc.

2.3 Service User Awareness

Service Users are made fully aware of the service provision by being provided with a wide range of information in the form of “Involving You” information packs, which are tailored for those service user’s who do not live in a Stonham project or service and for those who do have tenancy agreements with Stonham.

There is also a comprehensive Support Charter which informs the service user about the standards and commitments that can be expected from Stonham.

Confirmation that service user's views are listened to and recorded is sought via the service user surveys and local exit survey questionnaires.

2.4 Staff Awareness

After conducting staff interviews and analysing questionnaire results, it became apparent that tasks being carried by staff members were not all Housing Related Support, these included: cooking, laundry, personal living skills and changing sheets.

To be contract compliant

2.4.1 Urgent Action:

Staff need to re-visit the eligibility criteria to ensure that tasks they are undertaking with clients are Housing Related. This needs to be enforced immediately and written evidence will be required.

2.4.1. Action completed 17/10/07

2.4.2 Urgent Action:

Ensure that support staff are not collecting rent from tenants as this is a Housing Management task. This needs to be enforced immediately and written evidence will be required.

2.4.2. Action completed 16/10/07

2.5 Initiating Reviews

There are procedures in place that state that reviews can be initiated at the request of service users.

When interviewed service users were aware that they could initiate reviews at anytime, however greater clarity is needed for the awareness of staff members.

To attain a level B

The 'Involving You' Information does not appear to provide information explaining the right to request reviews.

2.5.1 Action:

This should be included in the Service User packs which are given to all existing and new clients.

2.5.1. Action completed 18/03/08

2.5.2 Recommendation:

That staff are refreshed on the contents of the 'About You' guidance notes in relation to reviews.

2.5.2. Recommendation completed 16/10/07

2.5.3 Recommendation

The process is quite lengthy as there are numerous sections for identifying the areas of support in the "About You" tool. Even though the objective has been obtained for a level B, this process could be simplified, resulting in the staff completing less paperwork and therefore acquiring more time to provide the support.

2.5.4 Comments made by a staff members included:

"I feel the effect of Supporting People's has changed the ethos of the work, it is now paperwork based and not client based, the priority is to have the paperwork filled in properly to please your organisation (Supporting People)."

"In my opinion the intensive support plans are invasive and demeaning, continuing performing to targets, it just reinforces institutionalisation"

2.5.4 Recommendation

Staff members from Stonham should become actively involved in the workshops which are being run by Supporting People that are looking at the scope for developing a standardised Provider Service Support Plan based on the Outcomes Framework. This would help to develop to a process that would reduce the amount of forms that are being utilised, while extracting best practice from other providers.

2.5.4 Awaiting new dates

C1.3 Health & Safety

3 Health & Safety

A current and signed Health and Safety declaration was provided. There is an up to date Health and Safety Policy (July 2005) in place which is included in the induction process and is kept in the service office and is made available to all staff. This is in accordance with relevant legislation and includes information regarding RIDDOR and COSHH and procedures regarding staff illness.

There is also a maintenance manual that is kept in the service office; this contains health & safety policy/procedures relating to maintenance issues where Stonham is the landlord. This manual was reviewed in December 2005.

Emergency procedures are in place and are current and subject to review and the premises visited provided a suitable and safe environment for staff and service users.

3.1 First Aid

All of the staff have been trained in basic first aid and there are three first aid boxes in the office and staff all carry one in their cars. The accident book was made available and was up to date.

3.2 Fire Alarm System

There is an evacuation system in place. The fire alarms are tested weekly and a 3 monthly evacuation is conducted. The alarms and fire extinguishers are tested by Wight Fire annually, as are those situated at the Stonham properties.

3.3 PAT Testing

There is an inspection programme in respect of Portable Appliance Testing. The last tests were conducted in February 2007 and this was carried out by a contractor from Basingstoke.

To be Contract Compliant

3.4 Identity Cards

Stonham are in the process of developing a system where all staff members are to use identity cards.

3.4.1 Urgent Action:

This is to be enforced immediately and evidence of this will be required.

3.4.1. Action completed 16/10/07

3.5 Lone Working Policy and Procedures

Stonham have comprehensive Lone Working policy that sets out the procedures that staff must follow to minimise their risks when working alone. There is a check in/check out system and all staff carry mobile phones and report back to the office when running late. When staff work alone the risk assessments address the risk faced by lone workers and is cross referenced to the property defect sheets where appropriate.

3.6 Health and Safety Inspections

Stonham ensures that all properties are subject to a defect Action/Health and Safety check on a monthly basis. Property risk assessments and fire risk assessments were provided which clearly identifies who conducted the assessment, the key findings and the actions taken.

When a service user's risks identify the need for more regular checks these are carried out accordingly and are also covered by the Management quarterly audits that take place.

In response to individual Health and Safety concerns raised by staff or service users, this information is recorded, actioned and the outcome is then fed back to the person concerned. A questionnaire seeking the person's opinion of the issue is also distributed after issues have been resolved.

3.7 Risk Assessment of Premises

Records demonstrated that risk assessments are made of all Stonham premises to identify health and safety and security risks to staff and service users. These assessments clearly identify who conducted the assessment, the key findings and the outcomes of all issues raised are recorded on the monthly record sheets.

It states in guidance that risk assessment of service user's properties are conducted at least annually which ensure staff are aware of the risks in the service user's homes. These assessments identify who took part in the assessment, what the key finding were and what actions are taken.

Recommendation;

Please see 1.3.2

3.8 Emergency Call-Out Procedures

Stonham operate a 24 hour emergency on call service and the number for this service is available to all service users and is documented on an Emergency On-Call poster.

3.9 Service User Awareness

The service users are provided with a Health and Safety handbook, poster and an evacuation procedure. There is also a section in the About You booklet (Independent Living Skills) that the support worker will go through with a new service user to determine any health and safety issues.

Areas of risk relating to health, safety and security are assessed through the “About You” risk assessment and action plans recorded where both service users and staff sign to state they understand what has been discussed and records are kept documenting how these issues have been acted.

3.10 Methodology for Conducting Risk Assessments

There is a documented methodology for conducting risk assessments which covers all potential risks and this allows for the involvement of service users.

3.10.1 Recommendation:

The methodology for scoring risk could be attached to the “About You” booklet.

3.10.1 Recommended by review officers for future thought

C1.4 Adult Abuse

4 Adult Abuse

Stonham has an up to date policy and procedure for the protection from abuse of vulnerable adults this sets out procedures for avoiding and responding to actual or suspected abuse or neglect. This policy was last reviewed and updated in December 2005.

The procedure addresses all types of abuse and is in accordance with the Public Interest Disclosure Act 1998 and with No Secrets. The potential for abuse is included in the risk assessment.

To attain a Level B

4.0.1 Action:

That the Policy is to be reviewed annually and a file note made of any changes that occurred.

4.0.1 Action completed 16/10/07

4.1 Whistle blowing

There is a whistle blowing policy called the Confidential Reporting Policy, this was reviewed in August 2004. This provides details about where staff can report concerns about abuse, including information of an appropriate independent agency.

4.2 Recruitment and Selection

A very comprehensive and structured approach to the issue of staff recruitment is described in the policy document. Stonham make reasonable checks which would uncover any know tendency to abusive behaviour on the part of prospective employees.

4.3 Recording Information.

All cases of suspected abuse are logged onto an electronic central database which tracks activities, specifies and monitors compliance with target dates, provides a record of all actions and provides local and organisational monitoring of cases, actions and outcomes. These are reviewed at senior level within Stonham.

The Adult Protection incident report form details that prompt action has been taken to investigate the complaints or concerns on the electronic database. The report details the outcomes of the investigation and states what action has been taken in response to the findings made.

A report is devised and sent to the manager from head office outlining outstanding actions. The database sets timescales and then sends reminders to the appropriate persons.

Cases are also followed up a National Review Panel to ensure that policies and procedures are followed and that they are up to date/appropriate, to inform the training delivery and to ensure they are able to improve their practise and service delivery.

4.4 Service User Awareness

The Service User's handbook gives full details of how to report incidents of abuse or neglect. This includes advice and guidance on what constitutes abuse. Stonham distribute a questionnaire periodically which is based on seeking service user's understanding of abuse issues.

After speaking to the service users, it was apparent that they felt confident in reporting something they were not happy with to either their support worker or to the Manager.

4.4.1 Recommendation:

Due to 22% of service users who responded to the questionnaire, not replying to this question on the postal questionnaires, it was felt that abuse policy and procedures could be further re-enforced with service users.

4.5 Boundaries

Stonham provide a comprehensive and extensive set of guidance for professional boundaries.

All staff receive training in Professional Boundaries and are required to sign up to Stonham's Code of Conduct which clearly outlines and prohibits the receipt of any additional monetary or benefits related to their work. There is a separate policy for handling service user's money.

4.6 Staff Awareness.

All staff are aware of the principle elements of abuse, including reporting mechanisms. This is checked on a regular basis in team meetings and staff supervision.

Protection from abuse is a core element of the Staff Induction Programme as well as attending external training.

After speaking to staff, it was apparent that they were all aware of the signs and symptoms of abuse, and knew how to deal with aggression from Clients.

C1.5 Diversity

5 Diversity

Stonham are familiar in the latest legislation and best practise relating to DDA, however the office building is listed so it is not possible to carry out work in relation to disabled access and facilities. If disabled facilities are required, Stonham use the Housing Services office, next door.

5.1 Eligibility Criteria and Application Policy

Stonham has a documented procedure which specifies how enquiries and applications are processed and assessed. However, it does not include any guidance on the issue of prioritisation. This document was created in 2004.

The literature describing the eligibility criteria and process for entry in to the service is written in plain English and copies are provided to all enquirers in the form of leaflets. The eligibility criteria links directly into the assessment process (About You).

To attain a level C

5.1.1 Urgent Action:

A prioritisation process needs to be formally documented explaining that Stonham prioritise based on need. Written evidence will be required.

5.1.1 Action completed 16/10/07

5.2 Equal Opportunities, Anti-Discriminatory and Harassment Policies

Stonham has a national policy framework that covers all these areas and all services have copies of these policies in manuals that are kept in the service offices.

There are national Equal Opportunities and Diversity policies that are comprehensive and cover all relevant legislation. These have been reviewed within the last five years. These policies apply to both staff and service users.

Stonham have a diversity toolkit and there is a diversity ambassador for the East Region so that all staff are regularly trained and updated with ongoing information relating to diversity.

5.3 Recruitment and Selection Policy

Stonham works to a national recruitment policy which contains a number of standards that are used, to ensure that they eliminate discrimination within their recruitment process.

5.4 Induction and Training Programmes

All staff are briefed on policies during their induction process and are required to evidence their understanding before that standard in their induction pack is signed off as having being met.

5.5 Cultural and Religious Resources

Stonham provide their service users with a comprehensive “Religious and Cultural Groups on the Isle of Wight” leaflet.

5.6 Diversity Plan

There is a national diversity strategy that has been produced and is monitored by a steering group. A Diversity Action Plan for each service has also been produced for 2007/08 which is reviewed annually. Stonham also have Service Diversity targets they have to meet on an annual basis. They also produce Diversity statistics for the Isle of Wight.

The workforce reflects the diversity and cultural profile of the service users and this has been demonstrated in the Diversity Plan Statistical Review.

5.7 Interagency Working

Information about Stonham is distributed to hard to reach groups, examples were given. Staff attend forums and meetings where links are made with minority groups and discriminated groups. The Service Definition and Eligibility Criteria are distributed to the relevant referral agencies.

5.8 Staff Awareness

Staff were able to describe the key features within the Diversity Policy. This was evidenced by speaking to the staff and looking through personnel files with their Induction checklist signed off.

5.9 Communication

The service users are provided with information on organisations for discriminated-against groups.

A Language Line service is available to support service users whose first language is not English.

A database is available to Stonham staff who speak other languages and who are available to provide translation services. Information is also available in the Service User's handbook; this can be produced in 21 different languages.

5.10 Service User Awareness

The Service Users handbook (Involving You) includes the Diversity Policy, Harassment and Anti-Social Behaviour.

C1.6 Complaints

6 Complaints

The National Complaints Procedure was both comprehensive and structured in its content and provided a good depth of guidance for the individual to follow. Stonham have a database called S.W.I.M, which records the detail for each complaint and the outcomes that are given, this includes response time.

A Complaints form has also been produced which has to be manually filled in. A separate document was also exhibited that demonstrates the appeals process which is available to clients when required. The Policy was reviewed in 2005.

6.1 Service User Awareness

The complaints procedure is provided to the service users in the form of a booklet called "Tell Us". This enables service users to make comments and complaints to Stonham. Guidance is also included in the "Involving You" booklet.

Posters are published on notice boards and leaflets are available at the main office. The procedures are written in language appropriate to the user group and can be easily understood. Stonham have been awarded the 'Crystal Mark' by the Plain English Campaign for their service user handbooks, posters and leaflets.

Records contained evidence demonstrating that outcomes of complaints are fed back to complainants. Individual meetings are held with complainants to give feedback and records of these meetings and copies of correspondence are kept on file. The majority of the service users that were contacted felt confident in complaining while using the procedure in place.

6.1.1 Recommendation

To ensure that all service users receive guidance on the Complaints Procedure.

Please see Appendix 1 for service user feedback

6.1.1 Recommendation completed 16/10/07

6.2 Staff Awareness

As part of the Induction Process, staff have to evidence that they understand the process in order to have the complaints module signed off, as having met the standard.

Please see Appendix 2 for staff feedback.

6.3 Review of complaints

Focus groups and survey's are carried out each year by Stonham asking service users what they think of the service that they receive. A report is produced and is made available to all who would like one, this details what.

Quality Assessment Framework	Self Assessment	Site visit grading	Current Grading With completed Action points March 08
C 1.1 Needs & Risk Assessment	B	D*	B
C 1.2 Support Planning	B	C*	B
C 1.3 Health & Safety	B	C*	B
C 1.4 Adult Abuse	B	C*	B
C 1.5 Diversity	B	D*	B
C 1.6 Complaints	B	B	B

* Will require a follow up six month visit to ensure that the new proposals have been utilised

To be submitted to Commissioning Body: 17th December 2007

6 Month Action Plan Review: 18th March 2008 at 10.30am at Stonham

Review Officer

Alison Flood

Review Officer

Keily Proctor

Date.....

Authorised by

Manager.....

Paul Bakewell

Date.....