



Contract and Service Review Report: West Wight Abbeyfield.

Review Date: 20th November 2008

Review Officers: Alison Flood and Keily Proctor

This report was presented to West Wight Abbeyfield: Friday 9th January 2009 – 10am

4 Week Action Plan Review: Tuesday 10th February 2009 – 10am

6 Month Action Plan Review: Tuesday 11th August 2009 – 10am

Providers are reminded that under the terms of the interim 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.

1. Introduction

1.1 Provider Name

Abbeyfield is a charity providing housing, support and care for older people. There are around 750 houses across the UK. West Wight Abbeyfield, which is located in Totland, is a detached house accommodating 10 residents in their own bed sitting rooms, all of which have an en-suite. Residents can also enjoy the use of the communal lounge and attractive gardens.

1.2 The Residents

The Review Officers spoke to 5 residents at West Wight Abbeyfield. The responses that we received were very positive. We also gave residents the opportunity to complete questionnaires. The team received 5 questionnaires from residents, which were all positive.

Please see Appendix 1 & 2 for the feedback received.

1.2.1 Comments made by the residents included:

- I couldn't wait to move in
- Good place to live, feels like your own home.
- I couldn't ask for anyone better.

1.3 The Staff

The house is run by a committee who oversee policies, procedures and financial matters. The House Manager deals with the day to day running of the service. There is also domestic staff that ensures all communal areas are clean.

1.4 Business Plan & Recovery Plan

A Business Plan and Business Recovery Plan has been produced by the Westwight Abbeyfield.

1.5 Confidentiality

The Confidentiality policy states that residents, applicants, staff and committee members have a right to privacy and can expect that all personal information about them will be handled sensitively and confidentially. The policy contains the necessary guidance. There is a section that clearly outlines The Data Protection Principles and

the policy states that all sensitive information will be kept and handled confidentially, which includes anything of a personal nature that is not a matter of public record about a resident. The policy also states that adequate security measures must be taken against unauthorised access and that all sensitive information will be kept and handled confidentially, which includes anything of a personal nature, which is not a matter of public record about a resident.

The Access to Sensitive Information Section states how information should be recorded. There is a section that describes when information can be disclosed without consent for legal purposes.

Confidentiality and privacy form part of the induction programme. The policy states that all staff and committee members will be informed of their duties and provided with practical procedural guidelines, all are under duty to respect the confidentiality of all personal information held by the Society. Training is available to staff and committee members who handle personal information.

C1.1 Needs & Risk Assessment & C.1.2 Support Planning.

2.0 Needs & Risk Assessments.

A written document exists and can be evidenced that incorporates both a needs and risk assessment.

The assessment procedure ensures that the resident's needs are compared objectively with the eligibility criteria of the service and appropriate decisions are made and describes how the resident's views are to be recorded as part of the process. The procedure also includes guidance regarding what should be done where a prospective resident disagrees with any outcomes of an assessment or review.

2.1 Risk Assessment

The Risk Assessment is linked to the Needs Assessment and into the Support Plan.

2.2 Support Planning.

West Wight Abbeyfield is using the template supplied by Supporting People for support planning.

2.3 Training Programmes

The procedures for Assessment and Review are included in the staff induction; however there is nothing on the induction which explains what Supporting People is about.

2.3.1 Urgent Action:

To include what is Supporting People onto the Induction checklist,

2.3.1 Action now completed on 10/02/09

2.4 Assessment Outcomes

The procedures give clear guidance that the outcomes of assessments and reviews are explained to all residents and both successful and unsuccessful applicants.

2.5 Right of Appeal

The procedures include reference to the residents' right to appeal against decisions arising from assessment and review with which they disagree. Protocols provide clear guidance that appeals should be attended by staff additional to those who carried out the assessment/review.

2.6 Interagency Liaison

West Wight Abbeyfield currently works with other agencies, but could not evidence this to the officers.

2.6.1 Recommendation for Level B:

- West Wight Abbeyfield need to demonstrate interagency liaison/networking by correspondence, minutes of meetings etc.
- Feedback should be sought periodically from key agencies as a part of service planning and review, via copies of minutes, reports or questionnaires etc.
- It can be demonstrated how this feedback is incorporated in to service planning and review.
- West Wight Abbeyfield needs to have named contacts in the key agencies.

2.7 Residents Awareness

The residents are made fully aware of service provision as there are numerous documents relating to service provision for residents. Evidence was also shown that West Wight Abbeyfield actively involves the resident in the support planning process.

2.8 Initiating Reviews

Consideration is given to the residents' right to request and initiate a review at any time of their choosing, during the support process

C1.3 Health & Safety

3 Health & Safety

The Health and Safety policy states who are responsible for Health & Safety. The document contains all sections required and a Health & Safety poster was on display, although this was not completed. Guidance is in place regarding support worker/volunteer illness.

3.0.1 Urgent Action:

The Health & Safety Poster needs to be completed.

3.0.1 Action now completed on 10/02/09

3.1 First Aid

There is a First Aid box which is maintained and there are four members of staff who are trained first aiders, but they are due for a refresher course.

3.1.1 Urgent Action:

To arrange for staff to receive a refresher course on First Aid.

3.1.1 Action now completed on 10/02/09

3.1.2 Urgent Action:

A notice needs to be put up informing residents and visitors who the first aiders are.

3.1.2 Action now completed on 10/02/09

3.2 Fire Alarm System

A Fire Alarm system and an evacuation procedure are in place which is carried out by the House Manager. Alarms and Fire extinguishers are serviced annually by Wightfire.

3.3 Accident Book

An accident book is used, although this was not the latest version that employers should be used. The Supporting People team provided the House Manager with the latest guidance.

3.3.1 Urgent Action:

To ensure that West Wight Abbeyfield are using the correct accident book.

3.3.1 Action now completed on 10/02/09

3.4 PAT Testing

PAT testing is carried out annually and evidence was provided to the team.

3.5 Identity Cards

Currently Identity cards are not issued to staff at West Wight Abbeyfield, although the House manager would like to have these in place, due to staff visiting potential residents in their own homes and visiting residents in hospital.

3.5.1 Urgent Action:

Staff and volunteers are required to have identity badges when visiting residents outside of the property.

3.5.1 Action now completed on 10/02/09

3.6 Lone Working Policy and Procedures.

A Lone Working Policy is in place that sets out procedures to minimise the risks to people working alone. There are guidelines for staff on how to remain in contact when working alone and procedures to follow. Lone working is also included in the risk assessment and in staff inductions.

3.7 Health and Safety issues.

Health & Safety issues are logged and the response times are clearly stated in Resident handbook. The House Manager notifies the committee regarding repairs required, who instruct the maintenance man, who reportedly responds promptly to any maintenance issues

3.8 Risk Assessment of Premises

Staff have carried out an Emergency and Fire Risk assessment in May 2008 which

has been verified by a fire officer. In conjunction with the Health & Safety policy, a Risk Assessment process is applied which includes a documented methodology for the completion of risk assessments.

3.9 Emergency Call-Out Procedures

Emergency procedures are in place and form part of staff training.

3.10 Resident Awareness

An explanation to the Health & Safety policy and procedures is included in the residents' handbook. Residents are aware of the out of hour's provision, which is also included in the residents' handbook.

3.11 Training:

A Training Schedule identifies health and safety and some of the sub sections of the policy have been included in the training schedule (such as Violence & Aggression).

C1.4 Safeguarding Adults.

4 Adult Abuse

An Adult Abuse Policy was provided, which is in line with the Isle of Wight Multi Agency Safeguarding Adults Policy, although the policy was not dated. West Wight Abbeyfield has now adopted the Supporting People's summary from the main Multi Agency Policy. Adult Abuse is included as part of the induction and is on the resident's risk assessment.

4.1 Whistle blowing

A "whistle-blowing" policy is in place that provides protocols for use by staff to report concerns about abuse and whistle blowing and it forms part of the induction process. This is due to be reviewed in 2009.

4.1.1 Recommendation:

[To review the Whistleblowing Policy in 2009.](#)

4.2 Recruitment and Selection

A Recruitment and Selection Policy has been developed which included a prescribed process for the recruitment of new staff stating that two references are required to be

on file for staff. When checking this, the House Manager only had one reference. CRB checks have been sent off for staff and they are waiting for them to be returned.

4.2.1 Urgent Action:

The House Manager needs to obtain a character reference to be kept on file.

4.2.1 Action now completed on 10/02/09

4.2.2 Urgent Action:

The CRB number and the date the check came back, needs to be sent in to the Supporting People team.

4.2.2 Action now completed on 10/02/09

4.3 Service User Awareness

Residents were aware on what to do if they felt abused in anyway however there was no documentation given to the residents on what abuse is and how to report any concerns. The review officers discussed this with West Wight Abbeyfield and it was agreed that this information will be given to the residents.

4.3.1 Urgent Action:

To include guidance about what is abuse and how any concerns can be reported, in the residents' handbook or as an alternative information booklet/poster.

4.3.1 Action now completed on 10/02/09

4.4 Boundaries.

There are procedures to prevent staff and volunteers from personal benefit when working with the residents. This is included in staff induction and the policy is dated.

C1.5 Diversity

5 Diversity

West Wight Abbeyfield are familiar with the latest legislation and best practice. Reasonable steps have been taken to adapt the property for those with a physical or sensory disability and all residents are offered adaptations as part of their support plan.

The ground floor is suitable for wheelchair users with a level entrance. There are an assortment of showers and bathrooms; some are designed for people with certain disabilities.

5.1 Eligibility Criteria and Application Policy

West Wight Abbeyfield has a documented Eligibility Criteria and Application Process and these are written in easy to understand language. There is also a document that describes the process used for all enquiries and applications, explaining how these are processed and how residents are assessed and prioritised.

5.2 Equal Opportunities, Anti-Discriminatory and Harassment Policies.

There is an Equal Opportunities Policy which applies to both staff and residents, which complies with all relevant legislation. There is an Anti-Discriminatory and a Harassment Policy included in the Equal Opportunities. However, service users rights are not included in the induction.

5.2.1 Urgent Action:

Service user rights needs to be added onto the induction checklist

5.2.1 Action now completed on 10/02/09

5.3 Induction and Training Programmes.

The Equal Opportunities, Anti-Discriminatory and Harassment Policies are included as part of staff training.

5.4 Cultural and Religious Resources

There is a notice board which displays any cultural & religious resources in the West Wight area. Any cultural & religious needs are recorded on the residents support plan.

5.5 Disciplinary & Grievance Policy.

There is a Disciplinary and Grievance Procedure in place which was last reviewed in October 2008.

C1.6 Complaints

6 Complaints

There is a written Complaints Policy and Procedure in place which was last reviewed in April 2007. The policy and procedure describe the process to be followed, who to complain to, what West Wight Abbeyfield will do and how to escalate the complaint and appeal against an outcome that there is a decision. There is no reference in the policy that residents can complain to Supporting People regarding support issues, if residents feel unhappy with the outcome West Wight Abbeyfield has given. The Complaints and Appeals policy & procedure is not included in the employee handbook.

6.0.1 Urgent Action:

Reference needs to be made in the policy that residents can complain to Supporting People regarding support issues.

6.0.1 Action now completed on 10/02/09

6.0.2 Urgent Action

To include the complaints and appeal policy and procedure into the employee handbook

6.0.2 Action now completed on 10/02/09

6.1 Resident Awareness

After receiving feedback from the residents they all felt happy to complain if they needed to.

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

* Will attain a level B once the actions have been satisfactory completed.

** Will attain a level C once the actions have been satisfactory completed.

Completed by:

Contract & Review Officer.....
Alison Flood

Contract & Review Officer.....
Keily Proctor

Date.....

Authorised by

Manager.....
Paul Bakewell

Date.....