

ACCREDITING AGENT

Scottish National Standards for Information and Advice Providers -Audit Report

April 2010

Frontline Fife Housing Advice

Stephen Rhind

1 INTRODUCTION AND AUDIT OUTCOME

Frontline Fife Housing Advice provides an independent housing advice service to members of the public in Fife. The service is provided from four locations in the Fife geographical area; Cupar, Dunfermline, Kirkcaldy and Leven. There is a team of eight advisors who are overseen by an Operations Manager. The agency offers comprehensive housing advice to customers, assisting them to remain their home and to prevent homelessness. Advice and assistance is delivered by an office based appointments system, a home visiting service for vulnerable customers and outreach clinics in Kirkcaldy, Glenrothes, Inverkeithing and the Levenmouth area.

The remit of the service is:

To provide quality housing advice, information, representation and practical assistance to the general public in Fife.

1.1 AUDIT OUTCOME

The on-site audit visit took place during 22 & 23 March 2010. The audit was undertaken by Quality of Advice Auditors Alex Kirkwood and Mhairi Craig. Lorraine McLaren was present on 23 March as a Trainee Process Auditor. Alex Kirkwood was Lead Auditor.

Following the audit visit, it was concluded that the advice service provided by Frontline Fife Housing Advice meets the requirements of the Scottish National Standards for Information and Advice Providers (the Standards).

Frontline Fife Housing Advice is accredited to the Scottish National Standards for Information and Advice Providers in the topics and for the types of service shown below until April 2014.

Housing topics accredited

Торіс		Type Applied for	Type Accredited to
2.1	Rent Arrears	II	=
2.2	Mortgages/Secured Loans	II	II
2.3	Housing Benefit/Council Tax Benefit	II	II
2.4	Disrepair in Rented Housing	II	II
2.5	Housing Options	II	II
2.6	Discrimination in Housing	II	II

2.7	Eviction	II	II
2.8	Anti Social Behaviour	II	II
2.9	Harassment and Illegal Eviction (includes race discrimination)	II	II
2.10	Homelessness	II	II
2.11	Relationship Breakdown	II	II
2.12	Rent: Private Sector	II	II
2.13	Security of Tenure	II	II
2.14	Statutory Tenancy rights	II	II
2.15	Repair and Improvement Grants	II	II

2 AUDIT OUTLINE

2.1 AUDITING QUALITY OF ADVICE

The quality of advice auditors seek to assess the quality of advice given by the agency. The key mechanism for this is case file review. Auditing of quality of advice primarily looks at Standards 2.1, 4.1, 4.3, 4.4, 4.5, 4.6, 5.4, and 5.5 with the remaining Standards covered by the process auditor. The audit may touch on other Standards, where appropriate.

The quality of advice audit comprises:

- a review of case files
- interviews with staff members
- inspection of key documents

This enables quality of advice auditors to identify whether the organisation is complying with the Standards.

2.2 AUDITING PROCESSES

The purpose of the process audit is to review evidence of documented processes and procedures which underpin the delivery of a good quality advice service. The process audit is split into two parts:

- a 'desk-top audit' which is carried out when the initial audit application form is submitted and
- the audit visit

2.3 PERSONNEL INTERVIEWED

During the visit the auditors interviewed:

Carole Simpson, Operations Manager

Elizabeth Gibson, Advisor

Fiona Dunwoody, Advisor

Gillian Walker, Advisor

Natasha Johnston, Finance Officer

Ruth Young, Administrator

2.4 PRINCIPAL DOCUMENTS INSPECTED

The auditors examined the following documents:

Annual Report

Case Management Procedure

Confidentiality Policy

Conflict of interest statement

Equal Opportunities policy

Financial Regulations Policy

Information Manual - Net Certificates

Information systems and usage of same

Job Descriptions

Minutes of staff meetings

Organisational chart

Policy & Procedure Manual

Recruitment Policy

Referral procedure and documentation

Service level agreements

Service statement/remit

Service user feedback

Staff Training & Development Records

Strategy Document

The complaints procedure

Working Procedures Document

2.5 CASE FILE REVIEW

The Quality of Advice auditors reviewed a total of 20 cases covering 14 advice topics. Although there were no cases provided in Area of Law 2.6, Discrimination in Housing, the auditors were satisfied that the agency could provide this service if so requested.

Prior to the audit the Lead Auditor requested the agency to provide approximately 5 cases from each Area of Law from which auditors randomly selected. Further cases were randomly selected by the auditors on-site.

3 AUDIT FINDINGS

3.1 STRENGTHS

The Auditors found a number of strengths:-

There is a good internal communications culture within the Agency and staff are well motivated, committed and have an excellent working knowledge of housing law.

The manager is very positive and meets with the staff team individually to review and offer constructive advice on the ongoing caseloads.

Complicated and unusual housing advice cases are discussed at team meetings with positive actions being agreed. This ensures that the client gets the best advice available and the staff team continue to develop their knowledge base.

The agency works in partnership with the local authority and other housing advice agencies and operates within the Fife On-Line Referral Tracking system (FORT). This is an excellent monitoring tool with one joint referral information form used by all agencies participating in the system. The form is tracked from source with regular updates being fed back to the referring agency electronic communication between the agency and other advice providers are pasted into the case notes. This is a good practice and provides an accurate overview of the case progression.

The policies and procedures for the organisation are, in the main, very clear and up to date. The statistical recording is very good and easy to understand. It should be noted that the agency are unable to use a specially purchased Access based case recording system due to the fact that they are on the Fife Council network and are not permitted to put the system on this network. The agency however maintains a comprehensive case recording and data collection system using Windows, Excel and Word packages.

Staff interviews identified that all staff showed a similar level of commitment to their work and the same breadth of knowledge on all internal procedures. Staff appear to work very well together as a team with strong management support.

The auditors recommended that the agency consider applying for Type III accreditation in Areas of Law, 2.1: Rent Arrears and 2.3: Housing Benefit & Council Tax Benefit at future audit.

3.2 AREAS FOR DEVELOPMENT AND RECOMMENDATIONS - Quality of Advice

a) Case Recording

It is clear from case reviews that there is extensive use of the Shelter legal online advice service and the Scottish Housing Advisory Service and there was evidence of reference sources in the majority of case files, however reference sources should be clearly identified in all cases.

Recommendation: All future sourced advice information including the various housing advice library books in use by advisors should be referenced in the case notes. **(Generic Competence 1.4)**

b) File Review and Supervision

It is recognised that there is an effective procedure in place for file reviews to be regularly undertaken by the Operations Manager, however case review dates were not being electronically recorded on completion.

Recommendation: Case review dates should be electronically logged on completion by the Operations Manager. (Standard: 4.6)

c) Case File Management

There were, as with many agencies, a lot of acronyms/abbreviations used in the case notes and it is suggested that this requires to be reviewed.

Recommendation: A list of acronyms and abbreviations used should be available to staff and auditors. This would be also be useful if a service user requested sight of their case notes. (Standard: 4.4)

3.3 AREAS FOR DEVELOPMENT AND RECOMMENDATIONS - Processes

a) User Feedback

User feedback is carried out regularly by the agency, however there are no clear procedures for how this is used to influence the agency's service plan. There is evidence that service user feedback is addressed in team meeting minutes, but there are no documented procedures for progressing this.

Recommendation: That a documented procedure is developed for this purpose. (Standard: 3.12)

b) Conflict of Interest

The agency's conflict of interest procedure allows both parties in a case, for example a mother and a daughter, to be represented by the agency, along as each party is allocated to a separate

caseworker. If a conflict of interest becomes apparent, the procedure specifies that the matter should be discussed with both parties.

Recommendation: The auditors recommend that the agency reconsiders this procedure as in its current form it does not prevent a conflict of interest from arising and may lead to confusion - ultimately both parties are being represented by the same organisation. In addition, discussing the issue with both parties represents a potential breach of confidentiality. (Standard 4.1)

4 GOOD PRACTICE

4.1 Online Referral Tracking - The online referral tracking system (FORT) is an excellent monitoring tool with one joint referral information form used by all agencies participating in the system. This is tracked from source with regular updates being fed back to the referring agency. Actions taken by agencies involved in the case are electronically uploaded to the casenotes thus contributing to a clear narrative of case progression and development.

The auditors consider this to be a particularly effective method of monitoring case development and efficacy of onward referrals.