**Quality Survey Report**

**for**

**Family Addiction Support Service**

**CONTEXT**

The Family Addiction Support Service (FASS) evolved in 2008 from the former Glasgow Association of Family Support Groups, originally established in 1986. FASS provides a variety of family support-related services in Glasgow, including support to family support, kinship and bereavement groups (currently 21 in total).

FASS receives funding mainly through Glasgow City Council, although there are additional funders and sponsors, and currently has 6 paid staff and 15 volunteers. The service is governed by a Board which has a breadth of experience. Scottish Families Affected by Drugs (SFAD) is the national organisation, of which FASS is a member.

Currently, 2 Bereavement groups, 1 Health group (HIV), 7 Kinship groups and 10 family support groups (plus a new one in development in Possil) are supported. Most of the groups are constituted. Some are self-sufficient while others are not. The groups vary in size from 3 to 40 attendees. The service is particularly experiencing rising numbers of kinship carers.

A Link Worker provides advice, support and access to respite to sole carers of children due to parental addiction, as well as supporting people to access FASS services. This post is a partnership between FASS and Geeza Break.

Services provided at FASS premises include counselling, hypnotherapy, a clothing project, Help Me Grow (an 11-week child growth and development groupwork programme, run annually at present), weekly holistic therapies and alternative therapies (available periodically, depending on funding available). An annual Remembrance service takes place. There is also a caravan in Berwick for respite breaks. FASS has recently commenced a 6-month pilot for a mediation service. FASS can also provide supports to local groups, including training, development of governance skills and funding workshops, amongst others.

Staff have recently undergone training in development of outcomes systems. FASS has now developed and implemented a set of tools for the provision of management information on outcomes for the range of services it provides.

**RATIONALE FOR SURVEY**

FASS has been in existence in its current form for 6 years and has requested an external evaluation of its current range of services and support role. It is hoped that this will provide information on what is working well and areas for development and/or change to help inform future planning. Scottish Drugs Forum’s National Quality Development (NQD) team agreed to lead and co-ordinate this activity. A set of bespoke questionnaire tools was developed, in association with FASS, for this purpose.

**SURVEY PROCESS**

Three separate questionnaire types were developed: one for support groups; one for individual clients using therapies and other FASS services; and one for staff, volunteers and board members. A proportion of individuals and groups using FASS services were approached to complete a survey questionnaire.

The survey took place between January and March 2014 and aimed to include 3 Family Support groups, 6 Kinship groups, 1 Bereavement group, 12 counselling clients and 6 Link worker clients.

Returns received constituted about 10% of current FASS clients, 45% of groups supported and virtually all staff, volunteers and Board members at the time of the survey. NQD staff carried out a focus groups with clients, to explore their experiences and perceptions of receiving services. Vouchers to the value of £10 were offered to participants in recognition of their contributions. A consultation meeting with staff, volunteers and Board members was also facilitated by NQD staff.

**SURVEY RESPONDENTS**

**Clients - 17 questionnaires returned**

Included 11 using counselling service, 7 hypnotherapy, 3 link worker, 5 Family Support group, 5 Kinship group, 2 Bereavement group.

Focus group (30/05/2014): \*8 attending.

Proportion of female respondents was about 90% of total. All were in 21-60 age group. All described themselves as White Scottish. The length of time coming to FASS ranged from a few months to more than 5 years.

**Groups - 9 questionnaires returned**

Included 6 kinship groups, 2 family support groups, 1 bereavement group.

Focus group (30/05/2014): \*8 attending.

\*Same individuals took part in one focus group covering individual services and support groups

**Staff, volunteers and board members - 12 questionnaires returned**

Included 6 staff, 4 board members, 4 volunteers.

Consultation meeting (13/05/2014): 21 attending.

The section below sets out themes relating to the current set of National Quality Standards for Substance Misuse Services in Scotland. These standards were originally written specifically with reference to service users as people experiencing problems with their own use of drugs. A looser interpretation is required for the FASS client groups.

As this is a qualitative survey, the author of this report has had to make an assessment by weighing up the number, type and range of responses received. While the report can give a narrative of what most people involved with the service agree with, it is also useful to include views which are different from the majority ones. Readers should therefore take this into account when looking at the survey responses presented in this way.

The report does not claim to be a definitive appraisal of service performance. However, it is hoped that the layered approach to survey methods used (questionnaires, client focus group and discussion with staff, volunteers and board members), yields something more than a mere snapshot of FASS and will provide an account which can assist the service in its future planning in the areas of quality development and improvement. It is also hoped that Scottish Drugs Forum’s involvement in the process has brought a degree of independence to help facilitate the contribution of honest and frank responses; and a balanced representation of these within the report.

The accompanying materials (aggregated questionnaires and focus group reports) provide additional insights into perceptions of current service performance.

**RESPONSES**

**(related to National Quality Standards for Substance Misuse Services)**

**1. Service Environment** (quality of premises, atmosphere, attitude of staff & volunteers, feeling safe)

Without exception, respondents expressed positive views about the ambience of the service offices and, in particular, the welcome given to visitors. The reception area was redecorated during the period of survey activity and this has been commented on positively by visitors.

There was a strong sense expressed of the uniqueness of FASS, in that it feels much more welcoming and friendly than clients’ experiences of other services. It was suggested that the personal experience that many of the staff, volunteers and board members bring to the service has a positive influence on how the service engages with visitors/clients and helps them feel relaxed.

It was suggested that more space would be an advantage but it was acknowledged that this is unlikely to be possible in the foreseeable future.

**2. Access** (making an informed decision about using service; getting the service when needed)

Clients reported that they are able to start accessing FASS services without delay. Written information is available via service leaflets and new clients are given a clear explanation of the services available.

There were a few suggestions that more support groups should be available in the evenings, to allow people with daytime responsibilities to attend. FASS has previously attempted to respond to such requests but uptake had been poor. Any future developments in this area would require evidence of sufficient need.

As highlighted earlier, females make up more than 90% of FASS’s client group. Clients were invited to comment on this and it was suggested that it may be harder for men to express their feelings about their situation; also, that it might be harder for men to participate in groups because group members are already mostly women. There have been a few men coming to groups but they did not take an active part. Clients would like to see more males using FASS services.

Black and minority ethnic groups have also been identified by staff as hard to reach and were not represented in survey responses.

During the survey activity, there was considerable discussion about the promotion of FASS to potential clients and other parties. This is covered separately later in the report.

**3. Identifying Support Needs** (assessment of needs, choosing appropriate service)

FASS staff and volunteers are sensitive to the immediate concerns of people coming to the service for the first time and focus their assistance on these in the first instance. As contact continues, clients are provided with information on what FASS can offer. A range of services to meet a wide variety of needs is provided by FASS and these are not limited to the psycho-social variety. As a grass roots organisation, this provision has evolved in response to client need, examples of which include the respite caravan, clothing project and excursions.

**4. Receiving Support** (getting support needed)

Clients rated all FASS services highly, with no negative comments received about any of them. Particularly appreciated is the open-ended nature of service provision which allows clients to use services for as long as they feel they need to.

**5. Benefits of Support** (making progress, feeling improvements)

The vast majority of clients reported experiencing improvements in their lives as a result of using FASS services. Examples given included: understanding their particular situation and feelings better; coping better; increased confidence; reducing sense of isolation; and getting support to access external services. The self-help ethos within FASS means many people using the services, while receiving support themselves, also gain from being able to assist each other. This clearly helps promote their sense of self worth and confidence.

**6. Accessing Other Services** (looking at wider needs, referring on and helping engage with services; communications with other services)

The experience of many FASS clients has been of previous difficulties in accessing or engaging with external services. Kinship carers described particular difficulty in being recognised by services as having a significant role with children affected by parental substance use. Clients described receiving assistance from FASS in linking into other services, which can include setting up appointments for clients. Examples include housing, respite, legal advice, welfare/financial advice, citizens advice, parenting and child care, addictions services and support groups.

**7. Retention** (continuing to use the service / moving on as needed)

The types of supports offered through FASS are valued by clients to the extent that there is clearly a strong sense of loyalty felt to the organisation. There were many examples of people who have continued to use FASS services for several years and, indeed, some have gone on to become volunteers or board members with the organisation.

**8. Children and Families** (taking account of needs of family members)

FASS has developed its service around the needs, not only of individuals seeking help, but their families too. The Geezabreak link provides respite for carers, with 46 home visits in 2013. Uptake has been particularly welcome amongst kinship carers. The FASS caravan in Berwick provides welcome opportunities for holidays, with 27 out of 30 available weeks let in 2013.

The Help Me Grow programme is user-led and includes input from Health staff, the Fire Service, Police, and provides useful information on issues such as drugs and home safety. It has been very popular with members and attendance has been high due to its relevance for people in Glasgow.

FASS commenced a pilot mediation service in May 2014. This was offered initially to kinship carers but is now open to any group member. The aim is to bring family members together with a view to improving communications and resolving issues where possible. The length of support is open-ended and varies around 3-6 appointments, or longer as needed. The mediation pilot had its genesis in the issue of breakdown in communications in families which had been highlighted across the service. FASS carried out a questionnaire survey across its membership and the feedback received confirmed the need for provision. An initial funding bid was submitted which was unsuccessful. The Lighthouse Foundation was then approached, which was able to offer the services of a staff member one day per week, paid for through an award FASS received last year. It is hoped to gather enough evidence through this 6-month pilot to evidence the need for further funding beyond that period.

It had been expected by staff that the present survey would highlight requests for provision by FASS of a crèche facility; however, this was not raised by anyone. A crèche was previously provided within FASS but, due mainly to space limitations at that time, was unable to continue.

**9. Giving Feedback** (opportunities to comment on service and influence development)

Self help and user involvement are fundamental features of FASS. Support groups are led by users of these services. Monthly members’ meetings provide opportunities for users of FASS services to give their opinions and to contribute to development of the service. There is also a suggestions box and clients are advised of the complaints process early on in their contact.

FASS has been sensitive to the needs of its clients and has developed services in response to identified need. A good example of this is the pilot mediation service, funded initially for 6 months, which recently commenced. This developed as a result of wishes expressed by FASS clients for assistance in addressing communication issues within families. It is hoped that further funding can be secured beyond this period.

The outcomes measurement system introduced in 2013 encourages clients to provide feedback on FASS services they have used and to comment on the benefits of these.

**SERVICES TO FAMILY SUPPORT GROUPS**

The support groups have been in operation for lengths of time varying from less than 12 months through to, in some cases, more than 10 years.

The atmosphere within groups was reported as positive and that no judgement is made of members. Benefits experienced include sharing experiences, releasing emotions, getting and giving support, getting ideas for coping better and increasing self-confidence. Some had had less positive experiences in past group situations. It was suggested that, without FASS groups, members would be seriously deprived of support.

Group representatives felt that the range and standard of support to groups was uniformly felt to be strong and is highly valued by members. FASS staff regularly visit groups to provide updates and help identify additional support where required. Examples of assistance received included help with forming a group constitution; accessing funding; dealing with problems occurring in groups; finding out about other FASS services available. Members reported a high degree of awareness of the full range of services available from FASS, both for individuals using FASS services as well as for groups.

Group members have also made use of the counselling service, hypnotherapy, Help Me Grow programme, training, link worker service, caravan, days out and remembrance service.

Welfare rights was felt to be a major issue for many members. It can be a particular difficulty for kinship carers as they can feel reluctant to approach social work due to fears of children potentially being removed if carers are felt not to be coping. Citizens Advice can come and talk to groups during the day, although group members were unsure whether this would be available in the evenings. It was felt there should be more of this type of advice and support.

Groups have also invited recovering drug users from city-wide Recovery groups come along to give talks, although they had experienced instances where representatives had agreed to come but did not turn up, without warning.

***Kinship Groups***

*Representatives from kinship groups attending the focus group gave examples of stigma attached to being a child in kinship care and a frequent lack of sensitivity in statutory services towards the needs of children and kinship carers. It was suggested that much more needs to be done to highlight kinship care and to ensure good communications within and across statutory services.*

*The link worker service was particularly commended for the support it gives to kinship groups. After school respite, provide via Geezabreak, was very much appreciated by kinship carers.*

*Several kinship carers referred to the Scottish Kinship Care Alliance as a source for networking more widely with other kinship carers.*

The support groups facilitate networking with others, provision of support and advice, as well as providing a socialising function. The FASS monthly members' meetings offer opportunities for representatives from across the support groups to meet and share experiences. Group representatives bring back information from the monthly meetings to their own groups. There is also an informal network of contacts from within the groups that individuals can use for support as needed and which is highly valued.

**STAFF, VOLUNTEERS & BOARD MEMBERS**

There is a shared and positive consensus across FASS in terms of how clients, staff, volunteers and board members view the organisation, with several people describing feeling ‘privileged’ to be associated with it. FASS is reliant on the goodwill of volunteers, who are often the first point of contact for new clients. There is a number of skilled professionals who offer services free to the organisation.

There is also a diversity of skills and expertise across staff, volunteers and board members which is essential to deliver the range of services provided by FASS. This is valued as a resource from which people can receive advice and support from colleagues.

Support and supervision of staff takes place bi-monthly. There are weekly team meetings. It was agreed that there is a good level of support available to staff and volunteers from management. The manager operates an ‘open door’ policy whereby any matters can be brought to her as needed and not need to wait until supervision meetings. There is also an annual development day involving staff, volunteers and board members. It is felt that there is a good relationship between the board and staff. FASS is described as providing lots of opportunities for development and progression for those involved.

FASS follows the local Glasgow City Council child protection policy and staff are aware of how to use this.

**WHAT CLIENTS SAY**

*“I have been in the service for a while now and I have come a long way and it's all thanks to the services at FASS.”*

*“With the support I get from FASS I am going to make it after all.”*

*“Not only do I feel listened to but once I discussed my situation with the link worker and counsellor, other services were offered and sourced to help me.”*

*“My life has transformed since my work began and I'm grateful to have the services.”*

*“FASS offered help also to my daughter.”*

*“I am happy with all that FASS provides for my care and attention. The service is amazing!”*

*“I was confused and stressed before FASS. Now I'm more focused and calm, and able to deal with everyday problems.”*

*“I thought there was no turning point in life but going to FASS has given me that light again.”*

*“FASS has shown me how to cope as I had what I thought were big problems and how to deal with them. Also put me in contact with the proper services for my needs.”*

*“As a group, we feel that FASS has been very helpful and supportive.”*

*“FASS helped us put together our Family Support Group. This included training, regular visits to the group, assistance with paperwork and general support.”*

*“Amazing help from FASS staff and members of kinship group.”*

**Geeza Break / link worker**

*“I have accessed this service for the school holidays and this has improved my relationship with my grandchildren. It helped them grow as individuals and gave me the respite required to carry on with my life.”*

*“Audrey came to visit me. She really helped me as she understood what I was going through and helped me get support I didn't know existed.”*

*“Audrey has supported me with food hampers, counsellor access, financial/welfare support and has made sure all services I can access have been made clear to me.”*

**Counselling**

*“I have found this to be very useful as a vent for my situation without having to worry about upsetting anyone. “*

*“After meeting up with Marlene for the first time, I immediately felt a weight lifting from my shoulders. “*

**Hypnotherapy**

*“I learned a few techniques to help me in daily life, when I feel unable to cope.”*

**Alternative therapies**

*“I always go for an Indian Head Massage, and I've had my eyebrows done too.”*

**Holiday caravan**

*“I have already managed to secure a week for my grandchildren and me.”*

**Suggestions for improvements**

*“I highlighted the requirement for evening kinship meetings and this was organised.”*

*“Would like more services available in the evenings.”*

*“I'm sure if anyone came up with an idea to improve the service, FASS would take it on board.”*

*“I feel other premises would benefit family members.”*

*“Advertising their services more. I could've really benefitted from their assistance years earlier.”*

*“A social media presence would be beneficial.”*

**WHAT STAFF, VOLUNTEERS AND BOARD MEMBERS SAY**

*“FASS has good facilities for members and staff.”*

*“We work hard to ensure people feel welcomed and relaxed at FASS.”*

*“People feel safe and enjoy coming to FASS.”*

*“It is good that we are able to give people appointments for counsellors within a very short time.”*

*“FASS is a place where you can speak about anything knowing that it's confidential.”*

*“We’re always looking to improve.”*

*“FASS is like one big happy family.”*

*“People who come to FASS are often very stressed and upset. The benefits of FASS supports can be clearly seen.”*

*“We work hard to promote our services to other agencies.”*

*“We have a long tradition of monthly members' meetings where people can and do freely comment on the service.”*

 *“We always get good feedback about our service.”*

*“I feel as if I could ask any member of staff for help and I would get it.”*

*“There are lots of opportunities to progress.”*

*“I feel as though I receive a lot of support which is very beneficial.”*

*“Workload can be heavy but much of that is down to being proactive and wanting to do as much as possible with tight resources.”*

*“Staff, volunteers and board members work well together for the good of all the clients who they see.”*

*“Working with other agencies is very important.”*

*“I am aware of many services that clients can be referred to, however this changes all the time.”*

*“The whole family support concept works well.”*

*“Staff are made to feel appreciated.”*

*“FASS is a great place to work and a privilege to be a part of it.”*

 *“There is a vast amount of knowledge within the team. Most of the staff and volunteers have in one way or another been affected by addiction.”*

*“I enjoy my time at FASS meeting new people. I have met a lot of friends going to FASS. That's helped me on my journey.”*

*“I feel very privileged to be a member of staff and feel very honoured to be part of clients' life.”*

 *“As an organisation FASS do not get the recognition they deserve.”*

**Suggestions for improvements**

*“The premises are well maintained, however the floor space is not ideal. Space is limited.”*

*“New premises.”*

*“More finance for more workers to provide more services.”*

*“Having a 'hub' in each sector of Glasgow would be ideal.”*

*“We need an additional worker concentrating on developing and setting up family support.”*

**PROMOTION AND MARKETING OF FASS**

Clients and staff both identified marketing of the service as an area requiring continual focus. There is a combined approach which includes:

* leafleting
* engaging with media, e.g. radio and television
* word of mouth by FASS clients
* contact with services about FASS provision
* FASS website
* outreach volunteers

The three service leaflets were last reviewed in 2008. FASS will need to exhaust existing stock before publishing a revision. It is intended that the current leaflets will be consolidated into a single leaflet covering the whole range of FASS services. Clients have offered leaflets to GP surgeries, social services, schools and libraries. There was a suggestion that Glasgow City Council could be asked to circulate the information more widely to ensure better saturation across services. Use of local press to advertise or include leaflets was also proposed.

New clients are asked how they first heard about FASS or who referred them. Word of mouth has proved the most common route into the service, although sometimes general practitioner or workers in Community Addiction Teams will make a referral. Representatives of the family support groups are also asked to let their group members know about the wider range of FASS supports. There are information packs for groups.

Talks are offered to social services and other teams across the city. FASS staff endeavour to have a presence at as many conferences and other relevant events as possible. The service has a set of pop-up stands. FASS is also involved in addiction forums across city.

FASS’s website has had around 1,900 individual ‘hits’; however, it is not known whether these have come from people looking for a service. There are links to and from other websites. There is potential for use of social media, for instance Facebook or Twitter, in promoting FASS and encouraging discussion, although there would be resourcing implications in providing moderation of content. YouTube may also have potential as a method of advertising the service.

Getting into the heart of communities proves to be a challenge. FASS has recently recruited outreach volunteers who will aim to target potential clients via recovery cafes in the city and provide signposting into the service.The role of these volunteers is to reach people who are unaware of FASS: for instance, people who are not already going along to recovery cafes or other groups. It was suggested by clients that perhaps potential clients have been reluctant to approach FASS for fear of exposing their situation to the attention of social services, with possible consequences for children involved.

One possible impact from any additional concerted marketing effort could be the need to increase capacity to support the increased numbers which might result. However, FASS has a strength in the self-help dimension to the service and its proven ability to respond quickly to need. Currently, there is typically no longer than a week’s wait for an appointment. The manager suggested that a consequence of increased numbers might be a slightly increased waiting time to access the service.

**SUMMARY AND FUTURE DEVELOPMENT**

Overall, FASS is a service greatly valued by its clients and supported by a highly committed group of staff, volunteers and board members. It has significantly expanded its range of activity over the last few years. This has been influenced in response to need identified from within the client group and by those working within the service. FASS has demonstrated a high degree of flexibility and ability to respond to changing and/or expanding need. It is clear that the service provides excellent value for money and has a considerable degree of resilience to challenges it faces, in that those involved are prepared to give a lot of commitment to it; however, there is a risk that, if the service continues to have its resources stretched, at some point the availability and quality of service provision might start to be compromised.

While it is always a challenge for services to secure sufficient, sustainable funding, this is particularly evident in the current difficult financial climate and even more so for the third sector. FASS is responding to this challenge in a variety of ways. It has established an outcomes measurement system to determine what difference the service has made for clients using it. This followed a training exercise for staff. The system has been tailored to make it more user-friendly for clients. FASS is also currently developing database capacity. Both of these measures will help in providing better quality information about the impact of the service in supporting families affected by substance use. While Glasgow Addiction Services provides the bulk of financial support, FASS also seeks opportunities for additional funding and is steadily growing its expertise and resources. Jobs and Business Glasgow has also been approached for support.

The idea of developing hubs in sectors of the city and locating outreach workers there is an excellent one, which would allow the service to establish a more localised and substantial presence as a basis for further development of responses to needs identified. FASS recognises that this would require a significant increase in funds at a time when the service has recently experienced a decrease in its core funding. This should, however, remain a development priority and perhaps approaches to potential funding sources closer to the city sectors identified might bear fruit. It may be helpful, in this regard, to **consider production of a service report or brochure for a wider audience** than the annual one prepared for Glasgow Addiction Services.

Other areas identified for development include:

* securing the services of a dedicated fundraiser
* funding for a support/development worker for family support groups
* overcoming stigma as a barrier to people accessing support
* people in recovery who are affected by others’ drug use
* black and minority ethnic groups who are proving hard to reach, particularly kinship carers
* identifying resources to develop and support social media

Acknowledging that FASS currently has a 3-year development plan in place, we would recommend **considering the** **introduction of a more detailed service development plan** to help co-ordinate future development. This is typically an annual exercise, which identifies service strengths, challenges and opportunities; includes feedback from clients, staff and other stakeholders; and priorities identified for action and development, with strategies for how these will be achieved. This could also be linked to existing reporting and funding cycles to help inform reports and applications. Scottish Drugs Forum would be happy to offer assistance with this, free of charge. It should be pointed out that the preparation and execution of a development plan is not a particularly time-consuming piece of work and can be tailored to the needs of the service.

**Thank you!**

Scottish Drugs Forum would like to thank everyone who participated in this quality survey by giving so generously of their time; the clients who talked about the situations which had led them to FASS; and all who expressed their views and offered their suggestions for future development. We were very impressed and humbled by the energy and commitment to the service shown by all involved. Finally, we would like to thank Alicia and Marlene who worked so hard to help us design the survey and arrange contact with clients, staff, volunteers and board members to obtain the material needed for this report. We hope FASS will find it has value in confirming the many strengths of this service, how highly it is regarded by those who use the service or work within it, and its future development possibilities.

Signed: Bruce Thomson, Facilitator 16 July 2014