

*Moylen Associates
Social Care Consultancy*

INDEPENDENT FINAL EVALUATION REPORT

MAY 2013-OCTOBER 2015

For Bosnia & Herzegovina Community Advice Centre (BHCAC)

OUTREACH PROJECT

Big Lottery Fund Reaching Communities Programme

Lily Lawson
Independent Consultant
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LOTTERY FUNDED



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EXECUTIVE SUMMARY

Executive Summary

INTRODUCTION

This Independent Final Evaluation was commissioned as part of a cycle of continuous improvement and to provide an independent overview on the delivery of outcomes set for the Outreach Project activities funded by Big Lottery Fund Reaching Communities Programme.

Although the Outreach Project is funded until end April 2016, this Final Evaluation is presented now, since BHCAC has already achieved all set outcomes and applied for continuation funding for the Project third phase. BHCAC is the only organisation providing essential services to people from the West Balkans living in London.

Bosnia & Herzegovina Community Advice Centre (hereafter BHCAC) was established in 1997 and registered as a charity in 2001. BHCAC is sited in North West London (London Borough of Brent) but also engages with Beneficiaries throughout the city as referrals are received from Health, Social Care and Community organisations in other boroughs who are otherwise unable to effectively assist and support residents from the West Balkans.

BHCAC provides services for people from the West Balkan area who made the transition to London/UK following the Bosnian conflict (1992-1995), when clear issues were identified within the community regarding the experiences of those in transition and the need for ongoing support.

Support for those affected remains essential as traumatic experience continues to impact successful resettlement for first generation transition and also affects the second generation in relation to issues of identity, integration and community cohesion.

EVALUATION PURPOSE

- To assess whether the Project has achieved its intended goals
- To understand to what extent the Project has achieved its intended purpose or why it may not have done so
- To identify how efficient the Project was in converting resources (funded and in kind) into activities, objectives and goals
- To assess how sustainable and meaningful the project was for participants

EXECUTIVE SUMMARY

EVALUATION FRAMEWORK AND METHOD

The Evaluation Framework was developed in consultation with the Project Manager identifying key evaluation questions and data submission requirements, both qualitative and quantitative. All data collection methods were comprehensively reviewed.

PROJECT HIGHLIGHTS

- Resulting from a consistent approach, planned and increased Project promotion and the introduction of reminder telephone calls to individuals regarding upcoming activities, the Project has achieved and exceeded all outcomes earlier than planned
- The Business Plan (2015/2018) has been developed and adopted
- The Project Steering Group was established in co-production with Beneficiaries with a Quarterly Meeting schedule in place
- Matched funding which was at risk was re-negotiated with London Councils
- BHCAC retained Quality accreditation from Investors in People (IIP) and PQASSO Level 2
- BHCAC achieved the Advice Quality Mark following comprehensive assessment in 2015
- 20 new Volunteers were recruited to assist Project delivery (16 from the local West Balkan community; 3 from links with University College London (UCL); 1 from SOAS (University of London))
- 2 new Board members were appointed to the Board of Trustees with appropriate Induction
- Training opportunities were secured with local Partners, reducing Project training costs
- From 241 completed Feedback Questionnaires 97% reported “satisfied” with service delivery. This represents 36% of all registered Beneficiaries
- The Schedule of Activities was co-produced with full Beneficiary involvement
- In total it is reported that over 2500 people benefited from the service provided by BHCAC during the life of the Outreach Project. This number comprises 664 who are registered members of the organisation (Beneficiaries) and additional numbers who attend Project events, social gatherings and “drop in” to the Centre site for ad hoc information and advice

EXECUTIVE SUMMARY

PROJECT CHALLENGES

- Retention of matched funding
- Identification of new funding streams (10 new funding applications were submitted / 9 were unsuccessful)
- Prioritisation of office equipment needs (successfully negotiated with Big Lottery Fund to re-prioritise new photocopier rather than new computers)
- As a smaller organisation, securing funding in “competition” with larger more established organisations
- Administrative support
- Time constraints and opportunities for partnership development
- Ensuring capacity and a balanced approach to service delivery

PROJECT OUTCOMES: QUANTATIVE

During the period of this Report (May 2013- October 2015) Quantitative achievements on overall Aims are evidenced as follows:

PROJECT AIMS	NUMBER OF PEOPLE ASSISTED TARGET	NUMBER OF PEOPLE ASSISTED ACHIEVED
Reduced Isolation	664	814
Improved Quality of Life	664	720
Improved sense of Independence	664	903

PROJECT OUTCOMES: QUALITATIVE

241 Beneficiaries completed Feedback Questionnaires

92% of Beneficiaries reported “Very satisfied” with the service provided.

5% of Beneficiaries reported “Satisfied” with the service provided

2% of Beneficiaries reported “Unsure”

1% reported the service as “Unsatisfactory”

EXECUTIVE SUMMARY

Completed Feedback Questionnaires represent approximately 36% of the total number of registered Beneficiaries assisted

Focus Groups and Network Meetings were held regularly to collect feedback from all Beneficiaries on Project service delivery. Views were monitored and recorded to inform progress and any requested changes to service formats.

Beneficiaries are clearly familiar with the feedback process and consistently return open and direct comment on their experiences.

For the purposes of this evaluation, 2 Focus Groups were held and facilitated with 16 Beneficiaries who regularly attend fitness Classes for Men and Women.

Beneficiaries expressed clear benefits in terms of physical and mental health improvements citing reduction in isolation and depression and a development of social skills.

Impact Comments included:

- I value the opportunity to meet with others and discuss and share my problems
- I need this project because I can be very depressed at home
- I could not do without this Project because I feel less alone
- My financial management has improved
- My physical agility has improved

EVALUATION OUTCOMES AND CONCLUSIONS

- BHCAC has delivered all planned Project outcomes earlier than the Project year end date in 2016
- Increased promotional activity and extensive partnership development has delivered both an increase in uptake of Project services and additional unexpected activities which has allowed the Project to significantly exceed significantly all Outcomes.
- The Project has evidenced meeting intended goals, by providing a range of services which reduce isolation, promote health and well-being and encourage independence and participation in the wider community
- The Project has evidenced effective partnership development by taking all available training opportunities to enhance existing skills and information, developing funding streams and accepting tutor staff from partners to provide specialist health promotion classes for Beneficiaries. These opportunities readily reflect established Project objectives and goals
- Participants openly and directly express examples, written, verbal and observed, of how Project activities and services have positively impacted their lives.

Background and Introduction

The Bosnia and Herzegovina Community Advice Centre (hereafter BHCAC) seeks to improve quality of life for people from the West Balkan area living in London

BHCAC provides services for people from the West Balkan area who made the transition to London/UK following the Bosnian conflict (1992-1995), when clear issues were identified within the community regarding the experiences of those in transition and the need for on-going support.

Support for those affected remains essential as traumatic experience continues to impact successful resettlement for first generation transition and also affects the second generation in relation to issues of identity, integration and community cohesion.

BHCAC supports a range of diverse needs through the provision of welfare, educational and cultural services at the Centre sited in the London Borough of Brent.

Although on-going research specific to Bosnian experience is now less available, considerable research at the time of the transition, outlines the broad range of difficulties faced by people during resettlement and highlights the core issues of identity and a sense of belonging, which profoundly affects each individual's ability to establish a new life in a new setting.

“Bosnian communities fell apart and cultures became uprooted, finding themselves in a vacuum, or at least in transition. The same applies to the identities embedded in these cultures. Apart from an obvious need of refugees from a different linguistic and cultural background for community support in a new setting, re-constructing the familiar culture and rebuilding identities threatened in the process of forced migration, made the establishment of communities a post-arrival priority.” (Evaluation and Policy Analysis Unit United Nations High Commissioner for Refugees CP 2500, 1211 Geneva 2 Switzerland)

Additionally in 1999, research undertaken by the University of New York concludes that:

“In considering the adaptation of refugees, we were particularly interested in wartime experiences and how adapting to a new country and new community might be impacted by those traumas and the resultant displacement from home and country. The literature suggests that negative life events both pre and post migratory, continue to have an impact on economic, social and psychological adaptation years after the initial events (Dr Reed Coughlan Empire State College, State University of New York 207 Genesee Street Utica, New York) (Pernice and Brook, 1996; Uba and Chung, 1990)

BACKGROUND AND INTRODUCTION

“Pre migratory traumas have been found to have important effects on financial and physical health both of which are key determinants of self-sufficiency and well-being” (Uba & Chung, 1990)

“Models of the process of acculturation for refugees have emphasized psychological adaptation, socio-cultural adaptation and economic adaptation as three distinct and equally important measures of successful adjustment in a new host country” (Aycan & Berry, 1996).

This research clarifies the need for the Project overall and underpins the motivation and impetus of BHCAC to establish services in London for people from the West Balkan area.

As a community organisation BHCAC has the ability to generate social capital, improve social cohesion and empower individuals, supporting health, well-being and integration and to enable both a successful transition and continuously successful resettlement in the UK.

Set up in 1997 and achieving charitable status in 2001, BHCAC offers a wide range of services and activities to improve the lives of people from the West Balkan region. BHCAC supports individuals to integrate more fully into British society, develop supportive networks, improve and maintain their own health and wellbeing, contribute to their local community and develop additional skills, in addition to celebrating their own culture.

BHCAC provides a clear mission statement, vision, objectives and values, underpinned by a comprehensive 3 year business plan (2015/18) which outlines defined objectives and goals.

Achievement is measured through service delivery targets linked to organisational objectives and members of staff have individual planned development objectives for their own work area. Volunteer staff are fully inducted and clearly understand the expectations of their role. This comprehensive strategic planning, review and continuous improvement cycle, ensures that everyone is clear about the aims and priorities of the organisation and how each person can contribute to its success.

Beneficiaries are predominantly from the first generation of settlement in the UK. 75% are aged 65+ while 85% would describe themselves as disabled. The organisation is acutely aware of the continuing stress for older people from the West Balkans and at the same time understands how the process of resettlement may have affected the second generation which has been impacted by parental struggles in the past. In forward planning, the organisation is committed to continued support for older people while mindful of issues affecting the younger generation.

BHCAC is firmly rooted in London and within the local community in Brent and has established a reputation for excellent standards of practice both nationally and internationally. BHCAC is unique, as the only organisation serving this Group in the London area.

Legislative Framework

As a third sector organisation, BHCAC activities evidence a commitment to current priorities for Health and Social Care and a continuing commitment to ensuring high standards of service delivery.

Operating within Health, Social Care and Housing legislation, BHCAC activities are co-produced with and led by Beneficiaries themselves and reflect equality, prevention and a level of personalised service provision which confidently supplements statutory services.

Key priorities for Health and Social Care include:

- Enabling more people to remain in their own home and retain or return to independent living
- Prevention of hospital admissions
- Improving access to services
- Enabling choice and control
- Ensuring Safeguarding
- Working in partnership

The Care Act 2014 also emphasises the need to prevent, reduce and delay the introduction of services i.e. increase independence through preventive and supportive strategies and actions

BHCAC staff and Trustees maintain an up to date working knowledge of all legislation which may affect Beneficiaries and overall service delivery.

FUNDING DEVELOPMENT AND TRAINING

Funding Development and Training

FUNDING DEVELOPMENT

Despite the increasing challenge of securing funding in the current and recent financial climate, BHCAC has successfully bid for and negotiated funding since inception in 1997, working with partners who can support the objectives of the organisation.

The Project Manager in consultation with the Board of Trustees continuously seeks to identify appropriate Funders and prepares bid reports as required.

During the Outreach Project period, BHCAC has been successful in securing matched funding as follows:

Lloyds Bank Foundation for England and Wales	£30,000
Comic Relief London Network Foundation	£9,800
Wandsworth Council	£5,000
Edward Harvist Trust Fund (Brent Council)	£8,550
Community contribution	£11,864
Integrated Neurological Services	£1,625
CVS Grape Project Ealing (Big Lottery's Transitional Fund)	£1,470
AdviceUK	£10,800
	TOTAL: £79,109

In addition a funding grant of £9,888 was secured (2015) from Awards for All, for the purpose of developing Activities located outside the Project Centre site.

The total amount of matched funding achieved for the Project is currently £88,997 i.e. 25% of total budget (£356,574) costs.

FUNDING DEVELOPMENT AND TRAINING

As a further illustration of added value, BHCAC has attributed financial value to the input of Volunteers (20) who provide essential “person power” to each Activity stream.

OUTREACH PROJECT May 2013-October 2015		
Volunteers (20)	Hours provided	Cost assumed @£15perhour
Year 1	1759	£26,385
Year 2	1718	£25,770
Year 3 (1 st 6 months)	812	£12,780
TOTAL	4329	£64,935

With this attribution, income generation activity and added value has produced a nominal total of **£153,932** (£88,997cash/ £64,935 value) over the period of Outreach Project delivery (to October 2015), representing 43% of total budget costs.

MATCHED FUNDING ACTIONS

At the time of the original Big Lottery Reaching Communities Programme submission, matched funding for the Project was expected from:

- Brent Council
- AdviceUK (Lead for the BAN Advice Integration Project)

BAN (Black Minority Ethnic and Refugee Advice Network-BAN) is an integrated network of quality assured advice services delivered by and for people from London BMER migrant and refugee communities. The network is led by AdviceUK and commissioned by London Councils Grants Programme.

The application to Brent Council was declined.

Matched funding was further challenged in respect of London Councils existing agreement with BAN Advice Integration Project led by Advice UK, when the London Councils Grants Programme announced plans to withdraw previously agreed funds, 6 months early.

BHCAC, along with partner organisations of the BAN Network, successfully lobbied London Councils on this decision and achieved a reversal, which ensured that London Councils agreed to continue grant funding to the original projected end date (31 October 2012) and further extended to 31 March 2013.

The new application submitted by AdviceUK on behalf of the BAN Network in 2013, was declined.

BHCAC immediately reviewed costs and spending and sought to identify efficiencies. The Board of Trustees considered creative solutions which resulted in:

FUNDING DEVELOPMENT AND TRAINING

- outsourcing some activities, working with partners
- increasing work with existing partners to maximise capacity
- negotiating reduced fees for courses run by Brent Adult & Community Education Service (BACES)
- developing 2 new partnerships (West London BMER Advice Network & Brent Mind) to share resources and further reduce costs

This “crisis” highlights how precarious funding can be in the current financial climate and BHCAC reports and demonstrates an on-going vigilance regarding projections and trends which might affect funding and future operations.

In addition there is an established Business Continuity Plan and excellent communication reported between the Project Manager and Trustees, to ensure any business risks are promptly addressed.

Budget monitoring is in place and reviewed on a monthly basis by the Project Manager with Quarterly reporting to the Board of Trustees and Project Steering Group.

The Reserves Policy underpins prudent financial planning.

Challenges remain however in continuing to develop new funding streams to underpin Project Activities and include:

- Retaining existing funding, and the development of new funding streams
- Retaining an experienced and highly skilled staff team
- Continuing to develop and enhance the skills and capabilities of the Trustees
- Continuing to raise the profile of the organisation

At 31 October 2015:

Total Income (Big Lottery Fund Grant Payment)	£216,912
Total Expenditure	£200,273
Current balance	£16,639
OUTSTANDING	
Payment awarded 31 October 2015 (not included above)	£22,350
Payment due 01 February 2016	£22,352

FUNDING DEVELOPMENT AND TRAINING

SKILLS AND TRAINING

To ensure that BHCAC provides an appropriate and high quality professional service, a structured programme of skills support and development, for Staff, Volunteers and Trustees is in place.

A comprehensive Training Plan is established which records expected outcomes and links to the business objectives which are:

- To provide information, advice, advocacy and support services
- To organise classes and workshops that promote exercise and healthy living
- To gather and disseminate information that is of interest to beneficiaries
- To organise social and cultural events that promote positive interaction with wider British society
- To organise social and cultural events that promote positive expression of the language and culture of beneficiaries
- To provide volunteering opportunities for beneficiaries to develop their skills, confidence and self-esteem

Funding for training activity has been severely limited, however the organisation maintained a resourceful and innovative approach in identifying opportunities for free of charge or low cost activity. This included taking advantage of training provided by the local authority, and in addition training, arranged through partner organisations and networks, which offered a range of skills development for Trustees on areas which included business planning, roles and responsibilities, legal requirements and partnership work.

During the Outreach Project period, BHCAC staff completed training sessions relevant to the specialist areas addressed by the Project. These included training on:

- Mental Health and Mental Capacity Act
- Social Care and Welfare (23 sessions)
- Housing & Welfare Rights (7 sessions)
- Human Resources functioning and Trustee Board responsibilities (Trustees)
- 1 day training for Volunteers (in house) with a focus on Project delivery
- West London BMER Advice Network Training to deliver “Made of Money” Workshop for Beneficiaries
- Brent MIND Training to deliver Health Awareness Workshop for Beneficiaries
- General Induction for all new Volunteer Staff

Governance and Staffing

BHCAC is governed by a Board of Trustees comprising 9 members which meets as a minimum, 4 times per year. In addition to the established meeting schedule, Trustees are available to the Project Manager at any time.

Trustees participate in local training initiatives through Advice UK which provides a rolling programme of activity for both Trustees and Volunteers. Trustee membership is stable and a comprehensive Induction programme is provided as part of any new Trustee appointment process. During the Outreach Project period, Trustees attended training in the development of strategic planning skills and business planning.

Trustees are recruited from a variety of backgrounds and essentially sourced from the local West Balkan community.

In addition, the organisation has access to an Independent Financial Accountant/Auditor and an Independent Social Care Consultant. Any legal issues are addressed through local Solicitor contacts

The organisation has made full and appropriate use of all opportunities to extend Governance skills and to consult on matters concerning organisational development or other issues affecting the delivery of service. A full range of Policies is in place to underpin organisational Governance and Operations and these include:

- Business Plan (3 Years)
- Business Continuity Plan
- Training Plan
- Annual Report
- Health and Safety Policy
- Human Resources Policies
- Recruitment Policy
- Professional Conduct Policy
- Equal Opportunities Policy
- Data Protection Policy
- Risk Assessment / Business Continuity Plan (reviewed at Board of Trustees)

Through an efficient Governance system, the organisation complies with all requirements as set by the Charity Commission in regard to maintenance of Charity status

The Annual General Meeting is a planned event involving all Stakeholders

GOVERNANCE AND STAFFING

OPERATIONAL POLICIES AND PROCEDURES AND QUALITY ASSURANCE

Policies and Procedures are in place to underpin day to day operations and form an integral part of Staff induction. These policies and procedures are regularly updated.

Operational Policies and Procedures are listed as follows:

- Equal Opportunities Policy
- Health & Safety Policy
- Fire Regulations Procedure
- Building insurance
- Employer's Liability Insurance
- Professional Indemnity Insurance
- Disciplinary Policy
- Child Protection Policy
- Vulnerable Adults Policy
- Data Protection & Confidentiality Policy
- Conflict of Interest Policy (English and Bosnian version)
- Client Complaint Policy& Procedure (English and Bosnian version)
- Allocation of enquiries Policy,
- Service Standards and demands policy
- Advice Service Plan
- Referral Procedure
- Confirming Advice in Writing Policy
- When BHCAC cannot provide the service immediately
- Case Management Policy; (Legal reference Material procedure, Welfare Benefits Procedure
- File management and case recording procedure
- Client feedback procedure
- Quality assurance Policy
- Written procedure for informing clients about the progress of the enquiry
- Confirming advice in writing
- Service of Others
- Advice procedure for public information
- Monitoring and Evaluation Policy
- First Interview Policy

GOVERNANCE AND STAFFING

STAFFING

The Outreach Project has been committed to retention of staff, an approach which provides continuity and a stable environment for Beneficiaries and for service delivery.

Staffing has been retained as follows:

1 Project Manager

1 Outreach Worker

1 Outsourced Support Worker (Outdoor Clerks – private agency)

4 Brent Adult & Community Education Service (BACES) Tutor staff (Activities)

20 Volunteer staff

Staff and Volunteer staff, have developed skills through an established Training Plan which links to the Business Plan and Outreach Project objectives. Individual and corporate targets were identified and established in consultation and reviewed appropriately through regular appraisal.

EVALUATION FRAMEWORK

Evaluation Framework

EVALUATION PURPOSE

- To assess whether the Project has achieved its intended goals
- To understand to what extent the Project has achieved its intended purpose or why it may not have done so
- To identify how efficient the Project was in converting resources (funded and in kind) into activities, objectives and goals
- To assess how sustainable and meaningful the project was for participants

BHCAC is fully committed to a continuous cycle of improvement and implements a variety of systems throughout the year to monitor performance, developments and trends.

In addition BHCAC has a continued commitment to the PQASSO quality system (Charity Evaluation Service (CES)) and the Investors in People (IIP) programme, both widely recognised as marks of excellence. BHCAC has been successful in maintaining these quality standard marks in the past year, following review by both IIP and CES and additionally has achieved the Advice Quality Mark following comprehensive assessment in 2015.

The most recent Investors in People Report is available at **Appendix 1**

The Advice Quality Mark assessment Report is available at **Appendix 2**

BHCAC Outreach Project has provided a range of Services and Activities as outlined below:

Skills Development	Advice, Information & Outreach 1:1 Support	Health Promotion	Social Development
ESOL Classes (Yr1)	(Home visits/Drop in/appointment)	Fitness for Women	Social Club
IT Internet Classes (Yr1)	Information Newsletter	Fitness for Men	Quarterly Events
Financial Awareness		Quarterly Health Awareness Sessions	Spring and Summer Outings
Volunteering Opportunities		Chair Yoga Classes	
		Indian massage(Yr1)	
		Reflexology (Yr1)	
		Tai Chi Exercise Class (Yr1)	

EVALUATION FRAMEWORK

These Activities and Services benefit a range of Stakeholders as follows:

- Beneficiaries
- Local statutory services
- Local Health services (secondary)
- Local third sector (voluntary) services
- Refugee organisation partners
- Local Health services (primary)
- Bosnian Network organisations UK
- International Bosnian community organisations
- Private local agency partners (e.g. working with solicitors)
- Health services in other London boroughs e.g. 1 Beneficiary was referred from outside Brent as part of his ongoing care support plan

All Services and Activities are provided in response to identified needs, in full consultation with both individual and corporate Beneficiaries and maintain a focus on the stated aims of the Outreach Project

EVAULATION PLANNING

An Evaluation planning meeting was undertaken with the Project Manager to map the Evaluation process and identify Key Evaluation questions

OUTREACH PROJECT AIMS AND OUTCOME INDICATORS

Outreach Project Aims and Outcome Indicators

Project Aims	Outcome Indicators	Timescale
Reduced Isolation	Outcome 1 Number of People who will demonstrate improved communication and become more socially active by becoming Volunteers	End Yr1
	Number of People who will be less housebound and able to take part in centre based activities or who will be more healthy and active in the community	End Project
Improved quality of Life	Outcome 2 Number of people who will have developed new skills	End Yr2
	Number of people whose physical and mental health has improved to enable them to access centre based activities or be able to demonstrate improved health and resilience	End Project
Improved sense of Independence	Outcome 3 Number of People able to live a more independent lifestyle through better management of their affairs	End Project
	Number of people able to access the medical or social support they need directly	End Project

KEY EVALUATION QUESTIONS

Key Evaluation Questions

KEY EVALUATION QUESTIONS

WHAT IMPACT HAS THE PROJECT HAD ON THE SERVICE USERS/BENEFICIARIES?

WHAT ACTIONS HAVE BEEN TAKEN?

WHAT SERVICES/ACTIVITIES HAVE BEEN DELIVERED?

WHAT INDICATES THAT THE BEST METHODS OF SERVICE DELIVERY ARE BEING USED?

WHAT ACTIONS HAVE BEEN TAKEN TO PUBLICISE THE PROJECT?

HOW DID THE SERVICE INVOLVE BENEFICIARIES?

WHAT SERVICE PARTNERS HAVE BEEN INVOLVED?

WHAT IS THE MONITORING FRAMEWORK?

HOW HAS FEEDBACK BEEN COLLECTED? (SOFT OUTCOMES)

WHAT FEEDBACK DATA IS AVAILABLE? (HARD OUTCOMES)

WHAT WERE THE CHALLENGES?

HOW DID LEARNING INFORM PRACTICE?

Evaluation Method

Data was supplied, both qualitative and quantitative, against the Key Evaluation Questions to determine both outputs and outcomes

Project Beneficiaries were consulted by:

- Interview
- Focus Groups
- Questionnaires
- Life Stories/Case Studies

Review of Activities was undertaken by:

- Consulting the Activities Plan
- Consulting data on attendance and data logs/registers

Review of Services provided was undertaken by:

- Consulting Activities Plan

Review to determine that the best method of service delivery was being used was undertaken by:

- Reviewing service delivery in the local context
- Discussion with Beneficiaries on their views and experiences of the service
- Reviewing how the organisation responded to monitoring of service delivery

Review of action taken to publicise the Project was undertaken by:

- Reviewing all outputs on publicity during the period with a focus on outcomes
- Reviewing all partnership connections
- Reviewing current approaches to potential partner organisations
- Reviewing public relations planning

Review of how the service involved Beneficiaries was undertaken by:

- Reviewing consultation processes
- Discussion with Beneficiaries on their experience of consultation and service response

Review of what partners have been involved was undertaken by:

- Examining links established and proposed
- Reviewing any new partnership development
- Reviewing how the organisation acted to retain current partnerships

EVALUATION METHOD

Review of the monitoring Framework was undertaken by:

- Review of the monitoring framework plan
- Reviewing feedback from Beneficiaries
- Reviewing feedback from partner organisations

Review feedback from Beneficiaries was undertaken by:

- Review of consultation planning
- Review of the Feedback Questionnaires completed by Beneficiaries
- 2 focus Group interviews and discussion with Beneficiaries
- Attendance at the Project Centre to observe activities

Review of quantitative Feedback data available was undertaken by:

- Reviewing Data from the overall database (Advice Pro) system
- Review of Annual and other reporting formats
- Review of attendance logs
- Review of Financial systems

Review of challenges experienced was undertaken by:

- Discussion with Staff, Beneficiaries and the Chair of Trustees

DATA COLLECTION SOURCES

Data Collection Sources

Data collected during the Outreach Project period of service delivery (May 2013- October 2015) was supplied from the sources outlined below:

DATA COLLECTION

Quantitative Data Sources	Qualitative Data sources
Diary	Individual Interview/Comment/Storytelling
Database	Focus Groups
Case Recording	Observation
Feedback Questionnaires	Participatory Evaluation
Data on Number of Beneficiaries using office based services Classes/Events/Social Club (Advice Pro /Attendance Logs)	
Data on Number of Beneficiaries using home based services Outreach/Helpline (Advice Pro/Attendance Logs)	

- Information from the database (Advice Pro Case Management System) was supplied from across all areas of service
- Total number of Beneficiaries attending each work stream was identified
- Total number of Feedback Questionnaires completed was reviewed
- 2 Focus Groups were arranged and attended by a total of 16 participants
- Beneficiaries were observed in attendance at the Centre during Activities
- Beneficiaries understood the evaluation process and participated positively with regard to the provision of verbal and written feedback
- Beneficiaries provided consent to information sharing and supplied Life Stories for review
- A range of Data Formats was developed to collect information efficiently and accurately

PROJECT OUTPUTS: ACTIVITIES AND DATA COLLECTED

Project Outputs: Activities and Data Collected

Quantitative information was observed as recorded both on hard copy files and on the Advice Pro database system.

The Beneficiaries Monitoring Form included Equalities information and the type of Support provided as well as personal and contact details. Individual Details were collected daily and collated monthly, and resulting data was entered into monthly, quarterly and end of year reports which informed reporting to the Board of Trustees and Project Steering Group. This data also provided accurate information for Funders.

The Service Delivery Plan and proposed Activities Plan was co-produced and informed each year by a full consultation process with Beneficiaries and through quarterly Steering Group meetings.

Throughout the Outreach Project period 2 consultation Sessions were undertaken with Beneficiaries and 10 Steering Group meetings were held.

The Service Delivery Plan was finalised and confirmed by the Board of Trustees in conjunction with the Project Manager.

PROJECT OUTPUTS: ACTIVITIES AND DATA COLLECTED

Quantitative information on Service Delivery is evidenced as follows:

Data Recorded on Services and Activities Delivered (Sessions) **May 2013 – October 2015**

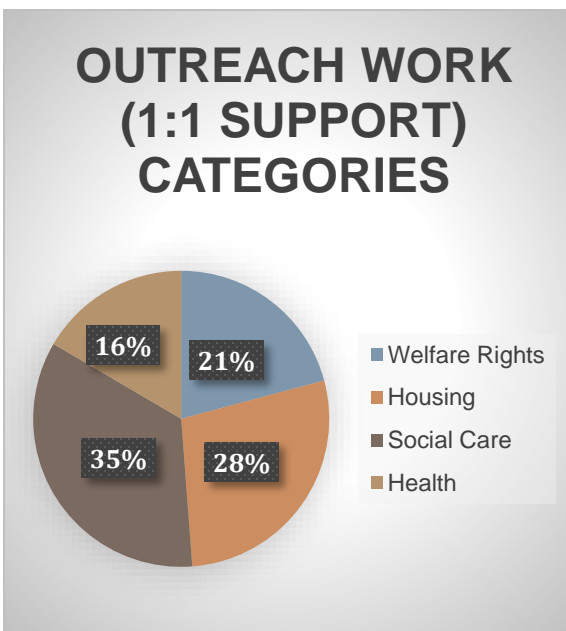
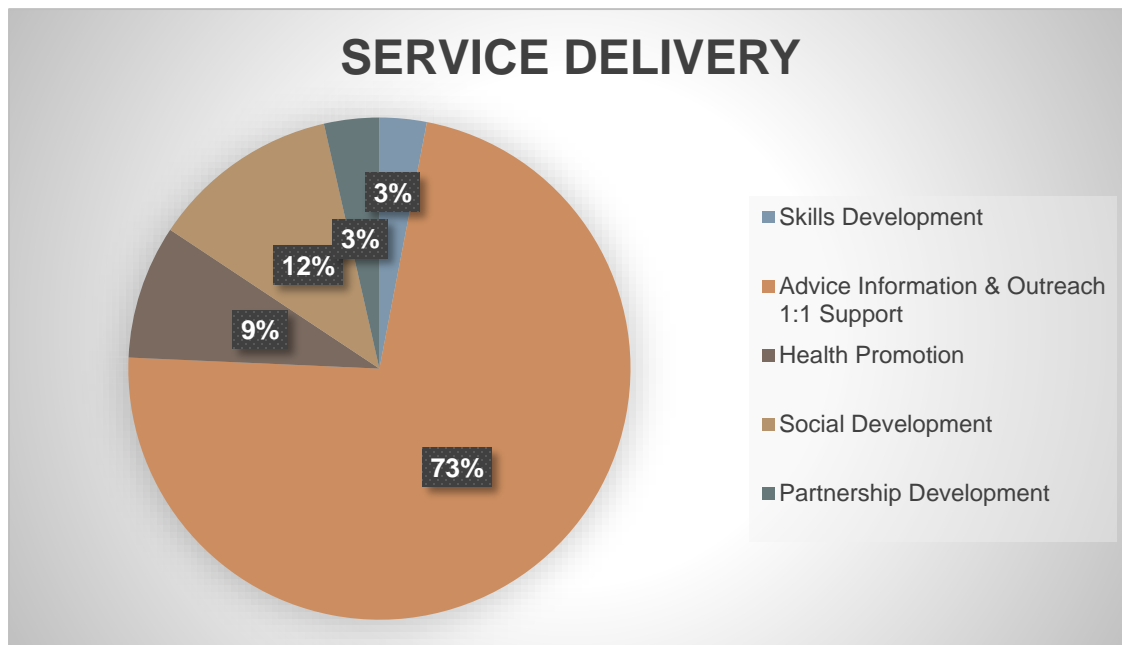
Skills Development	ESOL Classes/IT Classes (Yr1)	Volunteering Opportunities	Training	Workshops
	37	20	7	6
Advice, Information & Outreach 1:1 Support	Advice Information & Outreach 1:1 Support (Home visits/ Drop In/Appointments)	Information Newsletter (Distributed to 664 People)	Financial Awareness Sessions	
	1008	10	2	
Health Promotion	Physical Activities Women (Fitness/Reflexology/ Chair Yoga)	Physical Activities Men (Fitness)	Physical Activities Men & Women Tai Chi/Indian Massage (Yr1)	Quarterly Health Awareness sessions
	115	30	48	6
Social Development	Social Club	Social Events	Spring & Summer Outing	Gym/coffee /social (Yr3)
	255	14	6	5
Partnership Activities	Project Steering Group Meetings	Partner & Network Meetings	Humanitarian Aid	
	10	72	1	
Number of people involved All Services & Activities = 2577				

Qualitative information on Service Delivery is evidenced as follows:

- Feedback Questionnaires
- Regular Focus Groups
- Life Stories/Case Histories
- Observation during activities
- Regular consultation

SERVICE DATA CATEGORIES

Service Data Categories



Outreach work is included in the category “Advice & Information and 1:1 Outreach Support” above.

Data collected during the Outreach Project period indicates an increase in the number of people who were able to attend the Centre for Support rather than being supported in their own home

The introduction of an Assessment Format in Year 2 providing individual action plans with objectives, timescales and success indicators, ensured that desired outcomes were met. Systems are in place to monitor progress towards individual objectives on each action plan assessment

Developing Partnerships

The Outreach Project maintained and developed relationships with existing partners while continuously seeking new partnerships to enhance services for Beneficiaries.

During the Outreach Project period, on-going partnership with the Brent Adult and Community Education Service (BACES) continued to provide accredited Tutors for Physical Fitness and language activities (ESOL) at the Project site in Brent.

The Outreach Project is a member of the West London Black Minority Ethnic and Refugee (BMER) Advice Network in London which shares learning, identifies challenges and provides a forum for the discussion of issues affecting BMER individuals and organisations across London. One result of this alliance was the provision of 2 sessions on financial awareness (Made of Money) which was attended by 16 Beneficiaries.

The Outreach Project was able to share its successful co-production operational style with a number of organisations who adopted the concept within their own organisations (7 organisations within West London BMER Advice Network and 2 Bosnian organisations located in the Midlands)

In addition, links with statutory authorities (London Borough of Brent) and Health Partners provided opportunities to align services with recognised community needs and trends, particularly in the areas of Health and Social Care. This also enabled the Outreach Project to access relevant information on Health and Social Care provision as well as any relevant funding streams which might enhance services for Beneficiaries.

BHCAC also maintained links with other UK and international groups assisting people from the West Balkan area and continued to utilise these links to share learning, promote community and provide opportunities for events and social activities which contributed to well-being and quality of life for Beneficiaries.

At the beginning of Year 2, in response to the flooding emergency in Bosnia, Beneficiaries undertook to raise goods to the value of £58,901 for the Relief effort. This was achieved through utilising the services of In Kind Direct, an organisation which assists charities to source donated products which can further their aims and objectives.

This collaboration was noted in a short article by the Daily Mail (04 August 2014) available on the link below:

<http://www.dailymail.co.uk/wires/pa/article-2715448/CHARITIES-HELP-BOSNIA-FLOOD-VICTIMS.html>

DEVELOPING PARTNERSHIPS

Partnerships and network links included:

- AdviceUK
- Brent Mind
- Local Solicitors
- West London BMER Advice Network
- BAN Network (Pan London BMER Advice Network)
- CVS Brent
- Brent Adult and Community Education Service (BACES)
- Bosnia & Herzegovina UK Networks (Birmingham/Derby)
- In Kind Direct
- Outdoor Clerks (Private Agency)

Project Promotion

The Outreach Project was publicised as follows:

- By organising a re-launch event for all Stakeholders
- By developing a Service leaflet outlining Project aims, objectives and activity plans and distributed by hand, post and email to all stakeholders, including potential Beneficiaries and professional partners
- By developing and delivering Power Point presentations for all stakeholders at Outreach Project launch
- By promotion at all Network Meetings
- By distributing Leaflets by letter to all existing Beneficiaries
- By establishing and regularly updating 3 Information Boards at the Project site
- By delivering 8 Newsletters to all Beneficiaries outlining Outreach Project activities and progress
- By introducing reminder telephone calls to all Beneficiaries
- By introducing Assistance with transport and access arrangements
- By implementing Escort arrangements with Volunteer staff for all Beneficiaries
- By participation in publicity through HAYAT TV

This planned and increased promotional activity produced an increased uptake of Project services which is evidenced by increased Beneficiary attendance and participation in project activities.




PROJECT OUTCOMES: QUANTITATIVE (& CHANGE INDICATORS)

Project Outcomes: Quantitative (& change indicators)

	Project Target (Beneficiaries)	Achieved October 2015		RAG rating
OUTCOME 1				
REDUCED ISOLATION				
<i>People will demonstrate improved communication and become more socially active by becoming Volunteers</i>	20	20	Achieved 100%	
<i>Number of people who will be less housebound and able to take part in centre based activities or who will be more healthy and active in the community</i>	664	814	Exceeded 23%	
OUTCOME 2				
IMPROVED QUALITY OF LIFE				
<i>Number of people who will have developed new skills</i>	51	146	Exceeded 186%	
<i>Number of people whose physical and mental health has improved to enable them to access centre based activities or be able to demonstrate improved health and resilience</i>	613	720	Exceeded 17%	
OUTCOME 3				
IMPROVED INDEPENDENCE				
<i>People able to live a more independent lifestyle through better management of their affairs</i>	539	903	Exceeded 68%	
<i>Number of people able to access the medical or social support they need directly</i>	125	154	Exceeded 23%	

PROJECT OUTCOMES: QUANTITATIVE (SUMMARY)

Project Outcomes: Quantitative (Summary)

	Project Target (Beneficiaries)	Achieved October 2015		RAG rating
OUTCOME 1 REDUCED ISOLATION	664	814	Exceeded 23%	
OUTCOME 2 IMPROVED QUALITY OF LIFE	664	720	Exceeded 8%	
OUTCOME 3 IMPROVED INDEPENDENCE	664	903	Exceeded 36%	

PROJECT OUTCOMES: QUALITATIVE

Project Outcomes: Qualitative

FEEDBACK QUESTIONNAIRES (OUTREACH 1:1 SUPPORT)

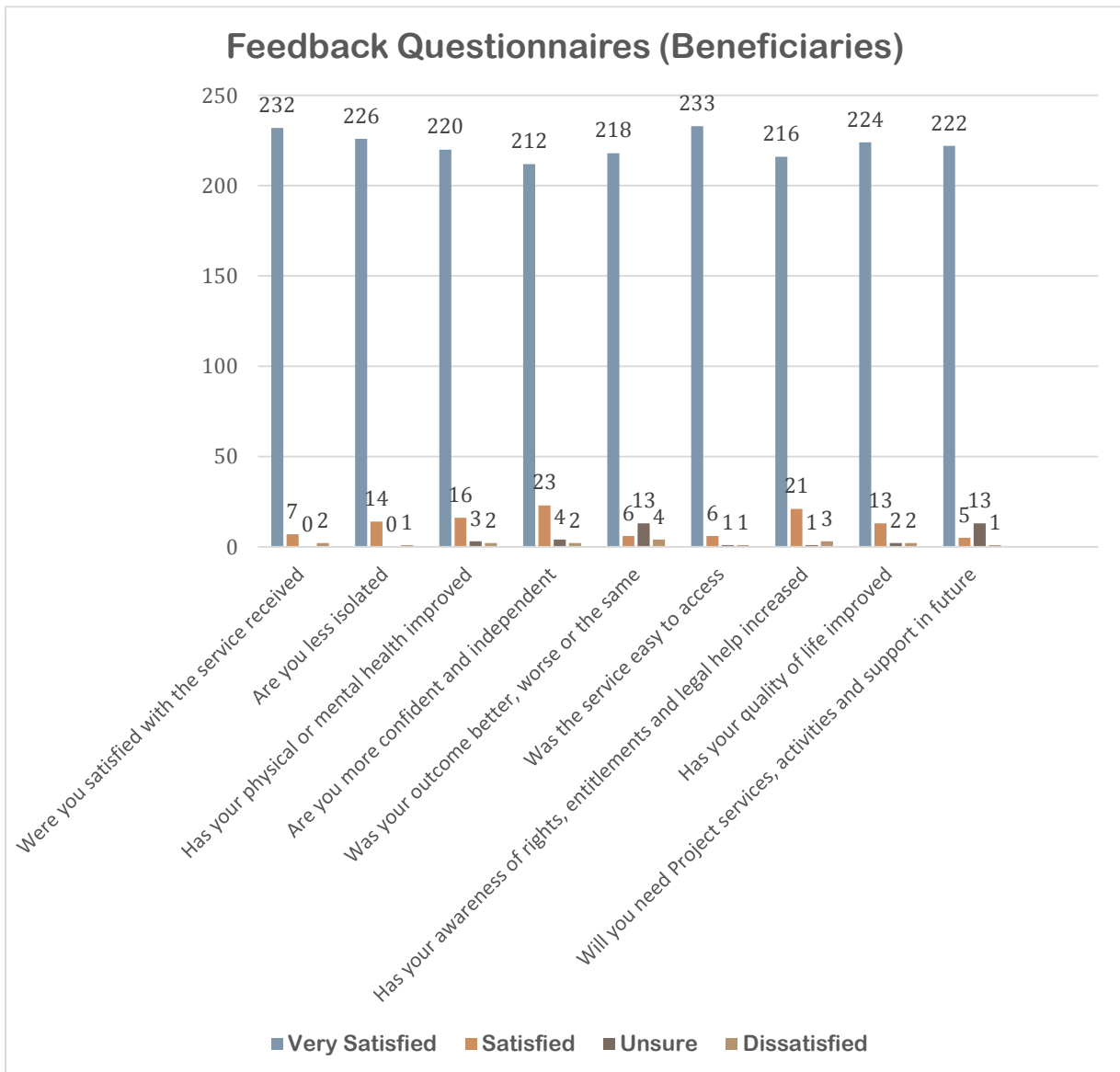
664 Beneficiaries were asked to complete a formal Feedback Questionnaire reflecting their experience of the service and their satisfaction with the outcome of interventions

241 Beneficiaries responded i.e. 36%

Feedback Questionnaire format available

Appendix 3

Outcome data is available as follows:



PROJECT OUTCOMES: QUALITATIVE

FEEDBACK QUESTIONNAIRE RESULTS MAY 2013 – OCTOBER 2015

241 Beneficiaries completed Feedback Questionnaires

92% of Beneficiaries reported “Very satisfied (service provided and improved personal functioning)

5% of Beneficiaries reported “Satisfied” (service provided and improved personal functioning)

2% of Beneficiaries reported “Unsure”

1% of Beneficiaries reported the service as “Unsatisfactory”

From Equalities monitoring information collected, 75% of Beneficiaries are aged 65+ and 85% of Beneficiaries describe themselves as “Disabled”

Completed Feedback Questionnaires represent approximately 36% of the total number of registered Beneficiaries assisted.

Following the independent mid-term review report recommendations, BHCAC reviewed the Feedback Questionnaire format in consultation with Beneficiaries to ensure accurate understanding of concepts in translation and essential data capture for analysis.

FOCUS GROUPS/ NETWORK MEETINGS (ALL BENEFICIARIES) GENERAL FEEDBACK

Focus Groups and Network Meetings were held regularly to collect feedback from all Beneficiaries on Project service delivery. Views were monitored and recorded to inform progress and any requested changes to service formats.

Beneficiaries are clearly familiar with the process and consistently returned open and direct comment on their experiences.

2 Focus Groups were held and facilitated for 16 Beneficiaries who regularly attend fitness Classes for Men and Women.

Beneficiaries expressed clear benefits in terms of physical and mental health improvements citing reduction in isolation and depression and a development of social skills.

Impact Comments included:

- I value the opportunity to meet with others and discuss and share my problems
- I need this project because I can be very depressed at home
- I could not do without this Project because I feel less alone
- My financial management has improved

PROJECT OUTCOMES: QUALITATIVE

- My physical agility has improved
- I know I can always get help here
- This Project provides a focus for my life
- Before I attended I was always at the GP
- I would like more Interpreter services to help me deal with other organisations e.g. Housing benefit offices
- This Project is part of my care support Plan and I am accompanied by my Carer when I come

Beneficiaries reported that the Project remained central to their sense of value and well-being and that the services provided were an essential lifeline assisting with health, social problems and access to a wide range of services affecting their daily lives. In addition, Beneficiaries felt their confidence and skills had improved, contributing to an increase in self-worth and enabling them to begin to tackle day to day issues.

Beneficiaries reported involvement in discussions on future planning aiming to build resilience and further increase independence. They requested further skills development opportunities, advocacy services and on-going support to access community resources which would build on current success and ensure increased independence and quality of life in the longer term.

Beneficiaries also commented that there is no other culturally appropriate service in London and highlighted how BHCAC fills gaps and adds value to current statutory and voluntary service provision enabling access to wider community resources.

Beneficiaries were familiar with the overall aims of the current Project and reported improvements in health, independence, confidence, self-worth and reduced isolation. Beneficiaries felt that the future services proposed, which emphasise building resilience and community cohesion, would result in further development of skills, ensure further increased independence and quality of life and enable access to preventive services through a consistent and supportive framework offering a co-productive approach. The proposed inclusion of 2nd generation participants would result in community cohesion and a sustainable future support network wholly linked to external community services.

LIFE STORIES/CASE HISTORIES

Beneficiaries offered their Case Studies as evidence of the change which Outreach Project Support and Activities had made to their individual quality of life and well-being

2 Life Story/Case Studies have been selected and attached at

Appendix 4

Many more are available

EVALUATION FINDINGS

Evaluation Findings

KEY EVALUATION QUESTIONS AND CONCLUSIONS

WHAT IMPACT HAS THE PROJECT HAD ON THE SERVICE USERS/BENEFICIARIES?

Monitoring and feedback systems evidence that the delivery of the Outreach Project has had a profound impact on the lives of Beneficiaries.

All support and activities delivered, demonstrated a clear focus on independence, well-being and the reduction of isolation as well as providing relevant and consistent information and advice which enables Beneficiaries to make informed choices on their whole life management.

In addition, evidence indicates an increase in physical and mental health overall and increased capacity both to access wider services and participate in the local community.

WHAT ACTIONS HAVE BEEN TAKEN?

From the outset, the establishment of a clear Strategic Plan, co-produced with Beneficiaries provided a framework for successful delivery of services to match the needs identified within the West Balkan community.

Regular consultation opportunities and an open approach to feedback ensured Beneficiaries participation in all stages of planning activity. A Steering Group was established with representatives for each activity elected by Beneficiaries themselves and a full Activity Plan was developed with opportunities for regular review.

All plans were confirmed and reviewed by the Board of Trustees at quarterly intervals.

Partnerships were maintained and developed resulting in increased training, funding and the provision of partner staff to assist activity delivery.

At Board meetings Budget tracking was undertaken and consistent risk assessment ensured any business risk was identified and robustly addressed

WHAT SERVICES/ACTIVITIES HAVE BEEN DELIVERED?

A full list of Services delivered is available at **Page 23**

Broadly, the services delivered fall into the following categories:

Skills Development; Advice, Information & Outreach 1:1 Support; Health Promotion; and Social Skills Development

In addition the maintenance and development of professional partnerships maximised opportunities and shared learning on systems, processes and service delivery.

EVALUATION FINDINGS

WHAT INDICATES THAT THE BEST METHODS OF SERVICE DELIVERY WERE USED?

- Feedback from Beneficiaries
 - Shared learning with professional partners
 - Retention of an overview of priorities and trends in Health; Social Care; Welfare Rights and Housing
 - Local area service reviews and experience of local services access and eligibility methods
 - Systems in place for continuous review
 - Cost efficiency
-

WHAT ACTIONS HAVE BEEN TAKEN TO PUBLICISE THE PROJECT?

At Outreach Project set up and following adoption of the Project Plan, a re-launch event was organised and a full Service Leaflet was developed which was distributed by hand, post and email to all stakeholders. This included potential Beneficiaries and professional partners.

In addition, the Project was promoted at all Network Meetings and 5 presentations on Project objectives were delivered to partner organisations both statutory and voluntary (3 Local Authority 1 BACES 1 Outdoor Clerks)

Leaflets were distributed by letter to all existing Beneficiaries of the organisation listed on the database and the Outreach Project aims, objectives and Activity Plan was distributed by Newsletter 3 Information Boards were set up at the Project site and regularly updated

Reminder telephone calls were introduced and executed and transport arrangements were coordinated along with accompanying staff for Beneficiaries who required access assistance

HOW DID THE SERVICE INVOLVE BENEFICIARIES?

The establishment of a clear Strategic Plan, co-produced with Beneficiaries, provided a framework for successful delivery of services to address the needs identified within the West Balkan community and ensured Project targets and outcomes were successfully achieved.

Regular consultation opportunities through focus and network groups and an open approach to feedback ensured Beneficiaries participation in all stages of planning activity. A Steering Group was established with representatives for each activity elected by Beneficiaries themselves and a full Activity Plan was co-produced with opportunities for regular review.

Beneficiaries' feedback, both written and verbal, reports overall satisfaction with the consultation opportunities provided. Beneficiaries reported that their comments and suggestions are heard and "taken on board". They also understood when decisions were reached which were challenging or where a compromise was needed due to resource or organisational issues.

EVALUATION FINDINGS

WHAT SERVICE PARTNERS HAVE BEEN INVOLVED?

Service partnerships have been key to successful Outreach Project delivery. From shared learning to practical support, communication with wider partners has enriched opportunities to support service delivery and ensured cost effectiveness.

Service Partners have included:

- Advice UK
- West London Black Minority Ethnic and Refugee Advice Network (BMER)
- Pan London BMER (BAN) networks
- CVS Brent
- Integrated Neurological Services (INS) (Hounslow)
- Brent Mind
- LB Brent (Adult Social Care)
- Brent Adult and Community Education Service (BACES)
- Bosnian Network Groups UK

WHAT IS THE MONITORING FRAMEWORK?

- The Business Plan
 - The Budget Plan
 - The Business Continuity Plan
 - The Project Activities Plan
 - The Project Steering Group
 - Individual Assessment Plans with Objectives, Milestones and Timescales
 - Equalities Monitoring Format
 - Feedback Questionnaire Format
 - Focus Groups structured format
 - Appropriate Case Histories
 - Use of Advice Pro data system
-

EVALUATION FINDINGS

HOW HAS FEEDBACK BEEN COLLECTED? (SOFT OUTCOMES)

Feedback from Beneficiaries has been collected through the use of:

- Questionnaires
- Focus Groups
- Appropriate Case Histories
- Network meetings with Service Partners

WHAT FEEDBACK DATA IS AVAILABLE? (HARD OUTCOMES)

Quantitative data is available on all Services and Activities delivered as follows:

- Data entry on the Advice Pro data system
- Attendance numbers at all Activities collected (diary and log in data)
- All Service Users are recorded (Enrolment Forms)
- All Equalities information is recorded (Equalities Feedback Forms)
- All returned Feedback forms are recorded
- Income and Expenditure is recorded and budget planning and monitoring is in place
- All recorded data is reviewed and monitored on a quarterly basis (Enrolment Forms/Assessment Forms/Case Records) and formal reporting is in place to the Board of Trustees

WHAT WERE THE CHALLENGES?

- Retaining existing funding
 - The development of new funding streams
 - Securing appropriate matched funding to supplement Big Lottery Fund provision to Project end (2016)
 - Responding to Beneficiaries requests e.g. to reorganise Fitness Activities separately for Men and Women
 - Prioritising office equipment needs
 - The development of new funding partners beyond 2016
 - As a small organisation statutory and local priorities can make it difficult to present sufficient impact to attract relevant funding streams
 - A small staff group can mean reliance on the same people to complete significant tasks and this can present a risk to the business. Building capacity is an issue overall and separation of tasks e.g. administration and funding generation, can assist long term goals
-

EVALUATION FINDINGS

HOW DID LEARNING INFORM PRACTICE?

- BHCAC has demonstrated a continuous cycle of Review and Consultation with Beneficiaries and Partners which has been reflected in planning and development during the period of service delivery as follows:
 - Development of improved assessment of needs formats
 - Amendment of service Activities to address emerging identified needs
 - Improved systems of data collection and analysis
 - Increased Partnership working to address funding shortfalls
 - Feedback questionnaire Review (recommendation mid-term evaluation)
 - Volunteer Administrator (part-time) engaged June 2015 (recommendation mid-term evaluation) Impact monitoring is in place
-

Conclusions

- BHCAC has successfully delivered Outreach Project outcomes as planned
- Increased promotional activity and extensive partnership development has delivered both an increase in uptake of Project services and additional unexpected activities which has allowed the Project to exceed targets. This is an unexpected but welcome development; however review of capacity will need to be undertaken to ensure a balanced approach across all service activity streams.
- Budget is on track and closely monitored. Annual monitoring reports are provided to relevant Funders
- Co-production workstyle provides increased opportunities for development and underpins all work streams.
- Partnership working is evident and identifying new partners who can support the Project aims continues to be a priority.
- Continued efforts to identify new funding streams are evident.
- As a small organisation, BHCAC faces significant challenges with regard to securing new funding streams. In addition, Funders often find it difficult to contribute to core costs and larger organisations tend to benefit more regularly from statutory funding sources.
- BHCAC provides services to a community which is identified as “hard to reach” and the organisation continues both to work with partners and to capitalise on any local offers with regard to personnel or training initiatives which might benefit service delivery, thereby reducing costs as far as possible.
- Identifying trends and building capacity remains a key priority and the addition of administrative staff support funding, even on a part time basis, would release the Project Manager for more strategic work and increase potential to locate new funders willing to contribute to both revenue and capital costs in the longer term.
- BHCAC has demonstrated a commitment to reflection and learning utilising all available sources e.g. Beneficiaries feedback, training initiatives, partnership discussion and in addition monitors the external and changing social care environment to identify trends and changes in systems which might impact Beneficiaries’ needs. BHCAC has refined monitoring systems during Project delivery to ensure accurate information informs planning and has responded to changing needs by amending planning appropriately.
- Reflection has identified delivery of services to the community as comprising 3 phases:
 - Phase 1 Engagement: Beneficiaries and Partners
 - Phase 2 Development: Improved Quality of Life
 - Phase 3: Resilience: Building Independence and Sustainability (funding applied)

Recommendations

1. To review funding strategy (short/medium/long term) to ensure sustainability
2. To review and develop strategy for inclusion of 2nd generation participants in Project activities
3. To review how further IT support/input might assist in the development of future monitoring formats
4. To continue to develop practice and activities which promote independence, build resilience, improve quality of life and support access to wider community resources and preventive services

CONTACT INFORMATION

Contact Information

LILY LAWSON
INDEPENDENT CONSULTANT

Tel: 07941272418

lilylawson@btinternet.com

Company Information

Moylen Associates
Social Care Consultancy

Tel: 07941272418

lilylawson@btinternet.com

Appendices 1-4

APPENDIX 1

INVESTORS IN PEOPLE REPORT APRIL 2015

APPENDIX 2

ADVICE QUALITY STANDARD AUDIT REPORT
AUGUST 2015

APPENDIX 3

FEEDBACK QUESTIONNAIRE FORMAT

APPENDIX 4

LIFE STORIES/CASE HISTORIES



INVESTORS IN PEOPLE REPORT

Bosnia and Herzegovina Community Advice Centre

Presented by Sharon Smith

Investors in People Specialist

On behalf of Investors in People South of England

(Prepared date: 2nd April 2015)

(Project number: 14/ 03660)

Investors in People South of England is delivered
by Grant Thornton UK LLP under License from UKCES
E: enquiries@IIPsouth.investorsinpeople.co.uk
W: <http://IIPsouth.investorsinpeople.co.uk>
T: 020 7728 3456

30 Finsbury Square
London
EC2P 2YU
Company Reg. no.: OC307742

APPENDICES 1-4



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■ Introduction

Bosnia and Herzegovina Community Advice Centre (BHCAC) achieved recognition as an Investor in People in 2005, this report contains the feedback from a review of the IIP standard at core level.

Investors in People is a powerful business development tool that challenges and enhances the performance of leaders and managers. It helps to create high performing environments which boost the quality of external delivery and organisational performance ensuring that the investments made in developing people are translated into business performance improvements.

The assessment was conducted on 27th March 2015. From a total of approximately 23 trustees, staff and regular volunteers, feedback was gathered through 8 individual interviews, interviewees included all staff, and a selection of volunteers and trustees.

Established in 1997, BHCAC is a unique charity that focuses on the needs of elderly, disabled and traumatised people from the West Balkans which includes people from Bosnia and Herzegovina. The organisation offers a wide range of services and activities to improve the lives of people from the region, supporting individuals to: integrate more fully into British society, develop support networks, improve their own health and wellbeing, contribute to their local community and develop additional skills such as speaking English in addition to celebrating their own culture.

The organisation provides support to in excess of 1700 service users a year, the vast majority of which are elderly and disabled. BHCAC is managed by a board of trustees of 8, and employs 2 staff members and 1 freelance worker. A total of 12 volunteers are involved in the social club, events and fitness classes, administrative tasks, interpreting and accompanying beneficiaries. The charity operates from premises in the London Borough of Brent, providing the majority of its services in north and west London, but engaging with beneficiaries across the city.

In addition to an assessment against the IIP Standard at Core level, it was agreed that the project would look at the impact of current practices on the priorities of the organisation and identify areas for further development and improvement. An additional six evidence requirements from the wider framework, around the key focus area of values were also assessed. Evidence was found to support the achievement of all six. Please see the table below for further information;

APPENDICES 1-4

Business Goal or Priority	Key areas from the Core Standard	Additional content from the Wider framework
Values	<ul style="list-style-type: none">• Internal communication systems work effectively• Effective Leadership and Management• Business strategy	<ul style="list-style-type: none">• A set of core values are in place that support the purpose and vision. (1.7)• Managers and people understand the values and what this means to the way they are expected to manage

APPENDICES 1-4



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		and work. (1.13/ 1.19) <ul style="list-style-type: none">• The values are at the heart of the strategy and the way the organisation operates. (1.11/ 1.17/ 1.23)
--	--	--

In agreement with the client the report has been written in the following format:

- Strategic Planning, Review and Evaluation
- Leadership and Management
- Motivation, Empowerment and Involvement
- Learning and Development
- Managing performance

I would like to thank all interviewees for taking part in the exercise and for their constructive, open and honest feedback. I would also like to acknowledge everyone within the organisation for the warm welcome afforded me and finally, special thanks goes to Sadida Trozic for co-ordinating all stages of the assessment, providing information and ensuring that the interview day went smoothly.



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■ Executive Summary

BHCAC is a positive and forward thinking charity that is committed to improving the lives of the Balkan community in London, with clear plans and identified priorities to maintain and improve the services provided. The passion and commitment of staff, trustees and volunteers was very evident during interviews - people are clearly loyal, hard-working, and dedicated to what they do.

BHCAC has a clear mission, vision, objectives and values and a 3 year business plan (2015-18) with defined objectives and goals. Achievement is measured through; service delivery targets, organisational objectives and goals. Members of staff have individual objectives linked to their own work area and volunteers clearly understand the expectations of their role. This means that everyone is clear about the goals and priorities of the organisation and how they personally contribute to its success.

The provision of learning and development for staff and volunteers to meet current and future requirements is closely linked to the aims and objectives of the organisation. Specific activity is also planned to meet the changing needs of service users, improve the effectiveness of the organisation and to meet individual development requirements. Development for staff members is discussed at supervision and appraisal meetings. A range of both internal and external activity takes place. The effectiveness of learning and development is generally reviewed through performance management and feedback forms, and this feedback informs the development of future plans.

The expectations of people managers are clearly understood and they are reinforced as part of the performance management process. People working at the centre, both staff and volunteers, spoke very highly of the excellent support received from the Outreach Project Manager and also their fellow colleagues and service users.

Communication is effective throughout the organisation. A range of meetings at all levels take place on a regular basis where the plans, performance and strategy are shared and discussed with stakeholders. There is also a regular newsletter, much informal discussion and email is widely used.

BHCAC is a very inclusive organisation, interviewees feel that they have a high degree of autonomy in their role; that they are trusted and empowered and involved in day to day decision making to improve the services provided. A number of examples were given of staff being encouraged to contribute new ideas or suggestions for improvement and taking on additional responsibilities.

Due to the continuing difficult economic climate and ongoing cuts to public sector funding, challenges for now and the future remain broadly similar to those at the time of the last IIP assessment, and include;

- Retention of existing funding, and the development of new funding streams.
- Retaining an experienced and highly skilled staff team.
- Continue to develop and enhance the skills and capabilities of the trustees.
- Continue to raise the profile of the organisation.



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■ Areas of Strength

The following is a list of good practice characteristics or features found during the course of the site visits. These are recognised as being of good practice or exceeding the requirements of the Investors in People Standard;

- Strategic planning – Effective review, evaluation and monitoring mechanisms are in place to ensure that the most appropriate range of services are provided for beneficiaries, and that the impact is both measured and quantifiable.
- Culture – A positive and highly inclusive culture which actively seeks input, ideas and views from all stakeholders.
- Communication – effective, regular and clear, and feedback is sought and acted upon.
- Performance management – embedded processes providing effective support for staff and volunteers.
- Empowering – people feel trusted, have a sense of ownership and are empowered to take on additional responsibility.

■ Continuous Improvement Suggestions

The development suggestions provided below are intended to strengthen areas of good practice that are already taking place within the organisation together with ideas to develop areas for improvement. Specific areas that could be developed further include;

- Succession planning – There is currently heavy reliance on the knowledge, skills and experience of the centre manager. Future strategy should consider ways to develop further leadership capability within the organisation. Consider also ways to engage with, and involve, younger members of the community.
- Trustees – Continue to develop the board of trustees by ensuring all take advantage of local authority training opportunities and that recruitment processes encourages a diverse mix of skills, age and experience. This will enable the group to work proactively to raise the profile of the organisation and help secure further funding and support via networking opportunities.

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Assessment Findings – How the Standard was met

■ Organisational strategy – planning, review, evaluation and communication

VISION: Our vision is a society in which our beneficiaries have all the opportunities and support they need to live healthy, independent, active, happy and long lives.

MISSION: BHCAC seeks to enhance the quality of life for disadvantaged and elderly people from the West Balkans who arrived in London as refugees in the early 1990s, particularly those experiencing poverty and isolation. The Centre supports their diverse needs through the provision of welfare, educational and cultural services that welcome all people from the West Balkans.

Strategic planning within the organisation is led by the Outreach Project Manager and the board of trustees. BHCAC is very much member led and all work and activities contribute directly to support the achievement of the key objectives and goals. Consultation and diagnostic activity, via surveys and interviews takes place on a regular basis to determine the current and future needs of the beneficiaries.

A draft 3 year business plan is in place for 2015-2018. This was developed following a facilitated strategic planning away day with a range of stakeholders, including staff, trustees, volunteers and service users. Time was spent reviewing and agreeing current and future strategic priorities, reflecting on organisational strengths, opportunities, weaknesses and threats (SWOT, STEEPLE and risk analysis) and taking account of external factors such as partnership activity, changes to public sector provision, funding cuts and new policies.

Targets and measures are in place for each project funding stream. Key organisational priorities are identified as:

Priority 1: *Renew Big Lottery Reaching Communities funding, and develop a viable proposal to explore the potential of social enterprise to deliver and resource BHCAC objectives. We anticipate that the Power to Change programme may resource the initial stages of such work.*

Priority 2: *Using AdvicePro, develop a detailed evidence base that communicates the typical lived experiences and journeys of our beneficiaries, the demands they place on BHCAC, and how BHCAC's current activities fit with what matters to them in their wider lives.*

Priority 3: *Partnership working. To maximise the effectiveness of BHCAC by strengthening existing partnerships and seeking new partnerships and networks that are valuable to our beneficiaries.*

Priority 4: *Core organisational infrastructure: to ensure that the organisation is investing in work that will ensure continuity of service to vulnerable beneficiaries as they age.*

The business plans and information about current performance and priorities are shared with the whole organisation at the Annual General Meeting and staff meetings. People are encouraged to comment and to put forward additional ideas for improvement.

Operational targets associated with specific projects or funding streams are linked to those of the organisation, and are in place for staff. These are agreed through the performance



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management process. As a result, people are clear about their key targets and focus areas and understand how they personally contribute to the success of BHCAC.

An effective cycle of monitoring and evaluation of the services provided is in place, progress is reviewed and discussed during regular meetings; the Board of Trustees meets quarterly and the staff team meet regularly. The Outreach Project Manager provides a report detailing achievement to the board of trustees on a quarterly basis, and also reports outcomes to funders on a regular basis

Performance against individual targets and objectives is reviewed and discussed at the regular staff meetings and supervision sessions. These are useful opportunities to share ideas about performance improvement. Feedback informs the development of future plans.

■ Leadership and Management

BHCAC is led and managed by the board of trustees who have overall responsibility for the organisational strategy and direction. They meet quarterly to review progress and performance and discuss the management reports. The trustees are elected by the beneficiaries at the Annual General Meeting each year.

The Outreach Project Manager has line management responsibility for the staff team and volunteers. Interviewees describes a range of competencies and activities undertaken that ensure people are led and managed well and well supported to perform effectively. Expectations are documented in job descriptions. Key areas include;

- Recruitment.
- Induction, coaching and development for new members of staff and job changers.
- Performance management via supervision and appraisal meetings where targets and objectives are agreed, performance is reviewed and developmental activity is discussed and agreed.
- Provide ad-hoc guidance and support as necessary.
- Be available.
- Manage staff and volunteer resources.
- Provide effective communication and regular updates on progress against goals, targets and objectives.

Staff and volunteers feel very well supported by the manager, some of the very many positive comment included;

“As a volunteer I receive good support from the manager who gives me lots of positive feedback and useful suggestions and ideas to improve my work.”

“I can always ask anyone if I need advice or guidance, not just the manager– we know each others’ strengths and work well as a team and support each other.”

The manager does provide leadership but it feels more of an open relationship – not hierarchical, I feel we are all treated equally.”

“The manager find out what interests and skills us volunteers have and encourages us to use them in our work at BHCAC. This means that we all enjoy what we do and can share our interests with others.”



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Leadership capability continues to be developed through a range of training for the manager and board of trustees including: Business planning, trustee role and responsibilities, legal responsibilities and partnership work.

People describe improvements to the leadership and operational effectiveness of BHCAC and the positive impact on performance:

“The new shared drive means that we can all access and update client records. This provides a much more complete picture of our clients.”

“We make very good use of our resources which has helped us to save money and time. For example we now produce our newsletter entirely in-house and our centre is open 7 days per week.”

“Our service provision is much more streamlined.”

■ Motivation, involvement and empowerment

VALUES: BHCAC is guided by the following set of organisational values:

Enabling – we enable our beneficiaries to live independently and exercise choice

Influential – we draw strength from the voices of our beneficiaries, and ensure that those voices are heard

Dynamic – we are innovative and driven by results and constantly deliver for our beneficiaries

Caring – we are passionate about what we do and care about each individual

Expert – we are knowledgeable, experienced, authoritative, trusted and quality orientated

The culture within BHCAC is welcoming, encouraging and supportive and is a strength of the organisation. People clearly feel very committed to working with the beneficiaries and derive a great deal of satisfaction from what they do. As a result of this, and the common understanding of the purpose and objectives of the organisation, everyone feels valued, empowered and encouraged to contribute. Some of the many positive comments describe the culture of the organisation as;

- Welcoming and friendly with helpful colleagues
- Collaborative – sharing ideas and good practice
- Extensive consultation of all stakeholders
- Good induction and support for new members of staff and volunteers
- Supportive at all levels, a good level of flexibility is offered to individuals
- Excellent team work.

“It’s like a second home to me, I always feel welcome, appreciated and well supported.”

People understand and could describe the values and they clearly are fully embedded in the way the organisation, and individuals, operate.

The culture of the organisation is very inclusive and is a strength. Trustees and managers describe an open environment, with a culture of involvement and empowerment, where people are encouraged to contribute ideas to improve performance. Staff and volunteers said that they are happy to express their views and feel that their ideas are welcomed. Several people gave



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examples of consultation and open dialogue, for example during; the planning away day, staff meetings, supervision meetings, performance management discussions and informally through day to day discussions.

“At the away day, we discussed the future of BHCAC, what is going well, what the challenges are, and what the needs are now, and are likely to be for the future. We all had a chance to contribute and put forward our ideas.”

BHCAC is very much a member led organisation and puts a high priority on understanding the needs of their service users. Feedback is sought on a regular basis on all services and information provided through surveys and discussion, and support and future activities are tailored to reflect changing needs. A good example of this is the increased focus on health, wellbeing and physical activity to reflect the increasingly complex health needs of the service users as they are ageing.

The leadership team encourages a culture of involvement and empowerment, where people are encouraged to take ownership and responsibility and are involved in decision making. Several interviewees gave examples of projects where they had taken the lead in a particular area or programme.

“I am the diabetes champion.”
“I am responsible for health and safety.”

Communication at BHCAC is effective, updates are shared with members of staff in a variety of ways including;

- Regular staff meetings.
- Trustee meetings
- Annual General meeting
- Newsletter
- Email
- Informal daily discussion

“The newsletter is really useful for staff, volunteers and service users – we use it to provide updates on a wide range of topics from changes to government policies such as welfare or universal credits, NHS updates, and then BHCAC events, activities and meetings.”

Volunteers also say that communication is good and that they receive the newsletter, regular updates by telephone or face to face and are invited to the annual General Meeting.

■ Learning and development

Learning and development activity at BHCAC is planned to support achievement of the organisational objectives and targets as identified in the current Business Plan, taking into account the evolving needs of service users, external factors such as changes to government policy, and also to provide tailored support and development for individuals at all levels.

To ensure that BHCAC provides appropriate and high quality advice, information or guidance on a range of issues such as social services, health, housing or isolation, structured support and development for staff, volunteers and trustees is in place. This is summarised in the



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training plan which describes expected outcomes and links to the business objectives which are:

- *To provide generalist information, advice and advocacy services*
- *To organise classes and workshops that promote exercise and healthy living*
- *To gather and disseminate information that is of interest to beneficiaries*
- *To organise social and cultural events that promote positive interaction with wider British society*
- *To organise social and cultural events that promote positive expression of the language and culture of beneficiaries*
- *To provide volunteering opportunities for beneficiaries to develop their skills, confidence and self-esteem*

Funding for training activity continues to be severely limited, however the organisation continues to be resourceful and innovative in identifying opportunities for free of charge or low cost activity. This includes taking advantage of training provided by the local authority, and training arranged through partner organisations such as Advice UK who offer a range of training for trustees including: business planning, roles and responsibilities, legal requirements and partnership work.

The organisation has also invested in training to develop in-house expertise and skills to reduce overheads and increase efficiency, for example; the newsletter print training has meant that the BHCAC newsletter can now be produced entirely in-house saving money, time and improving efficiency

Those completing external training are expected to share the knowledge gained with their colleagues, and in many cases this can also be used to deliver training to beneficiaries. People describe the impact of recent development activity:

“I provide advice to service users so it is important that I am up to date on changes to benefits or laws. I have the opportunity to get all of the training I need, for example, recently I have had training on a new benefit, the Personal Independence Payment, and changes to legal aid and other benefits.”

A range of development to help staff and volunteers to better understand the changing needs of service users has also been delivered. This has included training on mental health, diabetes, dementia and stress and unemployment.

Where funding for external training is not available, the organisation has offered support to individuals by offering flexibility in working days to complete their studies.

“The organisation is supporting me in completing my Law degree by enabling me to change my working hours.”

An effective induction process for new trustees, staff and volunteers is in place. People felt that they were well supported; given a clear overview of policies and procedures, introduced to colleagues, given guidelines and expectations of their role and, where appropriate, planned training or personal development activity.

The effectiveness of learning and development activity is reviewed regularly as part of the overall planning process, and is evaluated in a number of ways such as;

- Progress or achievement against targets and objectives
- Positive service user outcomes



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- Increased operational effectiveness
- Performance management discussions

Many people explain that learning and development activity has directly improved their performance either through adopting more effective practice, improved skills and knowledge or greater confidence. This has in turn delivered a better experience to service users, in many cases directly contributing to improved outcomes. This feedback was reflected in comments from the manager and trustees.

“The training we had on Advice Pro has really improved our efficiency and the way we keep and access our records. It really helps us to demonstrate the impact BHCAC has on our service users to the funders.”

“The stress and unemployment training helped me to understand how someone can lose all self-esteem and feel they have no purpose if they do not work. It also emphasised the positive benefits of having hobbies and interests and I have used this knowledge to encourage and motivate service users to try new things and also to understand the value of things they currently do such as child minding.”

■ Managing performance.

The Outreach Project Manager describes how performance is reviewed and development activity identified through the bi-annual appraisal process and also through supervision meetings, ad hoc discussions and general observations.

People confirm that they have an opportunity to discuss their performance formally at the supervision and appraisal meetings. Constructive feedback to improve performance is an important part of the process and examples were given by both staff and the manager where this has taken place.

“I get a lot of feedback from my manager, for example, I have been given advice and guidance on how to improve my approach to clients.”

“I can speak to my manager at any time – if I had an issue I wouldn’t wait for a formal discussion.”

Expectations of all are clearly defined by job descriptions. People have targets and objectives linked to delivery of their projects and also a training and development plan. Everyone involved at BHCAC is passionate and dedicated to the work they do and they feel that they make a direct contribution to the success of the organisation.

“I feel that I am having a positive impact on the wellbeing of our service users.”

“I think that I help people by enabling them to get access to the services and support they need.”

Trustees and the Manager describe a range of both formal and informal methods that they demonstrate appreciation and thanks for the contribution of individual members of staff and volunteers. They include; presentation of awards and thanks at the AGM, nominations for external awards, team meetings and social events, praise and thanks, giving credit for specific achievements and encouraging people to take on higher levels of responsibility.



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These were confirmed by members of staff and volunteers. People said that they also felt valued through;

- Time to pursue learning and development activities.
- Development opportunities.
- Being consulted by colleagues and managers.
- Being thanked by colleagues.
- Being thanked by beneficiaries.

“I get a lot of appreciation and thanks from the service users which makes me feel valued.”

“I’ve had a lot of support and flexibility to pursue my studies.”

“I get regular thanks from my manager.”

“As a volunteer, I feel that my work is appreciated through being invited to social events.”

“The training I’ve had has improved my skills and confidence.”

“I get a lot of job satisfaction and feel I make a difference to peoples’ lives.”



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■ Recommendation and next steps

Having carried out the assessment process in accordance with the guidelines provided for Investors in People Specialists by Investors in People – United Kingdom Commission for Employment and Skills, the Investors in People Specialist is totally satisfied that **Bosnia and Herzegovina Community Advice Centre** meets the requirements of the Investors in People National Standard.

Investors in People accreditation is granted indefinitely, with a proviso that an interaction is undertaken within 18 months of accreditation and a full assessment takes place no greater than 3 years apart. Assessments can be undertaken at any time and more frequent assessments are recommended to maintain levels of good practice and continuous improvement.

The organisation should discuss the timing of the next assessment with their Investors in People Specialist, using the Improvement Planning Meeting to agree the best strategy for future use of the Investors in People framework.

■ Customer Satisfaction Questionnaire

Both the Investors in People Specialist and Investors in People South of England would welcome your feedback on this assessment and you will shortly be supplied with a Client Satisfaction Questionnaire from Investors in People to complete. Particular importance is placed on the feedback given by client organisation's on Specialists, therefore we would very much appreciate it if you would complete the questionnaire.

■ Promoting continuous improvement

We support organisations at every stage of the Investors in People journey, helping them to realise the power of their people, optimise their performance and achieve their full potential. We see Investors in People as the People Partner for sustainable people solutions.

Please contact your Account Manager Pauline Mycock on 020 7728 3456 or email pauline.mycock@iipsouth.investorsinpeople.co.uk to find out more about Investors in People and how we can help your organisation.

Details of the support available to you can be accessed by contacting Investors in People South of England via: -

T: 020 7728 3456

E: enquiries@IIPsouth.investorsinpeople.co.uk

W: <http://IIPsouth.investorsinpeople.co.uk>

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■ **Outcomes table - evidence requirements framework matrix**

Core Standard										
Total number of core evidence requirements assessed - 37										
Total number of core evidence requirements met - 37										
	Indicators									
ERs	01	02	03	04	05	06	07	08	09	10
1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
2	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
3	N/A	✓	✓	✓	✓	✓	✓	✓	✓	✓
4	✓	✓	✓		✓				✓	
5	N/A		✓						✓	
6	✓									

Wider Framework										
Total number of additional evidence requirements assessed - 6										
Total number of additional evidence requirements met - 6										
	Indicators									
ERs	01	02	03	04	05	06	07	08	09	10
4	Core	Core	Core		Core				Core	
5	Core		Core						Core	
6	Core									
7	✓									
8										
9										
10										
11	✓									
12										
13	✓									
14										
15										
16										
17	✓									
18										
19	✓									
20										
21										
22										
23	✓									
24										
25										
26										
27										
28										
29										



Advice Quality Standard

Initial Audit Report

for

The Bosnia and Herzegovina Community Advice Centre

Presented By

Neil Huxtable
Advice Quality Standard Auditor

11 August 2015

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Introduction & Assessment History:

This report has been prepared in relation to the Initial Audit undertaken in connection with the Bosnia and Herzegovina Community Advice Centre's first application for certification under the Advice Services Alliance's Advice Quality Standard. To support this, a Desktop Evaluation of the application was completed on the 23 June 2015. Please refer to the Desktop Audit report for a detailed summary of this process.

I would like to extend my thanks to all those who took part in the audit process for their open and honest feedback about their experience within the Bosnia and Herzegovina Community Advice Centre. I would also like to give special thanks to Sadida Trozic, Outreach Project Manager and Quality Representative for ensuring that the on-site discussions went smoothly. It was a very enjoyable audit that enabled me to catch a glimpse of everyone's interest in their work and dedication to supporting the Bosnia and Herzegovina Community Advice Centre.

Overview of the Organisation:

The Bosnia and Herzegovina Community Advice Centre is a member of the Advice Services Alliance and has its principal office in London NW10. The Bosnia and Herzegovina Community Advice Centre is a not-for-profit organisation and has been offering advice services for eighteen years. The principal funders are the Big Lottery and the London Borough of Brent Council.

The Bosnia and Herzegovina Community Advice Centre currently has 3 advisers/caseworkers and 1 supervisor.

Methodology:

I was able to undertake a conventional assessment in that I undertook an off-site review of the documentation supplied within the initial application. This has previously been summarised within a Desktop Audit Report.

Recommendation:

Having carried out the audit process rigorously in accordance with the guidelines laid down by the Advice Quality Standard, and Recognising Excellence, I am satisfied beyond any doubt that the Bosnia and Herzegovina Community Advice Centre does meet the requirements of the Advice Services Alliance's Advice Quality Standard. Recognising Excellence is asked therefore to endorse this recommendation and formally award Advice Quality Standard certification to the Bosnia and Herzegovina Community Advice Centre.

Auditor Name: Neil Huxtable

Date: 11 August 2015

Assessment Summary:

The Bosnia and Herzegovina Community Advice Centre (BHCAC) is an independent non-profit and registered charity organisation established in 1997. BHCAC aims to improve the wellbeing of refugees from West Balkan living in greater London, through the provision of advice, information and practical support.

The West Balkan community is made up of people from Bosnia and Herzegovina, Serbia, Croatia, Montenegro, Macedonia and Kosovo. Most service users came to the UK as a result of the Balkan conflicts of the 1990s, many of whom are still traumatised by those events.

BHCAC was set up after consultative meetings and forums with service users that identified a lack of statutory services to meet community needs. BHCAC initially provided opportunities for socialising, practical support in interpreting and the completion of official government (both central and local) documentation. The facility complemented the limited services offered by relevant mainstream agencies in operation at the time.

Since then BHCAC has expanded its services considerably to provide information, advice and guidance, outreach work, a fitness for women programme (in conjunction with Brent Adult Education Services), Tai-Chi for men, Yoga as well as a social club, quarterly health and welfare awareness sessions and spring/summer outings. BHCAC also publishes a quarterly newsletter for members of the West Balkan community.

BHCAC is well organised and demonstrates a strong commitment to continuous improvement. The organisation has a clear vision and strong values which pervade all of its activities. It is already accredited against several external quality standards - e.g. Investors in People, PQASSO - both of which overlap to a degree with the requirements of the Advice Quality Standard. BHCAC has demonstrated a very close adherence to the AQS. Moreover it has addressed areas for corrective action identified from the desktop audit and has also addressed corrective actions identified at the on-site initial audit and given at the of the site visit. As a result BHCAC is now fully compliant with all aspects of the standard and has no outstanding corrective actions to take.

Many strengths emerged from both the desktop and on-site audits. Standout features are the competence of the board of trustees and the professionalism of the outreach project manager and her colleagues and volunteers. Planning, a seamless service based on close networking with related support organisations and very comprehensive quality policies and procedures all confirm the excellence of the services provided. High levels of client satisfaction and the absence of any complaints in recent years underpin the effectiveness of BHCAC in the services it provides its beneficiaries. Confirmation of AQS accreditation will further endorse the effectiveness and responsiveness of this admirable organisation.

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Advice Quality Standard Report Principal Findings:

Name of Bosnia and Herzegovina Community Advice Centre	The Bosnia and Herzegovina Community Advice Centre	
Number of Offices	1	
Main Office Address: Rear of 108 High Road, Willesden, London NW10 2PP	Telephone Number: 020 8459 4201	Quality Representative: Sadida Trozic, Outreach Project Manager

Compliance Summary:


Area of Standard	No. of Areas of Good Practice	No. of Areas for Improvement	Instances of Corrective Action
A. Access To Service	2	-	1 (now closed out)
B. Seamless Service	1	-	2 (now closed out)
C. Running the Bosnia and Herzegovina Community Advice Centre	1	-	-
D. People Management	2	-	-
E. Running the Service	1	1	2 (now closed out)
F. Meeting Clients' Needs	1	1	1 (now closed out)
G. Commitment to Quality	1	-	-

Auditor's Overall Recommendations

	Yes / No
Award Certification:	Yes
Documentary evidence of corrective action to be sent to the auditor within 28 days of the last on-site date:	No
Suspend Certification for a period of 6 months:	No
Deadline for receiving corrective action is:	No

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Auditor Declaration

Name of awarding assessment body:	Recognising Excellence		
Lead auditor's declaration:			
<p>I confirm that I have had no other involvement with the implementation of the Advice Services Alliance's Advice Quality Standard at the Bosnia and Herzegovina Community Advice Centre apart from the audit and have carried out the audit on behalf of the above-named accredited body.</p> <p>For each of the Advice Quality Standard requirements, I have considered whether enough evidence has been provided by the Bosnia and Herzegovina Community Advice Centre in order to gain Advice Quality Standard certification.</p> <p>I confirm that the content of this report has been discussed with the Bosnia and Herzegovina Community Advice Centre.</p>			
Signature (or tick box):			
Print Name:	Neil Huxtable	Date:	11/08/15

Advice Quality Standard Report Audit Details

Onsite date(s)	11/08/15
Duration of audit (days) including review of Quality Manual	2 days
Name of auditor	Neil Huxtable
Total cost payable to certified body	£1100 + VAT

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Type of Audit:	Full Initial Audit
Advice	Yes No []
Advice with Casework	Yes [] No []
Advice with Casework and Telephone Services	Yes [] No []
Advice with Telephone Services	Yes [] No []

Other Quality Standards

Advice Quality Standard only:	Yes [] No
Lexcel:	Yes [] No
ISO9001:2008	Yes [] No
Investors in People:	Yes No []
Other (Please provide details):	PQASSO Levels 1 & 2

Audit Statistics

Total number of advisers / caseworkers:	3	
Number of advisers / caseworkers in sample:	2	
Total number of open files:	166	
Number of case files in sample:	Direct Access 9	Via Caseworker 0

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A. Access to Service <i>This covers planning the service, making others aware of the service and non-discrimination.</i>	
Evidence Submitted	
A1.1	BHCAC has a comprehensive Service Plan for 2015 – 2018 that clearly describes the aims, mission, values and objectives of the organisation. Objectives are in detail for the next 12 months and also for a further 2 years thereafter. The trustees formally review the service strategy on an annual basis. The next review due is the 25/03/16
A1.2	The plan provides an organisation profile and community needs assessment, details of the advice service delivery and the resources required. In addition, the plan provides information on the management structure (trustees and staff), opening hours and the funding strategy
A2.1	The plan describes how BHCAC promotes and markets its services using a variety of means including a website, information leaflets and sharing information about its services and activities with local agencies and community organisations, including GP surgeries and other networks. Leaflets and newsletters are also produced in the Bosnian language to ensure they are fully accessible to the communities BHCAC serves. The project manager ensures that publicity information and entries in directories are updated and made available to other agencies
A2.2	The project manager confirmed that the AQS logo will be displayed on the website, promotional literature, letter headed paper and email correspondence as well as within the centre itself
A3.1	BHCAC has a comprehensive equal opportunities policy which states that the organisation <i>'is committed to serve all people from West Balkan, particularly refugees and their dependants in London, who are in condition of need, hardship or in distress and are in necessitous circumstances irrespective of their age, disability, religion, sex, sexual orientation or race'</i> . The policy complies with all relevant legislation including the Equality Act 2010 and the 9 protected characteristics contained therein
A3.2	The signposting and referral procedure includes examples of where BHCAC will signpost and refer clients. Circumstances where this will occur include where the subject of the client's enquiry does not fall within the range of subjects the organisation can advise on; advisers' workloads are too heavy and no appointment can be made; and where there is a potential conflict of interest. A document entitled <i>'When the BHCAC cannot provide the service'</i> explains BHCAC's approach to signposting and referral in greater detail.
Areas of Good Practice	
<p>A very detailed service strategy and business plan that satisfies all aspects of the Advice Quality Standard. The plan contains STEEPLE and SWOT analyses and a comprehensive risk assessment</p> <p>A distinctive vision and set of values that pervade all of BHCAC's activities. BHCAC's vision is to create - <i>a society in which our beneficiaries will have opportunities and support to live healthier, independent, active, happy and longer lives.</i></p>	

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<p>Underpinning its vision BHCAC's values are:</p> <ul style="list-style-type: none"> • Enabling - we enable our beneficiaries to live independently and exercise choice. • Influential - we draw strength from the voices of our beneficiaries and ensure that those voices are heard • Dynamic - we are innovative and driven by results and constantly deliver for our beneficiaries. • Caring - we are passionate about what we do and care about each individual. • Expert - we are knowledgeable, experienced, authoritative, trusted and quality orientated.
<p>Areas for Improvement</p>
<p>None identified</p>
<p>Areas requiring Corrective Action</p>
<p>A3.2 There is a need to include within the signposting and referral procedure a reference to the specific (i.e. West Balkan) client groups to whom the organisation provides services to satisfy the AQS requirement that states '<i>Where organisational principles or charter only allow the service to be offered to specific client groups, this should be reflected in the signposting and referral procedures</i>'</p> <p>An amended signposting and referral policy has been submitted to the auditor following oral feedback at the end of the on site audit that addresses this matter. Accordingly this corrective action can now be closed out</p>

<p>B. Seamless Service</p> <p><i>This covers signposting and referral to other agencies and awareness of any appropriate CLS partnership arrangements.</i></p>	
<p>Evidence Submitted</p>	
<p>B1.1</p>	<p>The advice service plan and website www.bhcac.org.uk clearly describe the services BHCAC provides. In addition the BHCAC publishes information and guidance leaflets to promote the organisation in both Bosnian and English. The advice centre is open to service users 4 days a week via the drop in and appointments services. The organisation also offers an outreach and home visit service by appointment to housebound clients</p>
<p>B1.2</p>	<p>The office diary is used to record appointments (which usually follow on from an initial drop-in consultation). Service users sign in on appointment. Where clients are unable to attend an appointment a note of this is made in the diary and a new date is arranged. Whilst attendance and non-attendance is monitored and reported upon to the trustees the project manager has confirmed that no significant trends have arisen from non-</p>

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B1.3	attendance at meetings that would highlight any issues relating to the nature of services provided A signposting and referral procedure exists and is in effective operation. Staff interviewed were able to differentiate between the circumstances where signposting and referral would apply in accordance with the procedure
B1.4/ B1.5	BHCAC has not to date had any occasion to refer clients to third parties. However should such circumstances arise, then a record thereof would be maintained
B1.6	The signposting and referral procedure confirms that clients will be signposted if the subject of the client's enquiry does not fall within the range of subjects the organisation can advise on; if advisers' workloads are too heavy and no appointment can be made; or in circumstances where there is a potential conflict of interest
B1.7	The referral procedure describes the practical steps to be taken to identify appropriate service providers taking into consideration language needs; disability access needs, location and the client's ability to travel, cost to the client, whether the organisation holds the Advice Quality Mark or other quality standard as well as BHCAC's past experience of the organisation
B1.8	Whilst BHCAC maintains information on third party providers, there is a need to have access available to the Advice Quality Standard Directory when signposting and referring clients to other agencies
B1.9	The signposting and referral procedure states that in most cases BHCAC will keep supporting a client, even when part of the case has been transferred and that if nothing has been heard from a client for two months after referral, a standard letter will be sent, asking for feedback on the case and the service provided by the third party
B1.10	BHCAC was able to provide details of clients' experience following signposting during the course of the on-site audit
B1.11	The signposting and referral procedure states that any costs involved on signposting or referral should be communicated to the client beforehand
B1.12	The signposting and referral procedure states that all relevant client papers will be copied and forwarded to the new agency on signposting or referral
Areas of Good Practice	
Very effective networking including active participation in the West London Advice Network and the London Borough of Brent's CVC network to ensure clients receive a seamless service on signposting and referral	
Areas for Improvement	
None identified	
Areas requiring Corrective Action	
B1.3 A reference to cost implications should also be emphasised in the ' <i>How to make a referral</i> ' section of the signposting and referral procedure as it does in the description of how to signpost. An amended signposting and referral policy has been submitted to the auditor following oral feedback at the end of the on site audit that addresses this matter. Accordingly this corrective action can now be closed out	

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B1.8 There is a need to have access available to the Advice Quality Standard Directory when signposting and referring clients to other agencies

An amended signposting and referral policy has been submitted to the auditor following oral feedback at the end of the on site audit in relation to this matter. Accordingly this corrective action has now been addressed and can be closed out

C. Running the Bosnia and Herzegovina Community Advice Centre

This covers the roles and responsibilities of key staff and financial management.

Evidence

C1.1	The service strategy contained within the business plan describes in detail how the service is organised. Promotional leaflets and the website also describe the services provided together with details of service users and contact points. BHCAC also publishes on line in Bosnian a regular newsletter
C1.2	The advice service plan 2015-2018 and the organisation and management document provide clear descriptions of how the service is organised. Key staff and their areas of responsibility are also identified. The project manager is designated as the person responsible for the application of the AQS within the organisation
C1.3	A board of trustees comprising a chair, vice chair, treasurer and secretary and other members are legally responsible for the organisation. They oversee financial planning, risk management and project delivery, and for setting and reviewing BHCAC's overall strategic direction. The board ensures that the organisation operates within the scope of its objectives as a registered charity. Through line management arrangements, controls, policies and procedures they monitor and supervise the work of paid members of staff and volunteers. The project manager reports directly to the chair on a monthly basis and quarterly to the trustees. As a membership organisation, trustees are nominated and elected at the annual general meeting. All board members are independent representatives. Funders are not represented on the board
C1.4	BHCAC is a member of AdviceUK
C2.1	Client feedback is collected throughout the year. In June each year prior to the AGM, BHCAC conducts a full client survey as part of the annual review of services. BHCAC also reports biannually to the Big Lottery, its principal funder
C2.2	Continuous monitoring and regular reporting to the chair and board of trustees is undertaken to assess the effectiveness of the services BHCAC provides to its clients
C2.3	Information gathered through client feedback and analyses of services enables the organisation to take strategic decisions about the services it provides and where improvements and new services could be made available
C3.1	The board of trustees have overall responsibility for ensuring that the organisation has appropriate systems of financial control in line with the BHCAC's financial policy and procedure. The board has the responsibility for maintaining appropriate accounting

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C3.2	systems and records BHCAC provided a copy of their financial statements for the year ending 31 st March 2014 (carried out by Groman & Company Chartered Accountants) as evidence of financial review by an independent source
C3.3	The treasurer and project manager provide a monthly financial report for the board of trustees to enable trustees to monitor the ongoing financial performance of the organisation
C3.4	BHCAC has professional indemnity insurance with VSC Insurance (policy no. VCSP1 00406). The indemnity limit is £250,000 and expires on 31 March 2016
C3.5	The financial policy and procedure states that a financial monitoring report reflecting total project income and expenditure is prepared each quarter. An explanation of significant variances accompanies the financial monitoring report and a note thereof is incorporated in the board minutes
C3.6	The service plan includes a SWOT analysis that has helped BHCAC develop its current and future strategies. The plan also includes a risk analysis that identifies all risks to the organisation, their probability and possible impact and how risks are managed
Areas of Good Practice	
The decision making and organisational structure document is a comprehensive description of how BHCAC functions. It describes in detail the roles and responsibilities of trustees and how they are elected. The document also describes the roles of staff and how responsibilities of the board are delegated within the organisation	
Areas for Improvement	
None identified	
Areas requiring Corrective Action	
None identified	

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D. People Management	
<i>This covers equal opportunities for staff, training and development, supervisors and supervision and casework criteria.</i>	
Evidence Submitted	
D1.1	The equal opportunities policy includes staff recruitment and has been developed to ensure that recruitment is fair and effective. The policy contains measures to combat discrimination and to ensure the widest possible response to any employment vacancy. Selection for employment, promotion and training is undertaken on the basis of aptitude and ability
D1.2	The recruitment and selection procedure describes in detail the process for recruiting and appointing staff. Person specifications note the skills, knowledge and experience required for posts advertised and is used as a basis for shortlisting and interviewing candidates for employment
D2.1	The staff and volunteer induction policy and procedure describes how the organisation <i>'will ensure that new staff and volunteers are provided with a comprehensive induction into the organisation and their role within it. Staff will receive full support from the Line Manager and Trustees during their induction'</i> . An induction checklist makes reference to terms and conditions of employment; BHCAC's mission and objectives, policies and procedures, training opportunities and how the performance management system works
D2.2	BHCAC's appraisal scheme is designed to recognise achievement and development potential by identifying skills, both apparent and latent; acknowledging successful performance; assessing the effectiveness of knowledge gained and training undertaken; as well as identifying interests staff have that may be of benefit to the organisation itself. Each member of staff has an appraisal every twelve months, usually with a review of progress in relation to agreed objectives taking place after six months. The appraisal process is underpinned by the supervision policy which states that <i>'BHCAC recognises the value and importance of providing regular, high quality managerial supervision to all of its paid staff, office-based volunteers and trainees. BHCAC is committed to ensuring that all supervisors have suitable experience, support and training to deliver effective supervision. Where this is not the case, BHCAC will send the supervisor on formal training before s/he starts to lead supervision sessions'</i> . Supervision takes place every 4 - 6 weeks.
D2.3	The training and development policy ensures that all staff receive appropriate training to maintain and enhance their professional competence. The policy encourages staff to take ownership of their development needs. The policy also encourages them to keep up to date with current legal issues and tactical approaches in service provision
D2.4	Training and development plans are in place for each individual and are updated at supervision meetings on the basis of any new needs identified. Training records are maintained for all staff and were examined as part of the on-site audit
D3.1	All staff interviewed were able to describe clearly their areas of responsibility and

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D3.2	contribution to BHCAC. All have documented job descriptions as set out in the 'matching skills of staff to their roles' document The matching skills of staff to their roles document aims to ensure that advisers have the skills and competencies necessary to deliver the quality and levels of advice as defined by BHCAC. This is achieved through detailed job descriptions and person specifications; induction; supervision and appraisal; a training needs analysis, ongoing observation; monitoring of enquiry records; and attendance at team meetings
D3.3	Staff interviewed confirmed that they would inform their supervisor if a case were beyond their level of competence. The close-knit working relationships between staff, volunteers and the project manager ensure that all cases and enquiries are dealt with competently and professionally
D3.4	BHCAC makes use of several reference manuals and legal updates in support of the advice it provides its clients. These include CPAG manuals, the Rights Net website (www.rightsnet.org.uk), CABx and Shelter newsletters as well as updates from Advice UK, DWP and the Ealing Advice Forum. Clients are kept informed of changes in the law and entitlements to benefits via BHCAC's regular newsletter
D3.5	The close contact between the project manager, staff and volunteers ensure that everyone associated with the organisation is kept fully informed of any changes in regulations and case law which may impact on clients' entitlements
D4.1	The project manager satisfies all four criteria set by the AQS for effective supervision
D4.2	The project manager is the only supervisor within BHCAC
D4.3	The 'allocation of enquiries' document describes how clients needing a casework service will be offered an appointment and have an allocated advice worker, dependent on the area of law and case load of the advisers concerned
D4.4	BHCAC's supervision system is tailored to the skills of individual employees and volunteers. When a new staff member, trainee or office-based volunteer takes up post, a supervisor and line manager will be identified immediately. All new staff receive a supervision session within 6 weeks of their start date. During the 6-month probationary period, staff receive supervision every 4 weeks
D5.1/ D5.2	The requirements for caseworker and supervisor experience do not apply as the organisation is seeking 'advice only' accreditation
Areas of Good Practice	
<p>Very thorough records of staff learning and development. Training records note the title of the training event, training objectives, methods of training provided, costs, duration, start and completion dates of training and their link to business plan objectives</p> <p>Publication of quarterly newsletters to keep clients and members of the West Balkan community informed of local initiatives and changes in legislation and regulation that may be of relevance and benefit</p>	
Areas for Improvement	
None identified	

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Areas requiring Corrective Action

None identified

E. Running the Service

This covers client information and case management, independent review of files and feedback to advisers.

Evidence Submitted

E1.1	All client records both in electronic format via the AdvicePro file management database and in hard copy were available for auditing purposes
E1.2	AdvicePro enables all electronic case files to be easily identified and located. Hard copy files are kept in secure cabinets and are stored in alphabetical order
E1.3	The conflict of interest policy is provided in Bosnian and English. The aim of this policy is to ensure that the organisation's services are impartial, independent and unbiased
E1.4	The file management and case recording procedure makes reference to key dates and how they are to be recorded in case records, in the advisor's diary and in the central key date diary. Examples of key dates include deadlines for seeking reasons for decisions in respect of benefits and housing entitlements, deadlines for requesting a decision review, making an appeals submission and the dates of tribunal and court hearings
E1.5	All hard copy case files examined were orderly and well maintained. Advice Pro electronic files follow a set pattern in every case and are accessible and logically constructed
E1.6	Caseworkers maintain an electronic record of all interventions and activities undertaken on behalf of clients via the AdvicePro case management system. Hard copy records adopt a similar format for recording case progress
E1.7	The project manager confirmed that appropriate information would be made available to the Advice Services Alliance in order to assess the performance of the Advice Quality Standard
E1.8	The data protection and confidentiality policy describes how BHCAC clients can request to see their own file at any time. Established access procedures referred to in the policy are enacted when clients request sight of their personal information
E1.9	The organisation has a file destruction policy contained within its case management procedure. Hard copy files will be retained for 6 years and then be destroyed by shredding. The organisation uses the AdvicePro file destruction policy in relation to electronic files
E2.1	The file review procedure ensures that independent file reviews, along with supervision are in place to enable BHCAC to provide a high quality advice service. The independent file review checks the quality of advice given to clients and ensures that advisers are following relevant procedures correctly e.g. case recording and file management.

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E2.2	The file review procedure states that <i>'files/enquiry sheets will be selected at random, subject to the need to achieve a cross-section of the different areas of advisers' work. Less experienced/new advisers will have 3 files/enquiry sheets reviewed per month for the first three months. The number and frequency of file reviews for other advisers will be decided by the supervisor. For the most experienced advisers, a minimum of 3 case files or 6 enquiry sheets will be reviewed every three months. In making a decision about the number and frequency of file reviews the supervisor will take into account the experience and performance of each adviser and the number and complexity of their case files/enquiry sheets'</i>
E2.3	All file reviews are retained in a central record and a copy thereof is placed within the hard copy file maintained for each client
E2.4	The file review checklist includes a provision for recording any corrective action identified by the supervisor, a deadline for completion and a date of sign off
E2.5	The file review procedure states that the supervisor (the outreach project manager) is responsible for undertaking independent file reviews
E3.1/ E3.2	The results of independent file reviews are fed back to colleagues during regular supervisory sessions with the project manager and are also referred to during the course of annual appraisals
E3.3	The project manager will review the central file records annually to identify any emerging trends or any needs for organisational improvement
E3.4	The results of the review of the central record of independent file reviews are taken into consideration as part of the organisation's annual review of performance
Areas of Good Practice	
Well maintained client files in both electronic and hard copy format both of which contained a detailed record of support and advice provided and next steps	
Areas for Improvement	
There is a need to correct the text within the destruction of electronic files section (first sentence) of the case management procedure which has become corrupted	
Areas requiring Corrective Action	
E1.8	There is a need to excise the reference to 'Law Centre' within the data protection policy An amended data protection policy has been submitted to the auditor following oral feedback at the end of the on site audit that addresses this matter. Accordingly this corrective action can now be closed out
E2.4	The most recent independent file reviews have identified the need for the full opposition address to be recorded on conflict forms where this is missing. This requirement accordingly should apply also to the following files 21654 and 198217 examined as part of the on-site audit. Client records have now been amended and as a result this corrective action can now be closed out

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F. Meeting Clients' Needs	
<i>This covers information to clients, confidentiality, privacy and fair treatment and maintaining quality where someone else delivers part of the service.</i>	
Evidence Submitted	
F1.1	BHCAC operates according to four main principles (independent, impartial, confidential and free) which it publishes on its website and within community information brochures. BHCAC also stresses during drop-in sessions and client appointments that the advice and support it provides is completely independent and unbiased
F1.2	Case files examined (both hard copy and electronic) contained a record of advice, actions and next steps. Where necessary clients will provide written authorisation for BHCAC to act on their behalf, for example when representing clients in consultations with the DWP
F1.3	The referral procedure describes how clients are informed where the advice given includes action that the organisation may not be able to undertake and the reason therefore. The policy also makes reference to conflict of Interest
F1.4	Situations where costs may be incurred by any opposing party does not occur in BHCAC's dealings with its clients
F1.5	Where action cannot be taken immediately systems are in place to ensure this happens in the future. The monitoring of key dates ensures that vital stages of a case are not missed. Follow up dates for the adviser to check progress on a case or to contact the client are also recorded and checked by the adviser each week. If the adviser working on a case is absent another caseworker will be designated responsibility for any action needed
F1.6	The written procedure for informing clients about the progress of the enquiry is given to staff and volunteers during their induction and trustees are made aware of this as part of their introduction to the organisation. As a minimum clients are updated when there are any changes or proposed actions and when staff need to explain to the client any issues arising
F1.7	Files examined as part of the on-site audit confirmed that clients were informed of the outcome of their case in writing. An electronic record of outcomes was also maintained on client files held on the AdvicePro electronic file management system
F1.8	The 'confirming advice In writing policy' defines when advice should be confirmed in writing to clients and the procedure caseworkers should follow when doing so. Examples include when the client or the caseworker has agreed to take further action in relation to a number of issues and where confirmation of actions would be helpful; when the client is uncertain and would benefit from written confirmation
F1.9	The data protection and confidentiality policy states that BHCAC clients can request to see their own file at any time making use of standard access procedures of which they are informed at the outset of their case
F1.10	The advice procedures for public information document ensures that the organisation provides its clients with all the information they need to know about how their case will be managed and what expectations the organisation has of them

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F2.1/ F2.2/ F2.3 F3.1	as clients The advice BHCAC provides its clients is completely free of charge The data protection and confidentiality policy describes how BHCAC will treat client information confidentially. The 'confidentiality of information statement' states that all trustees, employees and volunteers are required to read and sign a confidentiality statement to confirm their understanding
F3.2	BHCAC has private meeting rooms available for client appointments and for clients attending weekly drop-in sessions
F4.1	The signposting and referral procedure and the document entitled 'when BHCAC cannot provide the service' include the practical steps to be taken to identify appropriate service providers using the principles of equality of opportunity and diversity. Clients are also advised of any cost implications. Moreover the 'service of others' document covers situations where there is a need to use the service of others in the progress of a case. BHCAC keeps an updated list of all persons or organisations that they use for professional services. The register takes into consideration such factors as professional qualifications, previous relevant experience, previous work with the relevant community, the ability to offer appropriate language and/or cultural context, costs and whether they have previously been commissioned
F4.2	Clients are allowed to select third parties who may be called upon to assist with their case often with the advice and guidance of the caseworker
F4.3	BHCAC does not currently evaluate externally the services provided by third parties to assist with clients' cases

Areas of Good Practice

Very effective annual analysis of monthly client feedback. The spreadsheet used breaks down feedback by matter type (e.g. welfare benefits, community care, health) and service type (appointment, drop in, home visit, telephone and email) and records scores and averages in response to questions asked. The analysis also contains relevant quotations from clients and contains an overall assessment and recommendation for the maintenance and enhancement of services

Areas for Improvement

First interview forms - there is a textual corruption on this form when referring to sexual orientation ("biosexual") which needs to be corrected

Areas requiring Corrective Action

F4.3 There is a need to introduce a system to evaluate services provided externally including retaining a record thereof.

The project manager has revised the referral form as a result of oral feedback provided at the end of the on-site audit to seek clients' evaluation of the services provided by third parties used in the progress of a client's case. The new form will be used henceforth and feedback received in this way will be monitored and analysed for the board of trustees and at year-end Accordingly this corrective action has been addressed satisfactorily and can now be closed out.

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G. Commitment to Quality	
<i>This covers complaints, other user feedback and maintaining quality procedures.</i>	
Evidence Submitted	
G1.1/ G1.2	The client complaints policy and procedure recognises that there will be occasions when people are dissatisfied as a result of being denied service, receiving a poor quality of service, or because of the conduct of staff, volunteers or other service users. The policy provides a step-by-step guide to making a complaint and the different stages within the process. The purpose of the policy and accompanying procedure is to resolve complaints in the quickest way, ensuring that they are thoroughly investigated, recorded and reach a positive outcome. The board of trustees is ultimately responsible for the complaints procedure. The advice procedures for public information document also provides details of the complaints procedure
G1.3	Although the organisation does have central record facilities for the recording of complaints, no complaints per se have been received in recent times
G2.1	The outreach project manager has been appointed as the person within BHCAC with responsibility for quality policies and procedures. The quality assurance policy highlights BHCAC's commitment to achieving consistently high standards in its activities to deliver quality services for service users and good value for funders
G2.2/ G2.3	All quality processes and procedures are scrutinised on an ongoing basis and are all subject to annual review. All policies and procedures include the date the policy was implemented or last reviewed and the date of the next review
G2.4	All staff have access to current quality policies and procedures. Relevant documents are maintained in electronic format and are retained on BHCAC's internal computer system
G3.1	The client feedback procedure illustrates BHCAC's commitment to improving the service. BHCAC uses a questionnaire to establish if the service is approachable and friendly, that the client is kept informed, matters are managed in a competent and timely manner, and information and advice are explained satisfactorily to the client
G3.2	All client feedback is monitored throughout the year and is the subject to an annual review, the results and conclusions of which are presented to the board of trustees. The project manager also reports client feedback on a monthly basis to the board to keep them fully informed of the views clients and the West Balkan community in general have of BHCAC
G3.3	The annual review of organisational performance makes use of all customer feedback received as a key element in assessing the appropriateness and effectiveness of the services BHCAC provides
Areas of Good Practice	
Monthly monitoring and reporting of client feedback on the service provided by the organisation (see also Section F - Areas of Good Practice)	

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Areas for Improvement			
None identified			
Areas requiring Corrective Action			
None identified			
For Office Use Only			
Continuation of Award Granted	Lindsey Poole Advice Service Alliance Director	Date:	21/08/15
Award Refused		Date:	
IV Completed by AQS Contract Manager	18/08/2015	Name:	Amanda Jordan

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APPENDIX 3: BENEFICIARIES FEEDBACK FORM

Beneficiaries' Feedback and Evaluation Questionnaire UPITNIK ZA KORISNIKE, OCJENE I PROCJENE USLUGA PROJEKTA

Outreach Project 2015-2016

May 2015

To evaluate our project service, please help us by completing this form by hand or returning in the enclosed envelope (you do not need a stamp).

Da bi procjenili uspješnost aktivnosti i usluga našeg projekta, molimo vas da popunite ovoj upitnik i vratite ga lično ili u koverti koju vam šaljemo sa adresom i poštanskom markicom.

Molimo vas pogledajte sljedeće značenje oznaka koje će vam pomoći da odgovorite koliko ste zadovoljni sa onim što smo za vas uradili i ćemo je to rezultiralo.

- A: 😊😊 (veoma zadovoljavajuće- very satisfactory, outcome percentage level 80-100%)
B: 😊 (zadovoljavajuće, satisfactory, outcome percentage level 60-80 %)
C: 😐 (nepoznato- unsure outcome percentage level 50-60%)
D: 😞 (nezadovoljavajuće- unsatisfactory outcome less than 50%)
-

Q1. Were you satisfied with what we did for you? Da li ste zadovoljni sa tim što smo za vas uradili?

- A: 😊😊 B: 😊 C: 😐 D: 😞

Q2. After using our service and attending our activities, do you feel less isolated and alone? Nakon učešća u aktivnostima i korištenja naših usluga, da li se osjećate manje izolovani i usamljeni?

- A: 😊😊 B: 😊 C: 😐 D: 😞

Q3. After using our service and attending our activities, do you feel your mental and physical health have improved and do you feel less stress? Nakon korištenja, naših usluga ili aktivnosti, da li osjećate da vam se zdravlje poboljšalo i da ste manje streseni?

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A: 😊😊 B: 😊 C: 😊 D: 😞

Q4. After using our service or attending educational programs, do you feel more confident in dealing with your issues independently? **Nakon korištenja naših usluga ili edukacionih programa, da li imate više samopouzdanja da sami rješavate neke od vaših pitanja/problema?**

A: 😊😊 B: 😊 C: 😊 D: 😞

Q5. Was the results of your case better, worse, same or don't know yet, as result of our support? **Nakon pomoći koji smo vam pružili, da li je rezultat vašeg slučaja bolji, gori, isti ili još uvijek neznate? Molimo vas označite sa X odgovarajući kvadratić.**

BOLJI **GORI** **ISTI** **JOŠ UVIJEK NEZNATE**

Q6. How easy was it for you to access our service? **Da li ste imali poteškoća da pristupite našim uslugama?**

A: 😊😊 B: 😊 C: 😊 D: 😞

Q7. After using our service, do you feel you have an increased awareness of your rights, entitlements and the availability of legal representation? **Nakon korištenja naših usluga, da li osjećate da znate više o vašim pravima, sljedovanjima i mogućnosti za pravno zastupanje?**

A: 😊😊 B: 😊 C: 😊 D: 😞

Q8. After using our project service/ activities, do you feel your quality of life has improved? **Nakon korištenja naših usluga ili aktivnosti, da li osjećate da se kvalitet vašeg života poboljšao?**

A: 😊😊 B: 😊 C: 😊 D: 😞

Q9. After using our project service and activities, do you think you will need project service, activities and support in the future?

Nakon korištenja naših usluga i aktivnosti da li mislite da su vam neophodne usluge, aktivnosti i naša pomoć u budućnosti? Molimo vas zaokružite odgovarajuće.

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YES/DA

MAYBE/ **MOŽDA**

NO/NE

Q10. Do you have any further comments or suggestions that may help us to improve our level of service or activities? **Da li imate drugi komentara ili prijedloga koji bi nam pomogli da popravimo usluge ili aktivnosti?**

OPTIONAL/NEOBAVEZNO

Your full name/ime i prezime _____

Thank you for completing this questionnaire **Hvala vam na ispunjavanju ovog upitnika**

APPENDIX 4: CASE STUDIES/LIFE STORIES

Case Study 1 Mr T (Male: 66 Years)

Mr T. was born in Bosnia And Herzegovina in 1949 and he arrived to UK in 2004 to join his wife on a spouse visa. Unfortunately Mr. T and his wife separated in 2013 which resulted in insufficient financial support for Mr. T as he relied and lived on the support of his wife. This then left him with no choice but to stay in a hostel.

Mr T approached BHCAC for assistance in finding and securing a permanent home so that he could start over and support himself.

Our main aim was to assist Mr T to secure permanent accommodation which was suitable to his needs. After assessing his situation we proceeded to register him with the relevant housing department.

Following successful housing registration we continued to support Mr T to bid for suitable properties as he did not have his own internet access. We provided this service from our office here in Brent on a regular basis. Mr T was fortunate enough to secure a property that was suitable and with which he is very happy.

In addition to helping M. T secure accommodation we searched for an affordable energy supplier so that his utility bills are most cost effective. Furthermore, we registered Mr T with the opticians and booked a long overdue eye examination. Finally we provided advice and assistance in obtaining the following:

- Pension Credit
- Housing benefit and Council Tax Credit
- Social Fund for furnishing his new accommodation with the basic necessary items of furniture
- Warm Home Discount to help with energy bills

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Direct overall impact as a result of our assistance has been to prevent M. T from homelessness and poverty. We increased his confidence and independence whilst also preserving his health.

Mr.T's feedback from BHCAC assistance is as follows;

"I was a broken man in every way following the separation from my now ex-wife. With your help I was able to take control of my life at a critical time and I am so thankful for your support which was immense to me at the time because I had no one else. I felt insecure and vulnerable but this changed as soon as I approached you for assistance. You assured me that everything will be ok, it was just a matter of time for all things to be sorted out; I am very happy with my new home which I am trying to organise to have a small library of books. I am so thankful for all your help and during the process I have learned how to do things on my own and where to get help if needed".

CASE STUDY 1 (Letter from Mr T) (Male: 66 Years)

Towards the end of 2013 I faced many life changing circumstances which meant I had to resolve many difficulties, including my status in England. As a result of divorce I had to seek alternative accommodation and deal with various issues relating to welfare benefits and general changes to my status as a single adult. As a direct result of this I sought assistance from the Bosnia & Herzegovina Community Advice Centre.

Over a period of two years I encountered many difficulties which are relatively common to individuals which find themselves in my situation. There were many problems and as such I visited the Bosnia & Herzegovina Community Advice Centre on a regular basis over this period where I met with Ms. Nermina Lemes, Ms. Sadida Trozic (Manager) and somewhat less often, with Miss Emina Trozic.

These individuals, throughout my contact with them, demonstrated exceptional compliance, competency and familiarity with a range of options and procedures which were before me and which I had to follow in order to resolve the difficulties I faced. The members of staff diligently updated my file and competently liaised with various institutions resulting in successful outcomes i.e. enabling me to secure accommodation, access welfare benefits and various other forms of support.

Furthermore, staff members were discreet; they respected my privacy and confidentiality and were always willing to help. The success of their assistance is evident in the fact that I have moved in to a flat, I am in receipt of regular social benefits and have managed to resolve many difficult dilemmas I faced. This has allowed me to get back on my feet and on a path towards living a dignified life.

Furthermore, I was lucky enough to receive additional support, from Ms Nermina Lemes who initiated and provided further assistance by helping me to access additional financial funds for example a grant to furnish my new home and government assistance with my heating bills, as I am over the age of 60.

I must state that I never encountered a closed door at the centre nor have staff members at any point shown impatience or lack of enthusiasm. I must also highlight that the assistance and support I received was EXTREMELY important to me and invaluable in increasing my status in British society to a positive level. I continue to visit the centre when I encounter difficulties I cannot resolve or when I am unable to understand a piece of legislation or policy which is always rapidly changing. I also must highlight that members of staff at the centre have demonstrated clear attention to detail and shown exemplary moral and ethical professional conduct. They have proved to be paying close attention to changes in legislation and policy which affect us as individuals and have shown commitment to assist all those who ask for their assistance. Their capacity in this regard has been boundless.

Based on this, I believe that an organisation like this SHOULD and MUST exist, especially for the elderly, who as a result of war in Bosnia and Herzegovina, have ended up in Great Britain. Equally for individuals who do not have an opportunity to learn English, or those who are disabled or similar.

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RECOMMENDATION: I believe it would be useful to obtain two or three keyboards to enable typing in Bosnian, as well as a dictionary and grammar booklet so that the materials which are occasionally printed and which contain many important tips can be written more precisely and neatly edited Bosnian. This seems important because it also respects our own culture which we have brought with us to the UK.

In addition I would suggest it would be beneficial to create a list / database of all those who use the services of this centre (containing e-mail and home addresses) and that in cooperation with the Bosnian Embassy, information is provided periodically to nationals on legal and political changes taking place in Bosnia and Herzegovina and those changes relevant to people who live here in the UK. As an example, last year new forms for personal information (birth, death and marriage certificates and the like) have now been embedded with a security chip which can be obtained. The document is internationally recognised and indefinite, it does not need to be replaced every 6 months as before. Furthermore it complies with regulations of the European Union which introduced the same. Undoubtedly this will simplify the process drastically for anyone who takes this important new form of ID.

Furthermore, the centre is developing a broad range of social activities that is oriented towards the elderly especially those who, during the war in Bosnia and Herzegovina, have experienced a variety of stress, trauma or physical wounding. Because of this, the centre has prepared and held various courses on mental and spiritual health, provided help in getting to the hospital, offered assistance to housebound people, as well as various social evenings, excursions, lectures and courses on English language and computer technology. All these activities contribute significantly to the integration of people, especially the elderly, who had to be forcibly relocated, because of the war, to a new environment that is different and which has cultural and social norms they often do not understand yet alone accept, from the social and cultural environment in which they had been born, established a family and lived happily.

It must be noted that BHCAC has been refurbished by fellow community members on a voluntarily basis. The premises are maintained at a high standard and are always neat with the necessary technology and furniture. This environment further contributes to the people who use services as it helps them to feel comfortable and relaxed.

With deep appreciation,

Ognjen Tvrtković

London 21 March 2015

66 YEARS (Male)
LB Kensington and Chelsea
Post code: SW3 6QT
E mail: ognjen.tvrtkovic@gmail.com

CASE STUDY 2 Mrs HM (FEMALE: 79 YEARS)

BACKGROUND

Mrs HM is a 79 year old lady living in the London Borough of Brent with her husband. Both Mrs HM and her husband heavily rely on the support of their son and daughter in law for day to day support, due to old age, mobility difficulties and language barrier. Mrs HM unfortunately suffered a stroke in December 2013.

ISSUE

Following the stroke suffered by Mrs HM, her family sought to engage with Bosnia & Herzegovina Community Advice Centre's Outreach Project so that Mrs HM might socialise with other beneficiaries in order to reduce social exclusion and isolation.

SERVICE PROVIDED

We have been able, through assistance of Mrs HM's daughter in law, to engage with Mrs HM and offer her an opportunity to attend activities organised by the Project. To date Mrs HM has regularly participated in 'Fitness for Women' since February 2014 and has also recently joined our new activity called 'Chair Yoga'. We are therefore extremely pleased with Mrs HM's participation, as not only have we dealt with the isolation issue but she has also made remarkable progress in her physical recovery by participating in physical activities at our Centre twice a week.

OUTCOME

1. Reduced sense of isolation and social exclusion
2. Improved communication and interaction skills
3. Improved physical and mental health
4. Active participation in Project activities
5. Developed new skills in Fitness and Yoga Classes