



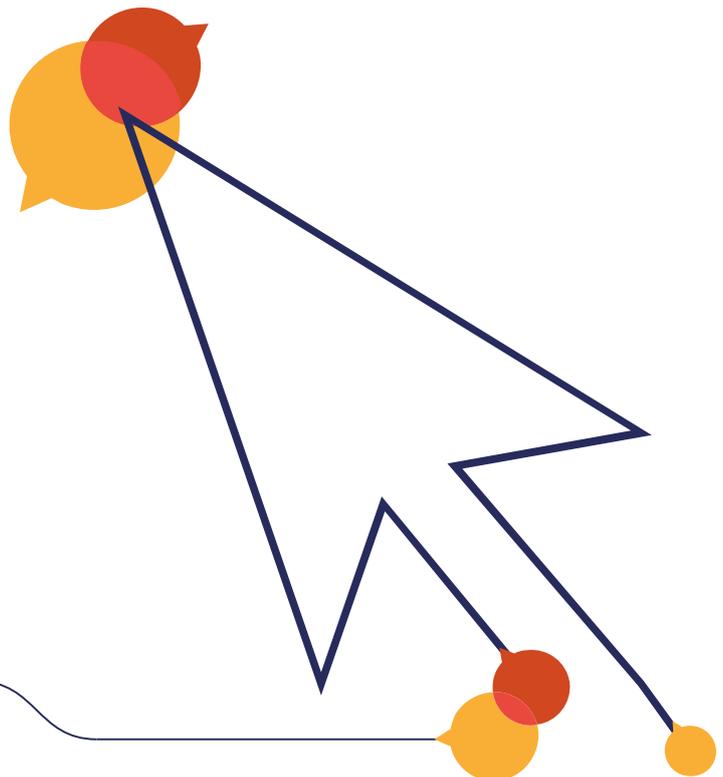
accidents don't have to happen

# Scotland's Home Safety Equipment Scheme



## Phase 2 evaluation

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# Scotland's Home Safety Equipment Scheme: Phase 2

Scotland's Home Safety Equipment Scheme (SHSES): Phase 2 was a follow up project to [Scotland's Home Safety Equipment Scheme](#). The scheme was funded by the Scottish Government and was hosted by RoSPA. It aimed to reduce home accidents to children under five and had four key outcomes:

1. Vulnerable children will be less likely to be admitted to hospital because of home accidents.
2. Parents and carers of vulnerable children will have improved levels of awareness and understanding of key child safety issues.
3. Practitioners working with vulnerable children will have an increased awareness of home injuries involving young children and how these injuries could be prevented.
4. Individual risks in the home will be identified and addressed.

Phase 2 of the scheme focused its attention on the Scottish Borders Local Authority area. During the 2014/2015 financial year 212 children under the age of 15 were admitted to hospital as a result of an unintentional injury in the home in the Scottish Borders alone, with children under the age of 5 accounting for 87 of the overall admission total. Overall in Scotland, [2074](#) children under the age of five were admitted to accident and emergency due to a home related injury.

## The evaluation

The evaluation ran in parallel with the implementation of SHSES Phase 2, from February 2015 to December 2015.

## Prevention

Scotland's Home Safety Equipment Scheme: Phase 2 was a preventative scheme. It reached 43 vulnerable families and a total of 66 vulnerable children under the age of five over the course of 11 months. Each family had an average 6.5 items of safety equipment supplied and professionally fitted.

The cost of delivering the scheme was £196 for each family, or £96 per child.

The most recent available data on the average cost of a non-fatal hospital treated home accident for a child aged up to four years is £10,600.

## Identification of risks

The scheme built an individual home safety risk assessment into its delivery model, with every family (43) receiving a home safety risk assessment. Ninety-nine per cent of families who responded to the feedback questionnaire said the individual risk assessment was "very helpful." One client stated, "I felt like there was someone out there who cared about us and our child's safety".



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The home safety risk assessment included a 'prescription' for the provision and professional installation of equipment through the scheme, provided free of charge to clients. One client stated, "It [the installation] made my life easier. I'm on my own with a child and it would have been very difficult to do."

The scheme offered a Home Fire Safety Visit by the Scottish Fire and Rescue Service: 17 families (40% of families in the scheme) agreed to take part in the visit. Most families (96%) engaged through the scheme were categorised as having a high fire risk home.

100% of families engaged said the Home Fire Safety Visit was "very helpful."

### Reaching vulnerable families

Scotland's Home Safety Equipment Scheme: Phase 2 targeted vulnerable families through the use of two Scottish Borders Housing Associations: Berwickshire and Eildon. Due to families already being in the housing associations' database it was easy to target vulnerable and high risk families with children under the age of five. It also meant that the fitting of equipment could easily be approved by the housing association.

There were concerns during the pilot project of SHSES that families receiving the equipment would feel stigmatised. However, 100% of families engaged in Phase 2 said that they were very pleased to be asked to join the scheme.

Practitioners/Installers mentioned:

- 🗨️ "The scheme has reached the people it needed to and I think it would be a great advantage to have this ongoing".
- 🗨️ "Most of these parents were unable to afford safety gates and did not think any of this equipment was a financial priority therefore this would not be in the properties if they had to pay for it".
- 🗨️ "The scheme ran very well in our area, as it is a small area I found that people began asking about it once a friend had the equipment fitted / family support workers were aware also so vulnerable parents also benefited".

### Families Involved in the Scheme:

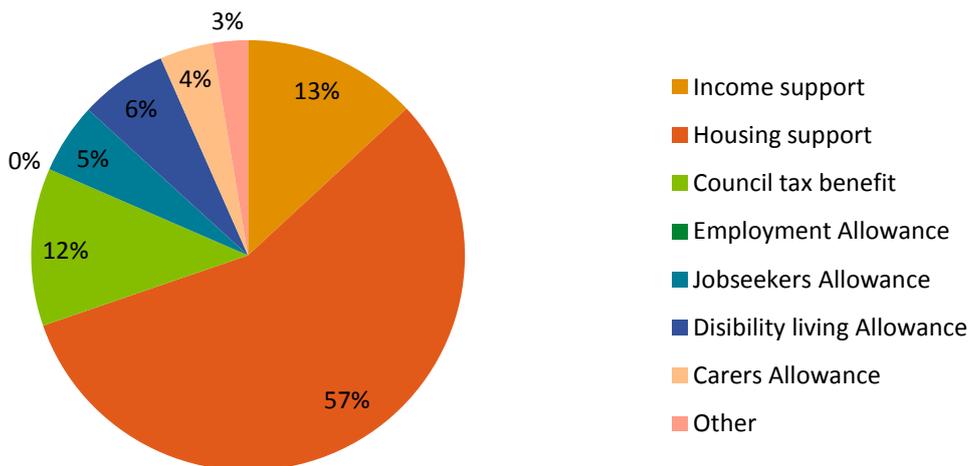
Area	# Households	# Children under 5	# Children under 2	Average children under 5 per household	Total eligible benefits	Average benefits per household	# Items	Average number of items per household	# Fire Safety Visits
Berwickshire Housing Association	26	43	20	1.6	43	1.6	171	6.5	0
Eildon Housing Association	17	21	14	1.2	51	3	110	6.4	17



**Total Number of Benefits:**

	Total	% all benefits
Income Support	10	10.01%
Job Seekers Allowance	4	4.0%
Employment Allowance	0	0
Tax Credits- you and your partner receive tax credits AND have a valid NHS tax exemption certificate	25	25.0%
Disability living allowance care or mobility components for a disabled child	5	5.0%
Housing Benefit	43	43.0%
Council tax benefit (not council tax discounts)	9	9.0%
Carers Allowance	3	3.0%
Other, please specify	2	2.0%
<b>Total</b>	<b>101</b>	

**% Total of Benefits:**



**Awareness of home safety**

The scheme built family/carer awareness-raising into its delivery model, with all families being provided with home safety advice supported by the home safety information pack that was left with the family.

One hundred per cent of families engaged said the advice and home safety information pack received during the home safety visit was “very helpful.”

Practitioners/Installers mentioned:

 *“The Scheme changed the views of the parents, they would never have thought of many of the*



*dangers in the home if it hadn't been for the education package".*

- 👉 *"The scheme has definitely made a difference to the families I visited knowledge regarding home safety, I know when I was mentioning things like blind cord cleats and door jammers, a lot had not heard of this type of equipment and were almost ignorant to the dangers of blind cords and simple things like jamming fingers in the door".*

## Equipment

A range of home safety equipment was selected for use in the scheme which:

- 👉 Addressed the major causes of accidents identified by RoSPA: falls, striking, burns and scalds and poisoning
- 👉 Was proven and effective in the field
- 👉 Was widely used within similar projects
- 👉 Had a track record on quality and performance.

Kid Rapt supplied all the equipment and provided training for the fitters. Phase 2 used the same equipment as the pilot scheme (See pilot SHSES evaluation for equipment details).

One hundred per cent of families engaged in the scheme said the equipment was "very helpful."

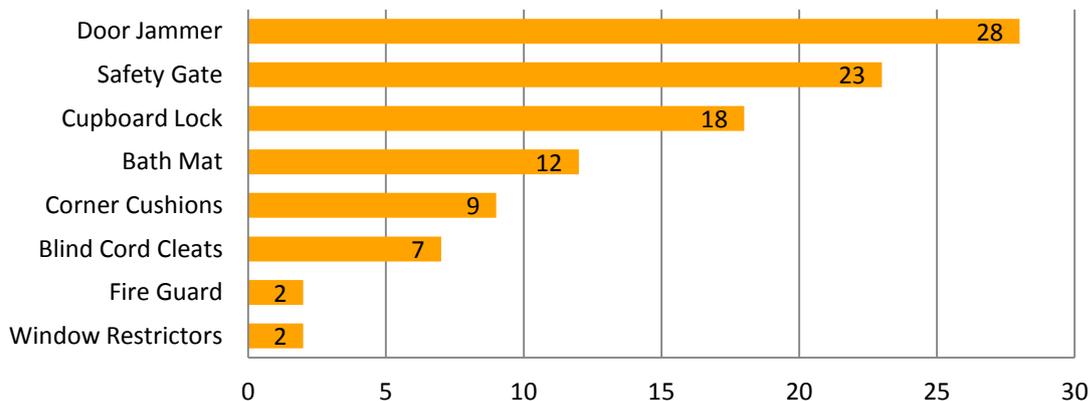
Practitioners/Installers mentioned, *"The scheme has made a difference (to families) as the parents would not have this equipment otherwise or if they had, the gates would not be well fitted or of good quality".*

### Total uptake of Equipment:

	Total provided and fitted	% of all equipment
Bath Mat	35	12%
Blind Cord Cleats	20	7%
Corner Cushions	25	9%
Cupboard Lock	52	18%
Door Jammer	80	28%
Fire Guard	6	2%
Safety Gate	64	23%
Window Restrictor	6	2%
<b>Total</b>	<b>282</b>	



### % uptake of equipment:



### Family Feedback Questionnaire:

How easy was the equipment to use?	Very Easy		Easy		Didn't Receive	
	Total	%	Total	%	Total	%
Safety Gate	9	90			1	10
Fireguard	4	40			6	60
Bathmat	9	90			1	10
Cupboard Locks	10	100				
Corner Cushions	8	80			2	20
Window Restrictors	5	50			5	50
Door Jammer	8	80	1	10	1	10

Families provided the following comments about the equipment:

- 🗨️ *"The stair gates were very helpful as my daughter likes climbing the stairs."*
- 🗨️ *"Really helpful, especially the cupboard locks."*

### Practitioners/Installers

The practitioners and installers were selected by Berwickshire and Eildon Housing Associations. They had direct access to clients and were known already by some families, making appointments and installation visits more personal.



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The housing associations sought out the families themselves using the data bases they hold in house. They were able to identify which families had children under the age of five and seek approval by the family before advancing with the scheme.

Berwickshire Housing Association assigned two separate individuals, a practitioner and an installer, to the project allowing them to coordinate their work together and fit it around their regular working schedule. Eildon Housing Association provided one person who carried out the roles of practitioner and installer jointly. The practitioners and installers were trained in both aspects of the home safety visit and the installation visit due to feedback provided in the pilot project.

One hundred per cent of practitioners/installers agreed that the installation training was a useful tool to help them understand the uses and installation of the safety equipment supplied through SHSES.

*"The joint training was also an advantage as we were both knowledgeable to what the other was doing and could advise the parents accordingly".*

One hundred per cent of practitioners/installers strongly agreed that they had an improved knowledge of preventing home injuries involving young children.

*"The scheme has definitely made a difference to the families I visited knowledge regarding home safety, I know when I was mentioning things like blind cord cleats and door jammers, a lot had not heard of this type of equipment and were almost ignorant to the dangers of blind cords and simple things like jamming fingers in the door".*

Practitioners/Installers thought the scheme would benefit more families:

-  *"I think this has been a fantastic scheme and has been gratefully received in our area from the families".*

## Family Feedback

One hundred per cent of families engaged said there was nothing they would change about the scheme.

One hundred per cent of families engaged thought other people would benefit from SHSES, with practitioner comments backing up this claim, *"The scheme should definitely be rolled out nationally, in our small area it has made a massive difference to so many families, they have a different view to kids' safety in the home and now have the equipment fitted as extra security to allow safety for the kids".*

When asked "what did you like about the scheme," families responded:

-  *"I felt like there was someone out there who cared about us and our child's safety."*
-  *"It [the installation] made my life easier. I'm on my own with a child it would have been very difficult to do."*
-  *"It's very helpful for people who don't have a lot of money."*
-  *"Everyone was friendly; it was very helpful to get the equipment to protect my children."*
-  *"It was very good."*
-  *"It's good that they can help people like me who don't have a lot of money."*



## Practice development

SHSES built practitioner and installer training on prevention of home injuries involving young children into the delivery model. Three practitioners and installers were jointly trained by RoSPA and Kid Rapt staff to become certified in child safety in the home and installation procedures of equipment.

Phase 2 aimed to cut down on the number of people entering the clients' homes and welcomed a joint installer/practitioner approach. Berwickshire Housing Association allowed the use of a practitioner and separate installer to work together whereas Eildon Housing Association used one person to carry out the role of practitioner and installer.

The pilot scheme dedicated one training day to practitioners carrying out the home safety visits and another day to installers for the installation training. Feedback from the pilot indicated that many practitioners and installers considered that both groups should have done both training days together:

-  *"RoSPA should insist that the practitioners do the installer training. But it would have been even better if the installers were trained to do the home safety assessment."*
-  *"I would have loved to do the installer training so then I would have known more about the equipment."*
-  *"Joint installation and safety training would have been better."*

Practitioners from Phase 2 stated: "All aspects of the [training] day were useful. Getting to sit through the installer training helped me with my home safety walk through- I could see where the equipment needed to go and could advise the families on how to use everything effectively."

Comments from the pilot scheme indicated that the forms filled out during the visit were difficult to use. Several stakeholders considered that the paperwork should be reviewed and simplified, with the following comments being typical:

-  *"A lot of folk didn't like the forms- it was easy to miss bits, the font was too small."*
-  *"I'm still not sure that the parents understand the parent/carer agreement."*

Phase 2 adapted these forms to be more user friendly, making the font bigger and changing the layout in order to avoid missed sections. Form 1 was also adapted and consulted on to ensure parents/carers understood the agreement being made. During the training session, practitioners and installers were briefed how to fill out the forms and were given example copies.

The pilot scheme indicated landlords' concerns and highlighted some families who were missed out due to private letting agencies not allowing equipment to be fitted. For example:

-  *"I had a couple of families in private lets, and I couldn't do them."*
-  *"3 families didn't get permission from private landlords."*



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Phase 2 used Housing Associations where permission was granted before families were even approached. Having families under the same Housing Associations made it easy to guarantee approval for the fitting of equipment without the families having to go out of their way to seek permission.

### Unanticipated outcomes

During the evaluation process the practitioner/installer from Eildon Housing Association won the UK National Lottery and left his employment, therefore an evaluation from his perspective was unable to be completed.

Due to timescales of Phase 2, the amount of families able to be reached was minimal. If more time had been available to run the project and offer support a greater client range would have been reached. At the initial introduction of the scheme RoSPA was going through staffing changes and suspected the loss of one member of staff, therefore their support to the scheme was only available to the Scottish Borders for a few months. This deterred sign up from the other two Housing Associations within the Borders.

### Summary

Phase 2 encompassed strategic developments from the pilot project; allowing a joint approach to training for the practitioner and installer, this was well received by those involved in Phase 2 and should continue in future Home Safety Equipment Schemes. Phase 2 also incorporated a new form layout to make it easier for practitioners to use and clients to understand, although there were no complaints about the form in Phase 2, practitioner comments suggested it was too much paper work to do at once. In order to resolve this, a recommendation for future equipment schemes would be to revise the forms and scope out what information is necessary for the purpose of evaluation. Comments from the Pilot project addressed the issue of landlord agreement to install the safety equipment, in order to resolve this in Phase 2 Housing Associations in the Scottish Borders were contacted, they agreed to the project and installation of equipment before families were contacted. The use of Housing Associations cut down time taken to contact landlords and seek permissions, Housing Associations should be used in future Home Safety Equipment Schemes as not only do they cut down the time taken to reach families but provide direct access to vulnerable families and high risk children.

Unanticipated outcomes of Phase 2 provide learning for future Home Safety Equipment Schemes: staffing regularly comes up as an issue in the field of home safety due to funding issues therefore it is crucial to have a partnership agreement when working on a large project such as Scotland's Home Safety Equipment Scheme. At the start of Phase 2 RoSPA was going through staffing changes which didn't give a lot of time allocation to Phase 2 therefore Housing Associations in the borders were deterred from taking up the project. Although the project was able to run in the borders with two Housing Associations time scales did not allow for more families to be helped. Phase 2 also attempted to cut down staff going through clients homes, Berwickshire Housing Association provided one practitioner and one installer to the scheme who worked in partnership and coordinated visits. Eildon Housing Association supplied one staff member to complete both component parts of the visit and although it worked well, the practitioner/installer won the National Lottery and subsequently left his work at Eildon therefore we were unable to evaluate that area of the project fully. Although cutting down staffing to the families was a good idea and worked well, it creates barriers between partners and puts an increased work load upon one member of staff. Having a staffing bank for future Home Safety Equipment Schemes would be the most beneficial and allow more control over the project.



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Recommendations from Why Children Die: death in infants, children and young people in the UK Part D, [RCPC](#) suggests, "Local authorities and health boards should prioritise children's safety, and through utilising resources such as health visitors and home safety equipment schemes, educate and equip parents and carers to keep their children safe with a focus on water safety, blind cord safety, and safe sleeping". For younger children, home injuries are among the leading causes of highly preventable death, therefore safety in the home and an understanding of how to prevent accidents from happening is of great importance, adopting a National Home Safety Equipment Scheme could reduce hospital admissions and prevent lifelong trauma consequences..

The [National Institute for Health and Care Excellence](#) also provides guidelines for Unintentional Injuries in the home; Interventions for the under 15s. The Guidelines provide the following advice:

-  Prioritise households at greatest risk
-  Establish partnerships with local community organisations
-  Offer home safety assessments and advice
-  Offer appropriate safety equipment including door guards, cupboard locks, safety gates, smoke and carbon monoxide alarms, thermostatic mixing valves and window restrictors.

Evidence from the RCPCH, NICE Guidelines and the Pilot Project and Phase 2 of Scotland's Home Safety Equipment Scheme support a National roll out of the equipment scheme. 100% of families from the Pilot and Phase 2 all thought the scheme should be rolled out to other areas and other families would benefit from this. RoSPA recommends a roll out of the equipment scheme nationally with funding available for staffing to ensure total control over all aspects of the project, partnership working is key to the running of the equipment scheme therefore contracts should be drawn up and signed by all before the project commences. Having staff funded solely for the purpose of the scheme will minimise unanticipated outcomes and allow timely completion of visits and installation of equipment.





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