

Shakti Children's Service Support Service

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Type of inspection:
Unannounced

Completed on:
27 June 2025

Service provided by:
Shakti Women's Aid

Service provider number:
SP2004006510

Service no:
CS2016349275

About the service

Shakti Children's Service is a support service for black and minority ethnic women and their children experiencing domestic abuse, operating as part of the wider Shakti Women's Aid organisation. Shakti aims to support women and their children by empowering them to make informed choices about their lives.

The service operates from an office base in Edinburgh. The service has been registered since 2016, and is provided to families accessing the women's aid refuge service and people living in their own tenancies in the community. The service offers frequent group activities, one-to-one work with children and young people, and support to women with aspects of parenting.

About the inspection

This was an unannounced inspection which took place on 18 June 2025 from 10:00 to 16:30, 19 June 2025 from 10:00 to 18:00, 20 June 2025 from 09:30 to 15:45 and 23 June 2025 from 09:30 to 17:00. The inspection was carried out by two inspectors from the Care Inspectorate and was undertaken at the same time as an inspection of Shakti Women's Aid housing support service.

To prepare for the inspection we reviewed information from the service. This included registration information, information submitted by the service, and intelligence.

To inform the inspection we:

- spent time and spoke with women and children using Shakti services
- spoke with 13 members of staff including managers and the Chair of the Board
- reviewed documents
- spoke with three external professionals
- considered responses to Care Inspectorate questionnaires.

Key messages

- Women and children's individual cultures and experiences were considered and celebrated.
- Staff were aware of an impressive variety of community resources to support women and children.
- The service should establish an effective method to record and document decisions regarding safeguarding concerns.
- Robust quality assurance and oversight has not been established and change has been slow paced.
- The service should develop a more effective overview of staff training.
- Staffing arrangements were flexible and reliable.
- Women and children benefitted from trusting, compassionate relationships with staff.
- The organisation must continue to work to promote an open and trusting culture.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	4 - Good
How good is our leadership?	3 - Adequate
How good is our staff team?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

We made an evaluation of good for this key question as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on people's experiences.

Quality Indicator: 1.2 People get the most out of life

The service fully recognised that women and children were experts in their own experiences, needs and wishes. It was a strength of the service that women were signposted to an impressive variety of other organisations and services within their local areas, including health, police, community resources for children and charities to access funding. This ensured women and their families were being supported practically and emotionally and to make choices regarding their future.

Support considered individual culture, experiences and sexuality within an environment that was non judgemental. Additionally, the impressive range of languages spoken by staff contributed to women being able to communicate their needs and views effectively. One woman commented "the staff are compassionate and culturally sensitive, and they create a nurturing environment that promotes healing and confidence."

Children and young people were enabled to get the most out of life through a variety of available opportunities. Family group sessions enhanced social connections, strengthened relationships and introduced a wide range of fun activities. This increased involvement in the community helped reduce feelings of isolation. The children's service also offered tailored one-to-one support to some young people, which enhanced emotional wellbeing and helped them to develop coping skills.

Risk assessments were used to prioritise service allocation and to ensure that those most in need or at the point of crisis were being supported in a timely and effective manner. Additionally, there was flexibility in the levels of support intensity available to children and families reflecting individual circumstances, needs and preferences.

Shakti was supporting women to enhance their feelings of safety and one woman commented "I'm grateful that there is a safe place like this for families in crisis."

Staff collaborated with other agencies to share risks and concerns and to explore additional supports, however this process should be strengthened to ensure that decision making, sharing of information and outcomes are being documented consistently for all adult and child protection matters. **(See Area for Improvement 1).**

Areas for improvement

1. To enhance safeguarding and support wellbeing, the provider should establish an effective method to record and document decisions regarding welfare concerns - including child and adult protection matters.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.' (HSCS 3.20).

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate. While the strengths identified had a positive impact, key areas need to improve.

Quality Indicator: 2.2 Quality assurance and improvement is led well

Shakti importantly contributes to raising awareness of black and minority ethnic women's experiences of domestic abuse in the wider community through campaigning work, presentations and training opportunities.

Leaders within the organisation, including managers and the Board, acknowledged the need for some comprehensive changes to support the further development of the service. Shakti was working towards this and it will take time for any implemented changes to be apparent in outcomes for women and children. As a result, requirements and areas for improvement from the previous inspection will be repeated.

There were systems in place to monitor aspects of service delivery, however management governance, quality assurance and auditing was not consistently undertaken. Due to a variety of factors, the pace of change in this area had been slow with management roles not always being used as effectively as required. Developing this structure within the management team and using the Improvement Plan to measure progress would ensure the needs of the service were being prioritised. This would also maximise the experiences of women and children using the services and supporting the growth of staff practice. The inspection also highlighted that the service may benefit from the increased awareness and use of the Care Inspectorate's quality framework to support self evaluation, whilst supporting staff to feel included in improvement work. **(See Requirement 1).**

The organisation had no consistent, formal incident process in place. This should be established to promote learning, support staff and ultimately improve outcomes for women and children supported by Shakti. It is also crucial that all relevant incidents are shared with the Care Inspectorate within appropriate timescales. **(See Area for Improvement 1).**

Improvements were needed to ensure that the planning and monitoring of staff training, development and support were being prioritised. This included the need to effectively identify team and individual learning. The inspection identified some gaps in staff mandatory training across the organisation. Additionally, leaders should develop a more effective way of recording formal staff support and supervision. **(See Requirement 1).**

Shakti's previous inspection set a requirement to review and update key policies within the organisation. Several policies continue to refer to outdated standards, codes of practice and legislation. It is critical that policies remain relevant and effectively guide staff practice. The organisation had recently made plans to address this, however the requirement will be continued. **(See Requirement 2).**

Women and young people using the service were confident in raising issues and highlighted opportunities to share feedback regarding the service they received. Processes were in place to gather views from staff, however not all staff were confident in raising concerns or making improvement suggestions. We did however consider that staff complaints and misconduct were being effectively dealt with; including oversight by the Board.

Requirements

1. By 21 November 2025 the provider must consistently adopt effective quality assurance and auditing processes to support improvement.

To do this, the provider must, at a minimum:

- a. strengthen roles and responsibilities, ensuring comprehensive oversight at all levels
- b. ensure internal quality assurance processes including regular audits are being undertaken and formally documented by managers to promote wellbeing and positive outcomes for people
- c. ensure effective management oversight of staff training and support and supervision

This is in order to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.' (HSCS 3.14).

2. By 21 November 2025, the provider must support staff to ensure they are following best practice and guidelines.

To do this, the provider must at a minimum:

- a. review and update their policies and procedures to reflect current best practice guidance - this includes, but is not limited to child protection, vulnerable adults, recruitment and complaints
- b. ensure that all staff are supported to understand any changes to the policies and procedures, including those with lead responsibilities for safeguarding and protection.

This is in order to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11).

Areas for improvement

1. To support children and families wellbeing, the provider should ensure a consistent approach to the recording and oversight of incidents, including reporting notifiable incidents to the Care Inspectorate.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.' (HSCS 3.20).

How good is our staff team?

4 - Good

We made an evaluation of good for this key question as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on experiences for children and their families.

Quality Indicator: 3.3 Staffing arrangements are right and staff work well together.

Children and their families benefitted from flexible staffing arrangements, with crisis and high risk situations being prioritised, providing women and children in refuge and the community with reliable support. Staff also supported each other to meet a variety of language needs. One woman commented "my decisions are respected and I can speak to them if there's anything I need to ask their advice or help."

Shakti staff had established trusting relationships with women and children; demonstrating compassion and understanding. This positively impacted on wellbeing and a sense of connection.

As previously highlighted, mandatory adult protection training had not been undertaken by all staff, however the team highlighted the wide range of learning opportunities available, including support to undertake Scottish Vocational Qualifications (SVQ) to enhance their knowledge and skills within their role. Additionally, external professionals were confident that the staff team were knowledgeable and effectively supported women.

Staff within the children's service had a clear understanding of their role but felt that this was not always understood by colleagues in other parts of the organisation. This impacted on the effectiveness of joint working. We were told "clearer communication....could reduce confusion and help staff feel more confident in their roles." This complexity of staff dynamics generated an absence of cohesion and trust within the organisation at times. These dynamics could potentially risk positive outcomes for people and delay staff raising issues of poor practice. It is important that the organisation ensures there is an open culture and effective joint working. **(See Area for Improvement 1).**

Areas for improvement

1. To support people to achieve the best outcomes, the provider must continue to undertake work to promote an open and trusting culture, supporting clear and effective communication across the organisation.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HCSC) which state that:

'My care and support is consistent and stable because people work together well.'(HSCS 3.19).

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

The provider should ensure that children and young people are cared for by staff who have been properly vetted prior to starting employment in the service. Safer recruitment practices must be implemented fully and appropriate documentation available for inspection.

This is in order to comply with SSI 2011/210 regulation 9 - a regulation that service providers shall have in place appropriate procedures to be followed in the recruitment of staff in relation to their suitability to work in the establishment both prior to their appointment and regularly thereafter.

This requirement was made on 13 April 2018.

Action taken on previous requirement

All staff have had relevant checks undertaken and are appropriately registered with the SSSC.

Met - within timescales

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

Initial referral paperwork for children and young people should be completed fully to ensure that young people's existing needs are identified, an appropriate initial risk assessment is in place and consent to participate is evidenced.

National Care Standards, Support Services, Standard 4: Support Arrangements.

This area for improvement was made on 13 April 2018.

Action taken since then

Proportional initial assessments are undertaken when young people are referred to the service and when they are allocated a children's worker.

Area for Improvement has been Met.

Previous area for improvement 2

Care plans should be further developed to include intended outcomes for the child or young person and to identify how they will be supported by staff to achieve this. It would be beneficial for plans to be written using a SMART approach (Specific, Measurable, Achievable, Realistic and Time-Bound) to allow progress to be monitored and reviewed.

National Care Standards, Support Services, Standard 4: Support Arrangements.

This area for improvement was made on 13 April 2018.

Action taken since then

These were in place for each young person, but there could be more detail about the specifics of goals.

Area for Improvement is partially Met.

Previous area for improvement 3

The service provider should review supervision and appraisal arrangements for staff and students and explore ways to further support individuals to engage regularly in reflective supervision/appraisal which identifies and supports the individual's professional development needs.

National Care Standards, Support Services, Standard 2: Management and Staffing Arrangements.

This area for improvement was made on 13 April 2018.

Action taken since then

This is an area that would continue to benefit from further review as although support and supervision arrangements are in place the frequency and impact of this is not clear.

Area for Improvement is Partially Met.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.2 People get the most out of life	4 - Good
How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

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