

# Kingdom Housing Support - 1 Housing Support Service

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**Type of inspection:**

Unannounced

**Completed on:**

7 February 2020

**Service provided by:**

Kingdom Support and Care CIC

**Service provider number:**

SP2016012806

**Service no:**

CS2016351149

## About the service

Kingdom Care at Home 1 and Kingdom Housing Support 1 is registered as a combined care at home service and housing support service. The service is provided by Kingdom Support and Care CIC.

The service is available to people with a range of needs for support, including older people, people with learning disabilities, people with mental health problems, people with physical disabilities, people with drug/alcohol misuse problems, people with visual/hearing impairment and people who are homeless.

The service support people in different settings including:

- Shared or single occupancy houses, with 24 hour support.
- Visiting support, varying from visiting once a week, to several times a day, or for most of the day, for people who have their own tenancies, or live with their families.

People who use the service can live in their own homes, or in homes provided by Kingdom Housing Association, or other housing providers. The service operates in western Fife, in the towns and surrounding areas of Dunfermline, Rosyth, Kirkcaldy and in the Falkirk Council area.

The service is provided by a manager, service co-ordinators, senior support workers and support workers, across five teams of Dunfermline, Rosyth, Outreach, Falkirk and Slamannan.

The aims of the service included:

'Our aim is to support people to have a safe and secure home, to live as independently as possible in their own home, to live as full a life as possible and to be part of their local community. We provide flexible, responsive and person centred support which assists people to live their lives as they wish and to enable them to meet their desired outcomes. We put people at the heart of planning their support and listen closely to:

- Help you to work out what support you need.
- Help you to plan and organise your support.
- Provide the direct support you need in a flexible way which meets your needs and desired outcomes.

We support people's right to be in control of their own lives and the right to make informed choices about their lives, including the opportunity for new experiences.'

This service registered with the Care Inspectorate on 31 March 2017.

## What people told us

Prior to this inspection, we sent the provider Care Standards Questionnaires (CSQs) to give to people who used the service and their relatives. We received five completed CSQs in return.

In addition, we met with seven people who used the service and spoke with five relatives. Some of the comments we heard were:

"My supports good."

"It takes me a while to get used to new staff and also to build up trust. I don't like bossy people or sudden changes to my rota."

"More senior staff presence required at weekends and evenings."

"Kingdom are alright."

"I can talk to staff too though, when I feel upset or angry."

"Went to open day in Falkirk and spoke with people who were looking for a job."

"They are almost like a shining knight."

"Kingdom have lots of staff however, seem to attract staff whose hearts are in it."

"I am happy with the support I am getting at present."

"I like the participation group. We talk about how to make things better."

"Very good staff. Company - good company."

"At times I've been a bit frustrated - staff changes are unsettling."

"Staff are really caring and work really well with my relative."

One person expressed their dissatisfaction with the support their relative received and some of the staff. With their consent, we discussed this further with the manager and asked that they contact the person directly.

## Self assessment

The service had not been asked to complete a self assessment in advance of the inspection. We looked at their own improvement plan and quality assurance paperwork.

## From this inspection we graded this service as:

<b>Quality of care and support</b>	5 - Very Good
<b>Quality of staffing</b>	not assessed
<b>Quality of management and leadership</b>	5 - Very Good

## What the service does well

During this inspection we considered evidence presented in relation to the quality of care and support, and the quality of management and leadership. We evaluated the service to be performing at a very good level in both these areas. An evaluation of very good applies to performance that demonstrates major strengths in supporting positive outcomes for people. There are very few areas for improvement. Those that do exist will have minimal adverse impact on people's experiences and outcomes. While opportunities are taken to strive for excellence

within a culture of continuous improvement, performance evaluated as very good does not require significant adjustment.

People could be confident that they would be fully involved in developing and reviewing their personal plan. People we spoke to told us about their support, and what, and who, was important to them. Some plans identified goals or outcomes that people wanted to work towards. Support plans had been reviewed regularly in consultation with the person and relevant others, such as social workers, family members and legal guardians.

Where people had been appointed a legal proxy, such as a guardian, welfare guardian, agreements set out clearly the expectations for communication in relation to the powers granted and their delegation. When we spoke with guardians, they confirmed they were kept up-to-date with information and consulted as they would expect to be.

Where people's independence, control and choice are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively. We saw that there had been significant consultation with professionals in relation to the restrictions that were required in someone's home to help keep them safe. Appropriate risk assessments had been created, along with person specific staff induction, which linked to positive behaviour support plans and the legal framework around this, which helped to ensure restrictions were the minimum required.

We saw very good information recorded in relation to supporting people whose behaviour may be perceived as challenging - a positive behaviour advisor was available to help guide staff with assessment, recording and planning support. A range of very good materials had been created that provided prompts to staff, that helped to gather information to help them understand the behaviour, what it might mean and how they should respond. We heard of an excellent example, where using information recorded about behaviours had helped to prevent an increase in medication, where this was being considered. This positive approach and outlook helped to ensure people enjoyed fulfilling lives, where their behaviour was better understood and responded to in a positive manner, which helped to improve outcomes for individuals.

Some people managed their own medication, whilst other people required full assistance from staff. Medication assessments made this clear. The provider were reviewing their medication policy and practice, and new training materials had been created and piloted in another service with good results. This would be rolled out across the service areas, and included comprehensive competency assessments that would be repeated regularly with staff to help maintain their skills and knowledge.

People were achieving some very good/excellent outcomes, including the opportunity to try driving a car, completing the kilt walk and getting involved in arranging events and activities through the participation group. People felt that they had a say in their support and were enthusiastic about their roles in the participation group.

Staff told us they received a range of training and were confident they could request further training where a need was identified. Where gaps had been identified, the training co-ordinator was working hard to find solutions and source appropriate training for staff that is required for supporting some people that require to use the service.

We saw that the Provider had a range of methods that they used to evaluate the quality of the service. Peer audits were used, where staff from one registered service audited another service and vice versa. Other methods included, team meetings, staff supervision and the participation group, which had become more established over the past year, with people making suggestions on how they think the service can continue to improve and develop.

Service plans were in place for each area of the service. Plans provided information about areas for development over the following year, as well as identifying the training required by the staff team working in that area.

There was a central log for recording complaints and their outcomes. People we spoke to told us they were confident that any concerns they had would be listened to and responded to appropriately. It would also be good to see informal concerns and complaints recorded in a similar way, so that there is a clear record of actions taken to help resolve issues before they result in a formal complaint. We saw that the service had a log of positive comments received from families and other stakeholders. It was good to see that this feedback was then cascaded to the teams concerned.

People we spoke to told us they were overall very happy with the support that was provided. Some people told us that it was unsettling when staff changed however, agreed that in the main they liked their regular staff and felt they were respected and listened to.

## What the service could do better

We identified two support plans that required further information around the support people required to eat and drink, and in particular to minimise the risk of choking, where this was an identified risk. The manager took immediate action during our inspection to add further information.

Whilst reviews were well documented, it could be clearer how specific goals or outcomes are being reviewed.

The manager must ensure that staff follow the provider's policy and procedure in relation to safe administration of medication. We highlighted an example where this required further clarity.

It wasn't clear how service plans were being reviewed, or who was involved in this. The plans we saw could improve further by regular review and update of the actions set, and by further involvement from people who use the service, their relatives, professionals, staff, the new Health and Social Care Standards (HSCS) and good practice guidance. The plan should be shared with people who use the service, their representatives and staff.

Bank/relief staff described scant induction and training/supervision opportunities. This can be challenging when bank staff have other jobs and their availability can make planning training and supervision difficult to arrange. Staff did tell us they felt well supported.

## Requirements

Number of requirements: 0

## Recommendations

Number of recommendations: 0

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

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

### Previous requirements

There are no outstanding requirements.

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

### Previous recommendations

There are no outstanding recommendations.

## Inspection and grading history

Date	Type	Gradings
3 Dec 2018	Announced (short notice)	Care and support 6 - Excellent Environment Not assessed Staffing 6 - Excellent Management and leadership 5 - Very good
28 Mar 2018	Announced (short notice)	Care and support 6 - Excellent Environment Not assessed Staffing 6 - Excellent Management and leadership 5 - Very good

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