

Kingdom Housing Support - 2 Housing Support Service

James Bank Centre
James Street
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KY12 7QE

Telephone: 01383 741220

Type of inspection:

Unannounced

Completed on:

7 February 2020

Service provided by:

Kingdom Support and Care CIC

Service provider number:

SP2016012806

Service no:

CS2016351147

About the service

Kingdom Care at Home 2 and Kingdom Housing Support 2 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 sensory impairments, people with drug/alcohol misuse problems, people who have been homeless and a service for Chinese older people.

The service supports 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, to people who have their own tenancies, or live with their families.

Not all people who use the service are living in Kingdom Housing Association properties. The service is provided by a manager, coordinators, senior support workers and support workers in seven teams; Balfarg, Collydean, Cupar, Locheil, Kennoway, Saunders Court and James Bank Outreach.

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.'

What people told us

Prior to this inspection we received 34 completed Care Standards Questionnaires (CSQs), of these 26 strongly agreed, seven agreed and one disagreed that they were overall happy with the care and support provided by the service, comments included;

"I would like things to stay as they are."

"I get great support with total respect."

"The service that supports me is very caring and helpful, always there for you anytime you just have to phone them even just for some reassurance. They have helped me and still do help me a very lot, I am always singing their praises. I wouldn't have any other service providing the help to me."

"This is a good service and I have no complaints."

"Kingdom is the best service that X uses in that they are flexible to his needs and provide an excellent service. The care staff really do ensure that needs are met in a professional and friendly manner."

"Received support from several different people from kingdom, they have all been very caring and are very good dealing with difficult cognitive impairment and mental health problems. They make a significant difference to improve quality of life and alleviate health problems."

"My sister is happy with the care she receives due to her having the same staff weekly, she is aware that if things are not working she can speak to family and staff."

The person who disagreed did not raise any concerns about the quality of care and support provided by the service, we discussed the concern raised in the questionnaire and the manager told us the person was discussing their concerns with the local authority who are responsible for commission the care package for people.

During the inspection we spoke with 12 people using the service and one relative, this is what they told us;

"The support is really good, I get on well with the staff."

"Support is alright, all the staff are nice friendly and respectful, always know who is working with me."

"I think the support is good, I like being active, walking, swimming, holidays, staff are respectful that this is my house."

"It's absolutely brilliant, the best thing she has done, happy as Larry, we are kept fully up-to-date."

"The support is ok, they are friendly, helpful and respectful."

"It's quite good, they help me with my dishes and cooking, staff are totally respectful, chap on my door, give me space when I want it, I love it."

"They are needing an extra staff member, they always say they are short staffed, staff are doing their best, definitely happy here."

"I like living in Cupar, I go to ten pin bowling, swimming, I feel safe and happy here."

"It's good, good food, good atmosphere, I go about by myself I like that a lot better, I want more money but apart from that I am quite happy."

"I do get good support, staff help me to get out and about, I was out shopping today and they help me with my bills, staff listen to me when I say I want to do things."

"It's going great couldn't be better, they are always there if you need them, they are flexible with the support and I always know who is coming."

"Support is good though I get the odd lazy one, it's been dealt with, ninety-five per cent of the time I know who is coming in, the only thing to make it better is to have staff overnight again."

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:

Quality of care and support	5 - Very Good
Quality of staffing	not assessed
Quality of management and leadership	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 (see areas for improvement).

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 required we saw that people had limits to freedom support plans which detailed which restrictions were in place and how these were assessed as being the least possible intervention in order to keep people safe. People had care programme approach (CPA) support plans and these contained community treatment orders (CTO) information and where application had been made to change these, the information in these plans was very detailed. We discussed how to ensure the information was easily accessible for staff and we felt it would be helpful if these were kept together with the Kingdom support plans which should cross reference to these.

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 were piloted in one part of the 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 such as going fishing, visiting other parts of the country where they hadn't been before, going to the gym, swimming, learning independent living skills, and getting involved in arranging events and activities through the participation group. At the time of the inspection people using the service were coming together as part of a talk it out group, this was the first meeting and it was hoped that these would become a regular occurrence. One health professional spoken with told us they felt the staff had contributed greatly to the success of people transferring from a hospital setting into supported living, that the staff had effectively supported people with their mental health issues meaning that they were more stable and by ensuring that there was consistency in staff and the support provided, these were significant factors that had helped people to stay out of hospital.

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 providers training Co-Ordinator would work to find solutions and source appropriate training for staff. We discussed trauma informed training for people with mental health issues and we were pleased to see that this training was available and the manager told us they would book staff on this when places became available (see areas for improvement).

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 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 that was 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

In one outreach file we saw that despite an individuals circumstances having changed that the support plans, risk assessments had not been updated, we also saw that review minutes contained little detail of these concerns, discussions held and actions to be taken. Ways that this could be improved were discussed during feedback. and the manager was committed to doing so.

Some staff spoken with raised a concern specifically where they were supporting individuals who had been identified as being at high risk of choking that they would like training in how to deal with this.

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

Whilst looking at incidents in one part of the service we became aware of at least two Adult Support and Protection (ASP) concerns which had not been reported to the Care Inspectorate. We have asked the manager to ensure that these are submitted retrospectively with full details of any actions that required to be taken and the outcomes of any investigations.

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.

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 Environment Staffing Management and leadership	6 - Excellent Not assessed 6 - Excellent 6 - Excellent
28 Mar 2018	Announced (short notice)	Care and support Environment Staffing Management and leadership	6 - Excellent Not assessed 6 - Excellent 6 - Excellent

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