

## Fife Support Service Housing Support Service

West Bridge Mill  
Bridge Street  
Kirkcaldy  
KY1 1TE

Telephone: 01592644048

**Type of inspection:**

Unannounced

**Completed on:**

17 December 2019

**Service provided by:**

LinkLiving Limited

**Service provider number:**

SP2004004684

**Service no:**

CS2004061282

## About the service

Fife Support Service is registered with the Care Inspectorate to provide support to adults living in their own homes and in shared accommodation at West Bridge Mill Kirkcaldy.

The service has two staff teams, one providing the accommodation based housing support service and the other providing support in the community. At the time of our inspection the service was supporting approximately 300 people.

The accommodation with housing support service was taking part in a pilot project with Fife Council to end the use of B&B as emergency accommodation. This project consisted of providing six rooms for single people who required access to emergency accommodation and this has been reviewed and extended .

Service users at West Bridge Mill live in short term assured tenancies, these being individual or sharing with one or two other people. This service can accommodate up to twenty six service users.

The service is one of a number of services operated by Link Living Limited which has the following aims and objectives:

- To focus on each individual, with a flexible, creative approach to fulfil their needs and potential.
- To involve each person every step of the way.
- To build long term relationships and partnerships by being caring, supportive, empathetic, responsive, reassuring, respectful and by listening to develop trust.
- To be practical, reliable, consistent and tenacious, providing good teamwork to all we support.
- To provide services that are flexible, tailored uniquely to each individual's needs to actively encourage service user involvement to continually improve.

## What people told us

For this inspection we received the views of 26 people. These views were given to us in a number of ways including; questionnaires, a small group discussion and on a one to one basis with the inspector.

People were happy with the service they received from LinkLiving. We heard that people had developed new skills, achieved goals important to them, increased in confidence and developed meaningful friendships as a result of the support. People felt respected, valued and listened to by LinkLiving and were confident their feedback was taken seriously.

Specific comments included:

"Help me maintain my home. Help give me more confidence"

"Support was good for me"

"Thanks LinkLiving for everything"

"I feel happy with the help I receive"

"I feel there is a big difference in my health since I have been getting support"

"I think LinkLiving have been a great help for me"

"I have used this service for more than 12 months and have always found the staff to be professional, understanding and always do their best to accommodate my needs"

"I feel aware that the service is understaffed when there are holidays or sick leave. This can often put pressure on remaining staff. I often worry that this could affect my support"

## Self assessment

We did not ask the service to submit a self-assessment to us before our inspection. During our visit we looked at how the service evaluated and assured quality.

## 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

People were happy with the support they received from LinkLiving. We heard ways in which people had been supported to be more independent, have greater confidence and widen their social circle. Staff worked flexibly with people in a person centred way. This meant they took time to know and understand the person and used this knowledge to provide tailored support. People told us they felt respected, heard and in control of their own support. They understood their right to make a complaint and felt confident they would be listened to.

The provider had a clear commitment to delivering a "trauma informed service". This way of working understands, recognises and responds to the effects of trauma experienced by some people. All staff had received trauma training and demonstrated to us a high level of expertise and compassion. LinkLiving clearly understood that being a trauma informed service began with nurturing a staff team who feel valued and whose well-being is prioritised. Staff we spoke with felt supported and cared for by their direct line managers, the organisation and the various support services available to staff. LinkLiving should be commended for their exemplary practice in this area.

People can continue to be reassured that LinkLiving work hard to keep them safe. This was reflected in how they managed incidents, completed assessments of risk, employed new staff and how they responded to suspected harm. This included notifying the right people. Staff we spoke with told us they received regular adult support and protection training and were confident in their roles and responsibilities. in keeping people free from harm.

During our last inspection we had asked the provider to consider Naloxone training for staff. We were pleased to see that this suggestion had been progressed and all direct support staff in the accommodation team were now fully trained and the drug available to them. Naloxone is a life-saving drug which can reverse the effects of an opioid overdose. We heard that the manager would like to explore the possibility of training security guards in

the administration of Naloxone. We highlighted the availability of a nasal version of the drug which may be useful in future discussions.

Staff had worked hard to develop good working relationships with other health and social care professionals. This included professionals in mental health, drug and alcohol recovery, employability and trauma informed support services. Written records and discussions with people during our visit showed that staff were responsive and well-informed in recognising what support might be beneficial. This meant that people received the right help at the right time.

We were impressed by the level of motivation and commitment from all staff to deliver the best service to people they worked with. There was a clear sense of teamwork and mutual respect. Staff felt supported and led by example. There was a culture of learning from past events rather than seeking to apportion blame. This is important in nurturing a team who feel empowered to take informed risks and decisions.

## What the service could do better

The service had a development plan in place that was closely linked to the organisational strategy. During our feedback we suggested how this local plan should be improved to demonstrate shared and dynamic goals. The plan should be informed by quality assurance processes and the views of significant stakeholders such as people supported by LinkLiving and the staff team. We sign posted the provider to the Care Inspectorate guidance "Self Evaluation for Improvement" to provide additional guidance.

Since our last inspection the provider had employed a Quality Assurance Officer. We saw the work they had already achieved during the three months they had been in post. This included a process for three monthly report monitoring and a yearly audit of the service. We made some suggestions for improvement to the quality assurance process. This included

- having clear links to the service development plan
- being clear about how people using the service were involved
- adjusting the framework to demonstrate the quality outcomes people should expect
- referring to the correct standards and legislation

Having a robust process for checking quality is an important part of delivering high quality services. We thought this additional post had been a positive step and we look forward to seeing how this has been built upon during our next inspection.

We asked the registered manager and service delivery manager for the housing support/care at home service to give particular consideration to how quality was assured for staff who worked alone. We discussed different ways this could be achieved which the provider was keen to consider further.

We had previously told the provider to make improvements to the information within peoples' plans of support. During this inspection we looked at the personal information for 20 people. Everyone had a plan in place which detailed their personal outcomes. However, whilst some plans were very detailed, there was a lack of consistency in written information. We were fully reassured that this was being progressed by the management team. Additional training, support and quality checks were being progressed to ensure consistency in how peoples' support was planned and reviewed. We look forward to seeing further improvements at our next inspection.

During our feedback we spoke about the importance of reflection in staff learning. This is a way of looking back on an event and talking about what worked well and what could have been improved. We suggested ways to build reflection into existing processes such as meetings and supervision.

## Requirements

Number of requirements: 0

## Recommendations

Number of recommendations: 0

## Complaints

Please see Care Inspectorate website ([www.careinspectorate.com](http://www.careinspectorate.com)) for details of complaints about the service which have been upheld.

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

### Previous requirements

#### Requirement 1

The provider must by 2 November 2019 ensure support plans are in place which contain accurate and detailed information of the support provided with actions taken to demonstrate when issues are raised.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards 1.15 which states ' my personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' and Health and Social Care Standard 1.19, which states 'my care and support meets my needs and is right for me'.

It is also necessary to comply with Regulation 4(1)(a) (Welfare of Service Users) and 5(1) (Personal Plans) of the Social Care and Social Work Improvement Scotland Regulations 2011.

To be completed by: 02 November 2019

This is to ensure care and support is consistent with Health and Social Care Standard 1.15: My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.

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 requirement was made on 2 October 2019.**

## Action taken on previous requirement

This requirement was made following a complaint which was investigated by the Care Inspectorate in October 2019.

During this inspection we looked at a sample of 20 personal plans. We were satisfied that everybody had a plan in place which detailed their personal outcomes.

A Quality Assurance Officer was now in post who had developed a process for checking the information within peoples' personal plans was of the expected standard. This would make sure good practice was followed.

We recognised that this was a large service where work to improve the detail of personal plans was on-going. However, we were satisfied that the provider had a commitment to supporting this improvement.

More information about this can be found within the body of the report.

This requirement had been fully met within the timescale we set.

## Met - within timescales

### Requirement 2

The provider must by 2 November 2019 ensure their complaints policy is adhered to. This includes accurate records of all complaints, correspondence, outcomes and actions for improvement.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards 4.19 which states, I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

It is also necessary to comply with Regulation 18(2)(3) (Complaints) of the Social Care and Social Work Improvement Scotland Regulations 2011.

To be completed by: 02 November 2019.

This is to ensure care and support is consistent with Health and Social Care Standard 4.19: I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

This is in order to comply with: Regulation 18(3) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

**This requirement was made on 2 October 2019.**

## Action taken on previous requirement

This requirement was made following a complaint which was investigated by the Care Inspectorate in October 2019.

We heard that a lessons learned approach had been taken following our investigation with the staff team. This was important in making sure improvements in how they worked was identified. Staff confirmed with us that they had been part of these discussions.

A Quality Assurance Officer was now in post who had developed a process for checking how complaints had been managed. This would make sure good practice was followed.

People we spoke with confirmed the complaints procedure had been made available for them and they were reminded of their right to complain regularly. People were confident that any concerns would be dealt with quickly and sensitively.

We were satisfied that this was a listening organisation who had developed robust processes for managing and recording complaints.

This requirement had been fully met within the timescale we set.

## Met - within timescales

## 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								
6 Dec 2018	Unannounced	<table border="0"> <tr> <td>Care and support</td> <td>5 - Very good</td> </tr> <tr> <td>Environment</td> <td>Not assessed</td> </tr> <tr> <td>Staffing</td> <td>Not assessed</td> </tr> <tr> <td>Management and leadership</td> <td>5 - Very good</td> </tr> </table>	Care and support	5 - Very good	Environment	Not assessed	Staffing	Not assessed	Management and leadership	5 - Very good
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Environment	Not assessed									
Staffing	Not assessed									
Management and leadership	5 - Very good									
21 Dec 2017	Unannounced	<table border="0"> <tr> <td>Care and support</td> <td>5 - Very good</td> </tr> <tr> <td>Environment</td> <td>Not assessed</td> </tr> <tr> <td>Staffing</td> <td>5 - Very good</td> </tr> <tr> <td>Management and leadership</td> <td>Not assessed</td> </tr> </table>	Care and support	5 - Very good	Environment	Not assessed	Staffing	5 - Very good	Management and leadership	Not assessed
Care and support	5 - Very good									
Environment	Not assessed									
Staffing	5 - Very good									
Management and leadership	Not assessed									
21 Sep 2016	Unannounced	Care and support 5 - Very good								

Date	Type	Gradings
		Environment Staffing Management and leadership
		Not assessed Not assessed 5 - Very good
29 May 2015	Announced (short notice)	Care and support Environment Staffing Management and leadership
		4 - Good Not assessed 5 - Very good 5 - Very good
29 May 2014	Announced (short notice)	Care and support Environment Staffing Management and leadership
		4 - Good Not assessed 5 - Very good 4 - Good
19 Dec 2013	Announced (short notice)	Care and support Environment Staffing Management and leadership
		2 - Weak Not assessed 4 - Good 2 - Weak
26 Oct 2012	Announced (short notice)	Care and support Environment Staffing Management and leadership
		4 - Good Not assessed 4 - Good 3 - Adequate
28 Jun 2010	Announced	Care and support Environment Staffing Management and leadership
		4 - Good Not assessed 5 - Very good Not assessed
17 Aug 2009	Announced	Care and support Environment Staffing Management and leadership
		4 - Good Not assessed 4 - Good 5 - Very good
18 Sep 2008	Announced	Care and support Environment Staffing Management and leadership
		4 - Good Not assessed 5 - Very good 4 - Good

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