

# Kingdom Housing Support - James Bank Housing Support Service

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**Type of inspection:**  
Announced (short notice)

**Completed on:**  
31 October 2023

**Service provided by:**  
Kingdom Support and Care CIC

**Service provider number:**  
SP2016012806

**Service no:**  
CS2016351141

## About the service

The service is registered with the Care Inspectorate to provide a housing support service to people who are experiencing homelessness. The service provides temporary accommodation across four sites in West and Central Fife. An assertive outreach team provides visiting support to people who may be without housing or at risk of homelessness.

## About the inspection

This was a short notice inspection which took place on 31 October 2023 and was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

This was a focused follow-up inspection to assess whether the provider had met the requirement to improve we made at our last inspection of 01 August 2023.

In considering this progress we:

- spoke with the registered manager
- spoke with two service coordinators and two senior support workers
- examined records relating to the management of incidents and accidents.

## Key messages

- Senior staff working in the service understood their responsibilities in recognising and reporting harm.
- The manager had improved oversight of significant events and had introduced systems to identify patterns or trends.
- Improvements were being made to make sure staff received the right training and that this was clearly recorded.
- Improvements were being made to staff support systems such as one to one supervision.

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

### Requirements

#### Requirement 1

By 30 October 2023, the provider must ensure that supported people receive care that meets their health, safety and wellbeing needs and works to protect them from harm. To do this, the provider must, at a minimum, ensure:

- ensure there is a robust and consistent organisational process in place to report incidents and accidents which fully details the outcome and the steps taken to mitigate future risk
- ensure appropriate and timely referrals and notifications are made to relevant agencies and individuals. This must include, but not be limited to, adult protection referrals, health and social care professionals, police, and Care Inspectorate
- ensure the registered manager has clear oversight of all incidents and accidents and maintains records which evidence regular and planned analysis of significant events.

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

and to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which states that:

"I use a service and organisation that are well led and managed" (HSCS 4.23) and "I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities" (HSCS 3.20).

**This requirement was made on 1 August 2023.**

## Action taken on previous requirement

The provider had introduced a procedure to support accurate reporting of significant events within the service. Service coordinators and senior support workers we spoke with confirmed they had received training on the reporting procedure and were confident in their responsibilities.

Records had significantly improved since our previous inspection. We saw records now included full details of each event alongside the safeguarding steps which had been taken or introduced. A monthly analysis of all events was gathered by business support to make sure the manager of the service had clear oversight. This meant that patterns or trends could be identified as well as making sure incidents had been fully addressed. Having this improved recording structure and oversight protected people from future harm.

We were satisfied that the right people had been informed following significant events. This included adult protection teams, health and social care professionals and the Care Inspectorate. The detail of notifications made to the Care Inspectorate had significantly improved, providing reassurance staff were working in line with the new procedure. Three incidents which occurred immediately following our last inspection had not been captured within the provider's internal reporting structure. However, we were confident the right steps had been taken to address and improve this.

We were satisfied the procedures introduced by the provider and the learning undertaken by senior staff were working to protect people from harm. This requirement was considered fully met.

## 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

The provider should ensure that all staff have the knowledge, skills and understanding to meet the needs of people using the service. In order to achieve this the provider should:

- a. have full oversight of the training staff have undertaken
- b. take steps to address any training gaps identified
- c. review the training requirements for staff working within the service which takes account the needs of supported people.

This is in order to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which states that:

"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).

**This area for improvement was made on 1 August 2023.**

**Action taken since then**

The provider submitted an action plan to us following our inspection of 01 August 2023 detailing how these improvements would be made.

Although we received an update of progress, we did not fully consider this area for improvement during this inspection. This will be fully assessed at our next inspection of the service.

**Previous area for improvement 2**

To ensure people experience support from staff who are able to reflect on their practice and adhere to the codes and standards which underpin their role, the provider should:

- a. ensure staff have regular and planned opportunities to reflect on their practice
- b. develop planned and regular observations of staff practice
- c. review the planning and delivery of supervision to ensure all staff can maximise the benefits of one to one support.

This is in order to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which states that:

"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).

**This area for improvement was made on 1 August 2023.**

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**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).

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