

Care service inspection report

Full inspection

Frontline Fife Homelessness Services Housing Support Service

57-59 Viewforth Street
Kirkcaldy



HAPPY TO TRANSLATE

Service provided by: Frontline Fife Homelessness Services

Service provider number: SP2004006594

Care service number: CS2004071634

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

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Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of care and support	5	Very Good
Quality of staffing	5	Very Good
Quality of management and leadership	5	Very Good

What the service does well

The service provides effective housing support to people who are homeless or at risk of homelessness. It trains and supports its staff, it is rigorous about its development and improvement and it supports people towards realising their strengths and improving outcomes in their lives.

What the service could do better

The service could make some improvements in its engagement with service users and could improve its quality monitoring of staff practice. These areas are seen as fine tuning rather than as serious deficits.

What the service has done since the last inspection

The service had made the following developments:-

- Staff appraisal and supervision has been improved.
- The service has entered into partnership with other services in the area to provide its service.
- Support plans have been re-formatted to have an emphasis on strengths and outcomes.

Conclusion

This is a very good service which is providing support for people who report a high level of satisfaction in their own outcomes as a result of working with Frontline.

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Frontline Fife Homelessness Service provides housing support and accommodation services to people in Fife affected by homelessness. The service is provided to people aged 16 years and over from four Home 4 Good centres based in Dunfermline, Kirkcaldy, Leven and Cupar. A Home 4 Good centre is described as a "one stop shop" for people needing advice about housing and homelessness, and they provide a gateway to access appropriate support. Support can be offered through temporary accommodation (the core and cluster team) and/or floating support to people in the community. Frontline Fife also works in partnership with Fife Council to provide a through-care service to young people in the area who have previously been accommodated.

Referrals are made by people affected by homelessness and by Fife Council. The organisation has been commissioned by Fife Council to provide a 'prevention first' service. This operates through the Home 4 Good centres and encourages people to seek help at an early stage. This proactive approach can be successful at supporting people to deal with their problems before they become homeless. (The service is about to embark in partnership working with 13 other charities as part of the PSP project funded by the local authority.)

The service is 'committed to ending homelessness across Fife, we work with those in crisis who are homeless and with those whose life circumstances place them at risk of becoming homeless'.

Recommendations

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of care and support - Grade 5 - Very Good

Quality of staffing - Grade 5 - Very Good

Quality of management and leadership - Grade 5 - Very Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0345 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

We wrote this report after a short-term announced inspection which took place on 16 and 17 March 2016. A visit to the service on day two and the phoning of stakeholders and service users on day one.

As requested by us, the service sent us an annual return. The Care Inspectorate wrote to the service to request completion of the self assessment form which was duly completed.

40 questionnaires were sent to the service to distribute to service users - to-date 13 have been returned.

In this inspection we gathered evidence from the following sources:-

- Interviews with 5 staff.
- Interviews with 8 service users.
- Interviews with 3 stakeholders who have all worked alongside the service in relation to people who need support.
- Interviews with manager, performance manager and CEO of the service.
- Inspection of personal plans.
- Inspection of records.
- Inspection of policies and procedures.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firescotland.gov.uk

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The Care Inspectorate received an extensively detailed and fully completed self assessment document from the service provider. We were very impressed with the way this had been completed and with the information they had provided under each theme that we were inspecting.

Taking the views of people using the care service into account

8 service users were spoken with during the inspection and comments from 13 care service questionnaires, received by the Care Inspectorate, were taken into account. The views expressed were largely positive about the service. Here are some of the things people said:-

- All good.
- I feel that since accessing the service my life has improved greatly. I have been able to access further help available to me that I would not have known about before. The staff and my own support worker are always very professional and fully qualified to deal with a number of issues: e.g. sanctions/benefits, helping with a new tenancy, sourcing goods and energy saving advice. Recommending self-improvement courses and volunteering opportunities.
- Staff have been fantastic and very helpful.

- This service has been vital. Giving me the support and guidance to move forward in my life. The service and staff involved have been excellent, I would highly recommend it to anyone who needs it.
- My worker's belief in me lets me have confidence in myself.
- I know someone is looking out for me so I feel less isolated.
- Staff are reliable, punctual and friendly.
- My case worker phones me every week to see how I am doing.
- They come with me to appointments if I need them to.
- They have helped me with phone-calls and paperwork.
- I can't thank them enough.
- I do have a support plan and it does have info on how to complain.
- Superb!

Taking carers' views into account

3 housing professionals were interviewed as part of this inspection. They were all positive about the service. Here are some of the things they said:-

- The service is reactive to changes in the benefit landscape.
- A very proactive service in terms of its own development and response to need.
- A good rounded service.
- Always turn up to meetings and are involved in homelessness projects across Fife.
- Service users seem happy whenever we have checked.
- A well-established service with a very good reputation.
- They provide a variety of projects to address homelessness issues all of which are effective.

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

Statement 1

“We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.”

Service Strengths

This service had a very good level of participation for service users. This was characterised by an ethos of empowerment within the service. Here are some examples of the strengths:-

- Service users spoken with confirmed that they had written agreements for the support they would receive and that review meetings were regularly held to look at any changes or developments. People felt that the service listened to their views and addressed any issues identified. Review minutes were seen in the support plans that were sampled at inspection.
- Support plans contained a record of desired outcomes of service users and what the service was doing to assist people to attain them. One support plan examined showed a service user's goals to be correspondence support, engaging with GP, paying council tax and getting house insurance. Support plans were strengths and outcomes focussed and covered areas of life such as health, accommodation,

- safety, finances and employment. Service users felt they were assisted by the service to participate fully in their own support goals.
- Exit questionnaires were completed with service users to gain feedback from them on how the service worked for them and what could have been done better. Results were collated and used to facilitate improvement.
 - At review meetings service users were routinely asked about the quality of the service.
 - In the through-care part of the service the performance manager used 1:1 interviews with service users to gain views on how the service was working for them.
 - Other parts of the service have drop-in facilities where staff can get alongside people to gather their views.
 - All service users received a complaints procedure which had been recently re-vamped. The Care Inspectorate had not received any complaints in the last year.
 - The service was strongly committed to an ethos of empowerment for people and this showed through in the way it was constantly reviewing the services it provided to meet people's needs in an ever changing benefits and mental health provision landscape.

The inspector was impressed with the quality of relationships staff had built with service users in all parts of the organisation. Service users themselves spoke about how good the staff were and that if they had any issues they would not hesitate to go to them confident in a resolution. This is why a grade of very good has been given here.

Areas for improvement

The service should consider further improvements to its participation practice such as service user involvement in recruitment. See recommendation 1.

Grade

5 - Very Good

Number of requirements - 0

Recommendations

Number of recommendations - 1

1. The service should look at a wider array of methods of involving service users in service improvement such as involvement in recruitment of new staff.

National Care Standards 8 Housing Support Services - Expressing Your Views. You are encouraged and helped to make your views known on any aspects of the housing support service.

Statement 3

“We ensure that service users' health and wellbeing needs are met.”

Service Strengths

The support for peoples health and wellbeing in this service was very good. Here are some examples of evidence to support this:-

- The service worked closely with other local support agencies and could assist people to access mental health professionals, addiction help groups, food banks, white goods for setting up home. One service user who spoke with the inspector stated that the service was a wealth of information and that if they did not know how to help him then they knew another agency that could.
- The tenancy support part of the service was highly regarded by the majority of service users spoken with. People felt that the various different types of practical support they got to help maintain their own tenancies and lives was very good. People spoke about support to write letters, check their benefits, and go to appointments. Both service users and stakeholders spoke about how the service was flexible in this respect and was prepared to support people in any way they wanted.
- Each service user had their own support plan which was written in a strengths focussed way: outlining the goals they wished to achieve. Service users spoken with confirmed they had a support plan and had participated in agreeing what it should contain. They also confirmed that the service held regular reviews to monitor how things were going. The inspector found support plans to be up-to-date, person centred and outcome focussed.
- The service runs a self-help group for service users who can go along and discuss their recovery and any issues around it.

- Signposting: Service users spoke about how staff could signpost them to almost any service that they needed in their lives. Things spoken about by service users were; volunteering, employment, doctor's visits, food banks, grants, benefits, debt advice, addiction counselling and energy efficiency.
- In addition to the support plan, everyone had a risk assessment. These were written in consultation with service users and took into consideration the person's previous history and how vulnerable they were.
- Vulnerable people: Staff were aware that the people they supported could be vulnerable, and had been involved in passing concerns to other agencies to make sure that people were protected. The inspector saw evidence of people using adult support procedures to make sure that measures were taken to protect people from harm.

This service impressed the inspector with its commitment to the people it supported. Their values and person centred approach was coupled with a strong advocacy for people with many different issues related to homelessness. A grade of very good is merited.

Areas for improvement

The service was rolling out a new and more strengths focussed support plan format. The inspector hoped that this had been completed for all service users by the next inspection.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 1

"We ensure that service users and carers participate in assessing and improving the quality of staffing in the service."

Service Strengths

Please see Quality Theme 1 statement 1 for information in relation to this statement.

Areas for improvement

Please see Quality Theme 1 statement 1 for information in relation to this statement.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Statement 3

“We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.”

Service Strengths

We found that the service had a professional and well-trained workforce who were confident in their roles. Here are some of its strengths:-

- Staff at the service had a high level of training. Training records and staff interviews confirmed that all staff had been through an induction programme when they began work. Staff also received training that they had identified as being useful for them. One coordinator's record showed a variety of post related training had been undertaken in the last year: welfare reform, families and communities, project management, equality and diversity, safe lone working. A case worker had received welfare reform, working with young women, stay warm stay well, strength based approach training in the last year.
- Staff all stated that they felt that they were supported to do their job and their ideas were valued by management. Most felt they were part of a team that was supportive. They felt they had enough time to do their allotted jobs though sometimes it was busy. There were regular team meetings. Service users who were interviewed were also very enthusiastic about the staff. People highlighted staff qualities as: friendly, reliable, keep confidences, supportive in times of stress, knowledgeable on local resources, non-judgemental.
- All staff spoken with confirmed they got regular supervision at which they could discuss their ideas, their performance and the people they supported. All benefitted from an annual appraisal designed to support their professional development. Staff were also informally observed and given feedback on their performance.

- Interviews with staff showed that they were all aware of the National Care Standards and could apply them to their work role. Many spoken with confirmed they had been given SSSC codes of practice. One service spoken with by the inspector said that they had respected his confidentiality and this was very important to him.
- All staff have their own service email account and this helped them to keep up-to-date with developments within the service and to be communicated with on matters that concerned them.

The inspector was impressed with the calibre of staff at the service. They were well informed, confident and knew what they were trying to do when supporting people. The attention to a person centred approach was impressive. Tenant satisfaction with staff was also high which is why a grade of very good has been awarded for this statement.

Areas for improvement

The inspector felt that the service needed to do formal observations of staff practice in order to ensure that professional behaviour was promoted at all times. See recommendation 1.

Grade

5 - Very Good

Number of requirements - 0

Recommendations

Number of recommendations - 1

1. The service should undertake formal observation of staff practice while they are out doing their job in order to ensure that staff quality was maintained that professional behaviour was promoted at all times.

National Care Standards 3 Housing Support Services - Management and Staffing Arrangements. 4 You can be confident that all the staff use methods that reflect up to date knowledge and best practice guidance, and that the management is continuously striving to improve practice.

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

Statement 1

"We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service."

Service Strengths

Please see Quality Theme 1 statement 1 for information in relation to this statement.

Areas for improvement

Please see Quality Theme 1 statement 1 for information in relation to this statement.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Statement 4

“We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide”

Service Strengths

The service had a very good quality assurance system supported by its provider and from within the service itself. Here are some of the strengths that were identified:-

- It is clear that the health and wellbeing of service users was at the core of what this service does with its person centred and detailed approach. (The information for this can be found in Quality Theme 1 statement 3).
- The service had a good level of participation whereby service users, staff and other stakeholders can have an input into what the service delivers. (The information for this can be found in Quality Theme 1 statement 1).
- The service had effective systems in place to support staff, to develop their skills via training and supervision - they also involve staff in developing the service. (The information for this can be found in Quality Theme 3 statement 3).
- The service is continually planning its development and this was evidenced in its annual business plan. This outlined how the service was going to develop and who was responsible for achieving this. The current plan included the following goals: Safety first culture, to increase service user involvement, delivery of services which are transparent consistent and comply with regulatory and professional standards.
- The service produces an annual health and safety report which drew together all the data from monitoring health and safety including assessment of risk, audits and setting objectives. Support plans are also regularly audited.
- Staff kept abreast of developments in the housing landscape by attending forums outside of the organisation. (Public Social Partnership involvement, conferences, drug and alcohol forums, housing forums).

- The service has its own performance manager who contributes towards quality assurance within the service.

This service had very good quality assurance systems in place which were part of the production of a highly valued service. Both staff and service users spoken with were happy with the service. This is why a grade of very good has been given here.

Areas for improvement

The service should continue to seek out ways to improve its quality.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

4 What the service has done to meet any requirements we made at our last inspection

Previous requirements

1. The provider must develop the complaints policy and leaflet to include the correct timescale in which complainants will be notified of the outcome of a complaint.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, No 210: 18 Complaints

Timescale: Within 1 month of receipt of this report.

This requirement was made on 03 February 2014

Met - New complaints information seen by inspector.

Met - Within Timescales

2. The provider must ensure that all staff undertake training in supporting and protecting adults from harm, and that individual staff members receive updated training, to take account of any changes to legislation, local policies and reporting arrangements.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, No 210: 9(2)(b) Fitness of employees.

Timescale: Within three months of receipt of this report.

This requirement was made on 03 February 2014

Met - Ample evidence of adult protection training taking place for staff.

Met - Within Timescales

5 What the service has done to meet any recommendations we made at our last inspection

Previous recommendations

There are no outstanding recommendations.

6 Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

7 Enforcements

We have taken no enforcement action against this care service since the last inspection.

8 Additional Information

There is no additional information.

9 Inspection and grading history

Date	Type	Gradings	
3 Feb 2014	Announced (Short Notice)	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 4 - Good 4 - Good
14 Feb 2013	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good Not Assessed 3 - Adequate 2 - Weak
7 Oct 2010	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed Not Assessed Not Assessed
1 Apr 2009	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 4 - Good 4 - Good

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