

# Inspection report

## Link Living - Edinburgh Young Persons Service Housing Support Service

23 Dalmeny Street  
Edinburgh EH6 8PG

**Inspected by:** Philip Hacking  
**(Care Commission Officer)**

**Type of inspection:** Announced

**Inspection completed on:** 5 November 2007

**Service Number**

CS2004061287

**Service name**

Link Living - Edinburgh Young Persons Service

**Service address**23 Dalmeny Street  
Edinburgh EH6 8PG**Provider Number**

SP2004004684

**Provider Name**

Link Living

**Inspected By**Philip Hacking  
Care Commission Officer**Inspection Type**

Announced

**Inspection Completed**

5 November 2007

**Period since last inspection**

12 months

**Local Office Address**South East Region  
Stuart House  
Eskmills  
Musselburgh  
East Lothian  
EH21 7BP  
Tel: 0131 653 4100

## **Introduction**

Link Living Edinburgh Young People's Service are registered to provide Care at Home and Housing Support to young people aged between 16-25 years throughout the city of Edinburgh area. Practical, emotional and social support is provided to Link Living service users.

The service was first registered with the Care Commission in July 2004. The service regional office is located in Dalmeny Street, Leith and the service provides support to service users throughout the city of Edinburgh.

The service states in the aims and objectives that 'we provide flexible, responsive support, individually planned with each service user'.

## **Basis of Report**

This announced inspection was carried out by Philip Hacking, Care Commission Officer, over three days from Monday 5 November to Wednesday 7 November 2007.

Before the Inspection

The Annual Return

The service submitted a completed Annual Return as requested by the Care Commission.

The Self-Evaluation Form

The service submitted a self-evaluation form as requested by the Care Commission.

Regulation Support Assessment

This service was inspected after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers: complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required as a result. The inspection was then based upon the relevant inspection focus area(s) and follow up on any recommendations and requirements from previous inspections, complaints or other regulatory activity.

During the inspection process

Staff at inspection

Service Manager

1 Team Leader

8 Support Workers

Evidence

Training plan and staff training records  
Induction programme  
Service user support plans  
Risk assessment procedures and records  
Incident/Accident recording systems  
Child protection policies and procedures  
Complaint records  
Records of staff qualifications  
Quality assurance methods and records  
Discussion with the Service Manager, Team Leader , Support Workers  
Discussion with eight service users by telephone contact

Inspection Focus Areas and associated National Care Standards for 2007/08

Inspection Focus Areas (IFA's) and associated National Care Standards for 2007/08

Protecting People  
Child protection  
Restraint  
SSSC Codes and Staff Training  
Quality Assurance  
Standard 3- Management and Staffing arrangements  
Standard 8- Expressing your Views

Fire Safety Issues

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at [www.infoscotland.com/firelaw](http://www.infoscotland.com/firelaw)

#### **Action taken on requirements in last Inspection Report**

The provider has confirmed that requirements made over the preceding inspection year through Link Living services concerning human resources policy and procedures in safe recruitment have been fully addressed.

A further audit of the provider's safer recruitment files will be undertaken in December 2007.

#### **Comments on Self-Evaluation**

The self evaluation document was completed to a high standard. It comprehensively outlined the strengths as well as identifying areas the service planned to further develop in relation to ongoing training for staff and plans for a service users led evaluation of the service.

#### **View of Service Users**

Service users spoken with on the telephone as part of the inspection commented positively

regarding the service offered in the Young Person's service. People spoken with advised that staff were supportive and always available to talk to for advice and guidance.

Some of the comments made by individuals included:

"They are so kind. I have been through such a lot in my life and Link Living have always been there for me."

"My key worker is a good laugh and has always encouraged me to be more independent which I have needed."

"The staff are always reliable and there is someone to speak to whenever I need to talk."

"Link Living have given me my confidence back and that is down to working with me over a long time."

"I feel that the staff are fantastic!"

### **View of Carers**

No carers were spoken with during this inspection.

## **Regulations / Principles**

**Regulation :**

**Strengths**

**Areas for Development**

## **National Care Standards**

### **National Care Standard Number 3: Housing Support Services - Management and Staffing Arrangements**

**Strengths**

Not all the elements of this standard were assessed at this inspection.

The inspection Focus Areas (IFA's) were on Protecting People, sub-sections:-

Child Protection

Restraint

Adult Protection

SSSC Codes and Staff Training.

Protecting People- Child Protection

Child Protection policies and procedures along with supporting information and guidance for staff were in place. This was included in staff induction programme. Staff spoken with during the inspection demonstrated an understanding of their roles and responsibilities in relation to child protection issues. They were aware of how to implement child protection procedures if required. Staff also confirmed that they were aware of policies and procedures in relation to the protection of children.

Protecting People- Restraint

The service had a policy on restraint which was under review and in draft format at the time of the inspection. There were also related policies and procedures in relation to risk management and managing violence and aggression. Staff had received training and were knowledgeable about personal safety guidance and procedures. Detailed risk assessment procedures and records were in place. These were reviewed and updated as required, highlighted any issues specific to individual service users and considered measures to reduce any identified risks. The Service Manager reported that no incidents of restraint had occurred within the service. The service understood that any incident of restraint would require to be fully recorded.

Protecting People- Adult Protection

The service had policies and procedures in place in relation to the protection of vulnerable adults. The service had a copy of the local Inter-Agency guidance in the event of any adult protection concerns. It was apparent that staff were aware that they had responsibilities in relation to adult protection, specific mandatory training planned for November 2007 for all

staff should ensure that they are fully informed about new legislation, policies, procedures and guidance.

#### Protecting People- SSSC Codes and staff training

A significant strength of this service was in the clear emphasis which was placed on staff training and development and the support given to staff to continue to develop skills and knowledge as well as to obtain relevant qualifications. The service had a comprehensive learning and development policy which set out how the training needs of staff would be identified and met within the organisation. Plans were progressing in supporting staff to meet the requirements of the Scottish Social Services Council in the future. A detailed induction for new staff was in place which identified individual training needs linked to personal and professional developments and to enable staff to understand and meet service users' differing needs. Staff spoke very positively of the training and development opportunities that exist with the organisation.

### **Areas for Development**

The policy on restraint required some further development to explore the definitions of restraint, to clarify staff responsibilities and duty of care, to include details of staff training and practice issues including risk assessment and support planning, if this was appropriate. The policy should also refer to best practice guidance 'Rights, Risks and Limits to Freedom'- Mental Welfare Commission 2006 and 'Safe to Wander'- Mental Welfare Commission 2003. (see Requirement 1)

The recording format for risk assessment should be further developed to include specific reference to restraint to clearly show that this is being considered as part of the initial risk assessment procedures.

Whilst staff have received training on dealing with challenging behaviour and personal safety issues, current training programmes, including induction, do not specifically cover restraint. Induction and ongoing training should be expanded to ensure that staff have training in relation to restraint that is appropriate to the service. (see Requirement 2)

As identified in the self evaluation document, the service is in the process of updating it's competency management system for use within the provider's annual appraisal system. Progress with this will be monitored at the next inspection.

As planned, all staff should access training in relation to adult protection later in the year.

### **National Care Standard Number 8: Housing Support Services - Expressing Your Views**

#### **Strengths**

Not all the elements of this standard were inspected. On this occasion the focus was on Quality Assurance.

The provider held an Investors in People Award. Good practice was seen in the many ways that the provider sought to involve service users in all aspects of the organisation.

At a local level it was apparent that there were elements of a robust quality assurance system in place with various ways of seeking service users' feedback on the quality of

service they received. This included support reviews, complaint procedures and staff exit interviews.

There were positive arrangements in place for staff to provide the organisation with feedback through meetings, supervision and reviews. There were some opportunities for management to directly observe and monitor staff practice through visits, support reviews and through Scottish Vocational Qualifications (SVQ) assessments.

### **Areas for Development**

The service should continue to draw together aspects of existing good practice to develop a clear and robust system of monitoring and evaluating the quality of the service being provided. Systems to ensure the regular direct observation of staff practice should be further developed and implemented for all staff.

## **Enforcement**

There has been no enforcement action against this service since the last inspection.

## **Other Information**

The Care Commission Officer discussed with the Service Manager the 'Regulating for Improvement' project- a development which will significantly change how the Care Commission will regulate services from April 2008. It will mean better information, more involvement with people who use care services and their carers, and the introduction of clear gradings which will help people make more informed choices about the care services they want to use.

The Service Manager and the Young Person's Team have begun to familiarise themselves with the information and briefings that are available on the Care Commission website.

## **Requirements**

1. The provider will review and develop their policy in relation to restraint.

This is in order to comply with: SSI 2002/114 Regulation 4 (1) (a)(c)- a requirement that providers shall make proper provision for the health and welfare of service users.

Timescale: 12 months from the date of receipt of this report.

2. Staff should receive appropriate training, assessment and record keeping associated with restraint relevant to the needs and nature of the service.

This is in order to comply with: SSI 2002/114 Regulation 13 (c) (i)- a requirement that a provider shall, having regard for the size and nature and needs of service users ensure that persons employed in the provision of the care service receive training appropriate to the work they are to perform.

Timescale: 12 months from the date of receipt of this report.

## **Recommendations**

No recommendations were identified at this inspection.

**Philip Hacking**

**Care Commission Officer**