

# Care service inspection report

Full inspection

## Waverley Care Milestone Care Home Service

113 Oxfangs Road North  
Edinburgh

Service provided by: Waverley Care

Service provider number: SP2010011113

Care service number: CS2011280502

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	6	Excellent
Quality of environment	5	Very Good
Quality of staffing	5	Very Good
Quality of management and leadership	5	Very Good

## What the service does well

People who were using the service and those who had used the service told us they were very satisfied with the quality of the care and support. They said the service was well run and that when they gave their views, these were listened to.

People received support from qualified and skilled staff who worked very well together to deliver a person centred service. There was an excellent ethos of respect.

The service had embraced change. All staff were eager to further develop the team and to continue to improve practice.

Waverley Care maintained contact with most people between stays, for example, through its Outreach service, drop in groups and other social events.

### **What the service could do better**

We made a small number of suggestions for further improvement to the service.

### **What the service has done since the last inspection**

The service had worked with a management consultancy firm over a number of months. This had resulted in more effective ways of working, which meant more time for staff to spend working directly with service users.

There was new care documentation, with recovery steps and clear and agreed goals for each residential stay.

The service had improved its medication systems, including training and competence assessments, regular medication audits. It promoted self managed medication.

Staff had completed Adult Support and Protection training at level 2, and the Manager had completed this at level 3.

The service had made progress in most of the other areas identified for improvement at the last inspection.

A Quality Assurance statement had been developed.

### **Conclusion**

People received a high quality specialist HIV/Hepatitis C residential service.

# 1 About the service we inspected

**Waverley Care Milestone** is part of a range of services operated by Waverley Care, a registered charity, from its headquarters in Edinburgh.

Waverley Care's vision is that everyone living with HIV or Hepatitis C should receive the highest standards of care and support to enable them to lead healthy, independent and fulfilling lives free from stigma and prejudice.

Milestone underwent refurbishment and re-opened in February 2014. It is a ten bedded unit with ample communal facilities. The service is commissioned to provide a short stay residential service for people who are living with a blood borne virus. The service offers 'step up' and 'step down' care, to prevent hospital admission or speed hospital discharge. Short breaks can also be provided for preventative care and maintenance.

Milestone was also a hub for the Waverley Care community and hosted various groups and events, which were open to all service users.

The service is open 365 days a year. The service provides waking night staff and a management on-call system.

At the time of the inspection there were six residents.

## 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 6 - Excellent**

**Quality of environment - 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](http://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

This report was written following an unannounced visits to the service on 11 January 2016 and a follow on visit on 14 January 2016. Feedback was shared with the Manager on 28 January 2016.

During the inspection we spoke with four residents during their stay and with four people visiting the service.

We gathered evidence from various sources, including:

- Discussion with the Senior Manager (the Registered Manager), the Facilities Administrator, Referral and Assessment Co-ordinator, Senior - Activities and Events Co-ordinator, Senior - Residential, Catering staff, Support Workers.
- Comments from professionals.
- Insurance certificate.
- Inspection of the premises.
- Complaints records.
- Accident and incident logs.
- A sample of staff induction and supervision records and training plans.
- New reporting systems: handover, one to one records, rotas.
- A sample of personal care plans, risk assessments and reviews.
- Residents meeting records.
- Staff Bulletins.
- Waverley Care's Code of Conduct and Personal Relationships Policy, Quality Matters - Quality Assurance Statement, Learning and Development plan 2015-16.
- External management consultant information.

### 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](http://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.

We received a fully completed self assessment from the service. We were satisfied that this was a fair evaluation of what the service did well and the areas they planned to develop. We agreed with the suggested grades for the statements we looked at during this inspection.

## Taking the views of people using the care service into account

We spoke with eight service users. All were very happy with the service. Comments are included under the quality statements.

## Taking carers' views into account

We did not speak with relatives during this inspection.

## 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: 6 - Excellent

#### 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

At this inspection, we found that the performance of the service was excellent in relation to participation.

There was a strong culture of service user and carer participation. Waverley Care was committed to listening and responding to the views of people using this service, in line with its strategic plan, which stated that it would "enable people to be at the forefront of service design, development and delivery."

Service users views had shaped the City of Edinburgh Council's plans for HIV services and the decision to renew funding Waverley Care to provide a 'Step up' and 'Step down' service. New admissions criteria had been agreed with the Council and service users had been given information and reassurance about the new assessment process. The service was aware of the importance of gathering evidence of its effectiveness and the outcomes achieved.

Waverley Care had a new website with better information about its staff and services. It included news about developments and trends in treatment. People were also invited to get involved and give feedback.

Service users continued to choose the range of activities on offer. Activities and groups were also evaluated and adjustments made. For example, more art and craft activities for the women's' group.

There were some rules attached to a stay at Milestone. People were given information about the service and what to expect and each received a service agreement. Service users we spoke with said they supported these.

Following referral, Milestone's Assessment Co-ordinator would first carry out an informal visit to talk about what the service could offer. It was felt that this reduced people's anxiety and smoothed the way for a joint assessment with social work colleagues, where an individual plan of support would be agreed with each person. New service users could also visit Milestone prior to their stay.

Service users agreed and signed their care plan at the start of each period. We saw that there were weekly reviews of support to review goals and ensure that the support was satisfactory. At the end of each stay service users were asked for feedback about their stay. This was discussed at regular team meetings.

We saw how service users were comfortable approaching staff for assistance. There was a relaxed, open and warm atmosphere.

All service users were invited to join the Waverley Care Service User Involvement Group. A meeting and a Burns Night supper was being planned. This group gave people the opportunity to talk to senior staff including Waverley Care's Chief Executive, and to influence policy. We heard that the Forum had grown and three Milestone service users were regular attendees.

We heard that service users sometimes chose to give feedback through a third-party, such as an advocacy service, social worker or other representative.

We saw a system was in place for recording, investigating and responding to complaints.

The service had a large "YOU SAID - WE DID" noticeboard in the main reception area. Two example were pinned up, showing how the service had listened to

and acted on feedback. A leaflet entitled 'Your right to complain' was also on display.

During the inspection a service user bought the kitchen staff a plaque, which read "This Kitchen is seasoned with love." We heard that another person had given the catering staff a card and their own 'Michelin star'.

During the drop in café we observed a lot of warmth, fun and laughter.

### **Comments from service users included:**

- "Milestone has changed quite a bit. I was involved in the consultation for the changes and I feel my views counted. I am enjoying this stay. The staff are more visible now, there is more one to one. Staff are keen to get together with you. All staff are respectful and skilled. The boss is busy but always pops out for a chat and a coffee. She is running the place well and I think the staff think so too. I didn't expect staff to visit me when I was in hospital, they were great."
- "It's wonderful, I like the company here. There are strict rules, but that's OK. I would like to stay longer. The staff help me with my health. I enjoy the outreach activities too. Staff are wonderful and respectful, they know their jobs well. The boss is wonderful too. There is nothing I would change."
- "This is a kind, respectful and warm place. I wouldn't change anything. There is enough to do when I'm here, like swimming, the women's group, knitting group. Also I can keep to my own routine. I can eat when my body wants food and go to bed when I want. It isn't like hospital - it's much better. It only took me one day to feel comfortable here."
- "The food is nice."
- "I am still getting to know the staff. I gave feedback after a stay and things were sorted which was good. They made adjustments in bathroom. I like the new finishing touches, it makes it nice to have a bath. The staff get it ready with nice bath stuff. It is less clinical now."

- "The Manager was great when I took suddenly unwell."

### Comments from professionals included:

- "Generally Waverley Care continue to offer beneficial support and involvement to the patients I come into contact with."

### Areas for improvement

Although people had been consulted about the changes to the service, we heard that some people found it difficult adjusting to the changed expectations of a stay at Milestone. For example, the emphasis on working towards outcomes. We suggested the service could include more about these expectations on its website and in its literature.

The service planned to up-date and complete the service user information pack.

The service planned to re-introduce the keyworker system for each person for the duration of their stay.

### Grade

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Statement 3

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

### Service Strengths

We found that the performance of the service was excellent for this statement.

Up to ten people were resident at any one time, but each person's support was individually tailored. Crisis admissions were only considered for known service users.

We saw improved outcome focussed care planning which took into account each individual's needs. People identified and prioritised their goals for each residential stay. We heard that this led to better clarity for staff. The shift coordinator allocated tasks and staff had structured individual time with service users to focus on their goals. Care plan reviews were usually held weekly. Where this was de-motivating or unhelpful these could be slightly longer apart. New care goals could be added, providing that the goals agreed with social work were addressed.

Staff had excellent knowledge of the needs of the client group and took account of physical, emotional, mental and sexual health along with factors such as: self-esteem, relationships, safety. They understood the challenges faced by people receiving Hepatitis C treatments, the long-term effects of medication and the effects of chaotic lifestyles. Staff kept up to date with developments in treatment and changing criteria for treatment.

Staff were trained and confident in talking to people about ways to keep safe. The service felt that there was now a greater recognition of its role in maintenance and preventative work.

The service had recently introduced a Hepatitis C peer support group, in partnership with another organisation. This was seen as an invaluable part of service users' recovery, a chance to share experiences and 'give something back'.

During the inspection, we heard that staff had acted quickly to get a resident to hospital when they became suddenly unwell. From the log of incidents and accidents we also saw that appropriate action was taken by staff.

The service aimed to prevent challenging situations through a process of risk assessment and de-escalation. Serious breaches of the Milestone rules were dealt with by asking a person to leave.

The service assessed each person's support needs with managing their medication. Where possible, people managed their own medication. This could be developed in stages, with staff assistance.

Specific nutritional needs were met. For example: soft texture, high protein, small portions, access to snacks and drinks. People told us that the food was good. One person said her vegetarian diet was very well catered for.

People could access complimentary therapies, such as Reiki, along with Waverley Care's other services, such as "life coaching". Spiritual and pastoral needs were supported by Waverley Care's Chaplain who was based at Milestone.

Details of the events programme were on the noticeboards. Service users said there was something on every day. At weekends, when more volunteers were available, there were more trips out and about. We met people attending a drop-in café. We heard about the planned Burns supper and the choir.

Milestone was a lively social space and people benefitted from a range of contacts with local schools, churches, volunteers and neighbours. We saw that visitors were welcome and could join in some activities and purchase a meal. These connections were seen as important to building people's self-esteem and reducing stigma and isolation. Joining in was optional, but staff encouraged participation. They were also sensitive to service users who preferred to keep themselves to themselves and to have one to one contact with staff. Two people told us they valued the 'peace and quiet' that Milestone offered.

We also saw that staff helped service users to find things they would like to do after their stay, for example, joining adult education classes and fulfilling ambitions.

Staff also worked in close cooperation with other agencies, such as social work, health professionals and housing.

Waverley Care had a long history of working with people from overseas and awareness of isolation. There was support for people to learn English.

## Staff comments included:

"There is more one to one time, with every person every day. We check on people to see if they want a chat. The quieter ones could get overlooked."

## Comments from professionals included:

- "Milestone offers a wide range of supports for its service user's both in the residential setting (Step Up, Step Down, Treatment Support) and in the community from the Outreach Team which enables work undertaken in the unit to be continued in the service user's own home. We recognise this to be an important factor in ensuring, where possible, more focussed outcomes for individuals, and their carers/families. Inter agency panel meetings are held on a weekly basis between Milestone, NHS and Health and Social Care in order to discuss new referrals to the service and to give updates and outcomes for the service user's engaged with Milestone. The support on offer has certainly in most cases made a positive difference to both individuals and carers. Milestone staff encourage service user's to be part of their support plan in order to tailor them to their short and longer term needs. Plans and assessments are reviewed and evaluated on a regular basis ensuring that the right support is being offered and that agreed goals and outcomes are being achieved. Milestone staff support service user's by educating and raising greater awareness regarding HIV and Hepatitis C infection and towards reducing risks if involved in substance misuse, hopefully preventing re-infection of a BBV. This is also the case in connection with enabling and educating service user's to comply with their HIV and Hepatitis C drug regimes. Milestone have also been looking



at ways of improving their support planning and evaluation processes which ultimately will improve the outcomes and goals of their client group."

- "In terms of outcomes I see all groups of patients supported to cope in the community with outreach services; manage to complete treatment for HCV; stabilise after hospital care (HIV & HCV)- with the support of respite/step-up & step-down care, depending on individual need. Care is individual and reported by the patients as effective and supportive. I continue to make regular referrals to Milestone House and in my opinion it remains an essential and effective service for a significant number of people whose lives are impacted by BBV's - facilitating access to treatment and long-term stability where needed."

### Areas for improvement

There had been a number of falls in the service. Staff were aware of the increasing frailty of some service users. We shared the falls prevention good practice which is available on our website at:

<http://www.careinspectorate.com/index.php/guidance?id=2737>

We also spoke about having a range of seating options for people. See guidance at:

[http://www.careinspectorate.com/images/documents/2803/Seating matters leaflet.pdf](http://www.careinspectorate.com/images/documents/2803/Seating%20matters%20leaflet.pdf)

### Grade

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 2: Quality of Environment

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 environment within the service."

### Service Strengths

At this inspection, we found that the performance of the service was excellent in relation to participation.

Milestone was a special and a safe place for people, many service users had a strong sense of attachment to the building and its history. People's views had been taken into account during the refurbishment. The communal areas, such as the TV room and snooker area, were set up to suit people's preferences. They also contributed to the appearance of the environment through the arts and crafts that were displayed around the building.

We saw that communal spaces had been finished with art, noticeboards and decorative touches. This made it appear welcoming. The bathroom had new decorative touches and the breakfast room and conservatory were more cosy with new sofas and a TV for watching movies and sports in the evenings. People said that they were very pleased, especially with the shower rooms and breakfast room. One service users said that feedback they had given about the bathroom had led to better facilities, which they were pleased about.

Service users could come and go freely during the day time. There were quiet spaces and outdoor spaces for people to use. One service user planned to try out her motorised scooter on the premises and this was welcomed.

We heard that service users had worked alongside volunteers to maintaining the gardens and tending to plants.

Health and safety issues were discussed with service users at the weekly residents meeting.

### Areas for improvement

We suggested that the fencing separating this service from the wing operated by another care provider could be decorated in some way.

### Grade

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Statement 2

"We make sure that the environment is safe and service users are protected."

### Service Strengths

We found that the service had very good systems to ensure the environment was safe.

There was a new health and safety policy which set out people's responsibilities. The premises and equipment were very well maintained.

Housekeeping provision was provided over seven days. During the inspection we found that Milestone was warm, clean and odour free.

A full refurbishment had taken place in 2014. Completion documentation was in place. We noted that all the discarded items had now been removed and the care parking area had been tidied up.

Each service user had their own bedroom with en-suite wet floor shower. These had been fitted to a high standard. Each room had a TV, fridge and tea and coffee-making facilities. People were encouraged to keep their own bedrooms clean and tidy during their stay but they could have help if needed.

All rooms had a patio door to the gardens and we saw that garden furniture allowed people a quiet space to be outside. The gardens were well maintained. There was a supply of grit for icy conditions.

There were facilities for service users to wash their personal laundry. Other laundry was bagged appropriately and sent off-site for cleaning. We saw there were systems for the uplift of waste.

We saw that the Fire Officer and the Environmental Health Officer visited periodically. We were told that remedial action had been taken to meet the Fire Officers recommendations.

There were COSHH records for hazardous substances, such as cleaning materials. There were environmental risk assessments.

There were systems to check and secure the building overnight. The service had created a comfortable sleepover room for staff, so that this cover could be provided when necessary.

Work to develop the gardens had begun. There was a new path, suitable for wheelchairs, leading down to a seating area with raised planters. The service had obtained planning permission for an eco shed, which would be built with volunteers and pupils from a nearby school. This would become a space for woodwork and other projects.

We saw that accidents and incidents were recorded. The service took a zero tolerance to substance misuse. It was made clear to service users that this mean that they would be asked to leave.

### Areas for improvement

The service intended to create a health and safety manual for staff.

Following the recent heavy rainfall, there had been problems with leaks in the roof. The service said a new contractor would be sought to resolve this.

The service planned to check and clear out some of its old archive/stores.

### 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

We found that the performance of the service was very good in relation to participation. Service users could be confident that they could influence the quality of staffing in the service.

We heard that service users had the chance to comment on job descriptions and to take part in the recruitment of staff. This could range from an informal meeting with candidates, devising questions to sitting on the interview panel.

New staff had a probationary period and feedback from service users was used to inform the confirmation of permanent posts.

We heard that service users could sit in during staff training sessions, for example, treatment up-dates, welfare benefits. The Manager said that this also provided staff with an insight into service users concerns.

The Manager was based at Milestone and had a hands on approach, joining activities and meal times. In this way she was able to chat to service users, keep abreast of issues and group dynamics and observe staff practice. There was also regular contact with families/carers, enabling feedback about staff performance.

### Areas for improvement

The Manager planned to invite service users to create interview questions or scenarios, at the next recruitment.

We suggested that service users could be told about the role of the Scottish Social Services Council (SSSC), the codes of practice that staff must follow and information about what they should expect from their care worker. For example:

<http://www.sssc.uk.com/about-the-sssc/multimedia-library/publications/60-protecting-the-public/2944-care-leaflet>

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## Statement 4

"We ensure that everyone working in the service has an ethos of respect towards service users and each other."

### Service Strengths

We found that the performance of the service was very good in relation to this statement. Milestone had a strong user focus, in keeping with Waverley Care's aims to respect, encourage and inspire people. Staff had a common understanding of Waverley Care's ethos and what Milestone aimed to provide.

Staff took the time to get to know each service user well, they understood what was important to them, how they communicated and what worked well for them. Goals for each stay were developed collaboratively with service users. We observed staff encourage and enable people to use their skills and abilities.

The service also worked closely with family and carers.

Service users had a key to their own rooms. Staff did not check on people or their rooms unless this had been agreed beforehand or there was a safety concern.

People were spoken about with warmth and respect. We observed how all of the staff, including catering, domestic and volunteers, interacted positively with service users. We could see that service users were comfortable and at ease with staff and that they could raise issues. Meals and coffee breaks were taken all together and people were included in conversations.

Service users were supported by staff who were valued by the organisation. There was excellent investment in their training and development. Most Support Worker had achieved SVQ level 3, with the remaining two progressing through the assessment. Other training included: fire safety, moving and handling, first aid, motivational interviewing, food hygiene, mental health, medication, adult support and protection. The catering staff were fully integrated into the team - attending training to increase knowledge of HIV and Hepatitis C. Volunteers also received induction and training.



The majority of the care staff had registered with the SSSC. Others were in the process of doing so. Registration of the social services workforce is part of the drive to raise standards and strengthen the professionalism of social services. The Manager and 2 staff members are registered with the Nursing and Midwifery Council.

Staff received regular supervision (including bank staff). The supervision system incorporated an element of on-going appraisal of performance.

The service had developed its volunteer base, most recently with soldiers from the nearby barracks who had cleared and tidied the grounds. Several social work students had been hosted and the first mental health nursing student had just started on placement. The service welcomed and valued the contribution of volunteers and the influence of students.

It was evident that staff enjoyed their work, and felt supported by the organisation.

## Staff comments included:

- "I enjoy the positive relationships with service users and have had good feedback. People are appreciative of the support. It's a therapeutic environment, with a positive ethos. I was pleased to support as service user to secure all the welfare benefits they were entitled to."
- "It has taken me a lot of years to find a job I love!"
- "Being included in training sessions and away days which helps us feel part of the team. We like to speak to and get to know the service users. We like it when people pop back in after their stay, so we see how they were getting on after their treatment."

## Comments from professionals included:

- "Milestone staff have a high level of respect and care for their service users. They tend to be very supportive and friendly however, they do have clear boundaries with what is acceptable and what is not. Support is offered in a person centred, holistic manner and whilst there have been a number

of staff changes and use of agency staff, there remains a high level of respect and professionalism towards service users and staff alike. Staff are supported to attend training sessions and updates and have regular supervision sessions in order to develop their own knowledge and skills base, keeping up to date with developments in the areas of BBV's and associated support needs. Staff have always been open and transparent in their communication with service user's and with each other and external bodies. Where there have been any differences of opinions, these issues are dealt with timeously and in most cases effectively. All new staff and volunteers receive an induction programme and are given training to enable them to undertake their work. Staff have regular team meetings which keep them up to date with what is happening within their own structure and with external agencies. Waverley Care's Chaplain also offers support to service user's and staff if required."

- "I do not have a lot of direct contact with the staff but I hear positive things from the patients and the joint meetings I attend with the service leads demonstrates a respectful and caring attitude. The bit of (mostly telephone) contact that I have with the staff is professional and caring."

## Areas for improvement

Establishing a settled staff team had taken longer than expected. We heard that there were sometimes tensions between staff members. We also saw that some staff were new to care work. It could be useful to make regular reference to the SSSC's Code of Conduct, for example through discussions in team meetings and in supervision. These are available at:

<http://www.sssc.uk.com/about-the-sssc/codes-of-practice/what-are-the-codes-of-practice>

From looking at supervision records we found that previous actions were not always reviewed. We suggested that where individual improvements were expected, it would be helpful if these were made explicit, so that progress can be followed through.

## Staff comments included:

- "There are no bad staff but sometimes there are hurt feelings, it is early days for staff to build trust and work together."
- "Team building is a work in progress."

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## 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

The service had a Service User Involvement Policy. Its new (draft) quality assurance statement - Quality Matters January 2016 made stated that involving and consulting service users was systematic and consistent and would inform and influence services.

Service users had regular contact with the Manager. The Chief Executive was a regular visitor and well-known to many service users. Waverley Care's Chaplain was also based at Milestone. We saw that senior staff were familiar to people.

Service users could contribute to the development of the whole service through the Waverley Care Service User Forum and through representation on the Board of Management. We heard that one service user was currently represented on the Board.

### Comments from professionals included:

- "There is a service user forum which informs Waverley Care of what is working well and what gaps there are in the services being provided. This forum continues to provide feedback on the ongoing development of services being provided by Waverley Care Milestone. Milestone themselves have also asked for their services to be assessed by an independent organisation, in order for staff to improve areas of time management, IT Skills and systems, improve

effective working skills. This demonstrates their commitment to staff and ultimately to service users."

### **Areas for improvement**

Service users were informed of their rights and their responsibilities prior to admission. Where staff made decisions about asking a service user to leave before their intended date, these were based on individual situations, an assessment of risk and management were consulted. In order for people to see that these decision were fair, we suggested that Milestone could develop and share a set of criteria.

### **Comments from Professionals included:**

"I am aware that there have been issues with patients allegedly using drugs and/or drinking over the course of the year and subsequently being asked to leave. This seems entirely appropriate and is in my opinion to be expected as this is/has been a coping mechanism for a long time for some people. However some patients have reported feeling that not everyone is being treated exactly the same - e.g. some told they can not go back and others asked back within a few days. This will obviously depend on the individual concerned and has to be taken objectively - as it is based on what the patients tell me when I see them."

### **Grade**

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## Statement 3

"To encourage good quality care, we promote leadership values throughout the workforce."

### Service Strengths

At this inspection, we found that the performance of the service was very good in relation to this statement.

Staff were expected to carry a degree of autonomy and responsibility in their day-to-day work. Support Workers conducted one to one work with service users, led care plan reviews, resident meetings and assisted with group work. They also maintained contact with other agencies. The service identified residents with the highest need and ensured that staff knew the specific goals for each person.

The service had worked with a management consultancy firm over a number of months. The impact was said to be 'huge' and positive. For example: streamlined work practices and a reduction in meetings meant more time to spend with service users; better planning for admissions and new reporting systems meant better uptake of spaces.

The new staff rota system included a designated shift coordinator who would oversee tasks. Communication systems had improved and provided staff with all the information they needed to work in a safe and efficient way. Staff said they were looking forward to new opportunities, such as regularly facilitating groups.

When Milestone was not fully occupied, Support Workers could be expected to work alone. Staff said that they felt confident to do so, with the support of management on-call. There were systems in place such as an alarm system and mobile phones. The Manager said that staff member's decision-making skills had improved and calls to management were appropriate.

We heard that all staff supported newer colleagues and students. We saw that induction records had improved and both inductee and supervisor signed when completed.

Other work was delegated to individuals, for example organising special events, charring team meetings.

Staff were very well briefed on developments within Waverley Care, through bulletins and training days.

**Staff comments:**

- "I can make suggestions and they are always well received, I was given some additional tasks and can take on new tasks."
- "It has been busy, we have been chasing our tails, but it is beginning to come together. Everyone is starting to notice the changes. The managers are supportive manager. I am looking forward to taking on more responsibility, like key working. Training in medication administration has taken place and I have been assessed. The systems feel a lot more safe and staff are clearer. Supervision takes place. I can ask any of the managers for advice. We can be on our own on shift. It is OK now that I have experience and there is provision for a second person and on-call."
- "The staff team have shown themselves to be up for a challenge and have been able to have professional, thoughtful discussions about their concerns but have also been able to see the benefits of the changes."
- "We had been fire-fighting but it is getting much better. Staff are clearer about their work now."

**Comments from professionals included:**

- "Even though there is clear leadership within the Milestone Management and Senior staff members, all staff are supported to contribute to the development and running of the unit. I am aware that planned team building days and training are high on the agenda for staff and volunteers. Opportunities are given to staff to develop their skills in a variety of areas in addition to the mandatory training that has to be undertaken. All staff are valued equally for their work and their views are sought in relation to

the ongoing development of the organisation. I feel that this gives a sense of purpose and responsibility and ownership. Milestone have always supported student placements and this does generate discussions around policies and procedures and questions why certain things are done in the way that they are done and this helps with developing good practice. Staff have regular supervision and a yearly appraisal system is in place which may encourage and promote staff to develop further their leadership skills. Staff have opportunities to take part in Waverley Care Operational meetings."

## Areas for improvement

We discussed the notification guidance (including the new guidance on controlled drug errors).

We suggested that the medication competency could be repeated at 6 months rather than yearly.

In order to develop the team, the service could consider using the leadership resources available at the SSSC:

<http://www.stepintoleadership.info/>

## 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

There are no outstanding requirements.



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

### Previous recommendations

**1. Competency testing in medication administration and recording should be prioritised and the medication checking systems strengthened.**

**This was in accordance with NCS 15 Short Breaks and Respite Care Services for Adults - Keeping Well - Medication**

**This recommendation was made on 02 February 2015**

We were satisfied that the service had improved its medication systems, including training and competence assessments and regular medication audits. Staff reported an improvement in the systems and safeguards. This recommendation was met.

**2. The service should set out the 'core' in-service training for each grade of staff, along with the timescales for its completion.**

**This was in accordance with NCS 5 Short Breaks and Respite Care Services for Adults - Management and Staffing Arrangements**

**This recommendation was made on 02 February 2015**

There was now clearly identified 'core' training for all grades of staff and set frequency for refresher courses. A new 'training tracker' spread sheet recorded the training attended and outstanding. This recommendation was met.

## 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

During the inspection we discussed the staffing levels. The service wished to vary the conditions of registration in regard to overnight staffing levels. We advised the service to make a formal request for this change.

## 9 Inspection and grading history

Date	Type	Gradings	
12 Dec 2014	Unannounced	Care and support	6 - Excellent
		Environment	5 - Very Good
		Staffing	4 - Good
		Management and Leadership	5 - Very Good
23 Jan 2014	Announced (Short Notice)	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good

12 Dec 2012	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good 4 - Good 5 - Very Good 5 - Very Good
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