

# Scottish Veterans Association - Whitefoord House

## Housing Support Service

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Edinburgh  
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Type of inspection: Unannounced  
Inspection completed on: 1 June 2017

**Service provided by:**  
Scottish Veterans Housing Association  
Limited

**Service provider number:**  
SP2004005816

**Care service number:**  
CS2004059557

## About the service

Scottish Veterans Association - Whitefoord House provides housing support for up to 87 people at Whitefoord House in Edinburgh. The service is available to ex- servicemen and women and their spouses. Up to 10% of residents can be civilians.

The team offers emotional and practical support to help people manage on a day to day basis and live as independently as possible. They help people to access health services and mental health support, drug and alcohol support services, training, education and work and to move on to a permanent home. They also help with budgeting and income maximisation. Around 80 people were using the service at the time of our inspection. 10% had been referred through City of Edinburgh council's homelessness services.

The service aims to promote social inclusion and independent living through a person centred approach, empowering people to make decisions, informed choices and achieve their potential. They aim to support people into mainstream housing with the support they need to maintain their home.

## What people told us

Twelve people returned care standard questionnaires to us. Six strongly agreed they were happy with the support they got from the service, four agreed with this, one disagreed and one strongly disagreed. People who agreed or strongly agreed with this statement said,

"All staff, even senior management, have always or try to always help. They go out of their way to help. But I believe its a two way deal if you want to start a new life. (They) have always made sure that I am going in the right direction which is kinda new to me."

"The staff at Whitefoord House are very helpful and polite."

"Staff respect our needs and help when you need help."

"I have been treated with the greatest of respect. I have mental health problems, PTSD, and SVR have saved me."

The person who disagreed they were happy with their support said,

"The level and type of support offered is not always consistent. I have felt well supported at times. Residents are concerned about staff professionalism. It is believed staff are sometimes out of their depth, lack professional training, lack reflective practice and supervisory support and there are issues with professional boundaries."

The person who strongly disagreed said,

"The service seems to lack clear goals and objectives. My mental health has deteriorated considerably whilst a resident and I have no confidence in the staff. I have spent many a dark moment in my room and I simply don't feel I can engage with staff."

We spoke with ten people during our inspection. We spoke to a variety of residents - some of whom had been at Whitefoord House longer term and some fairly new. A lot of what we heard was very positive. Comments about support included;

"Excellent, spot on. Don't think there's anything more you can ask for. Without places like this, I don't know what people would do"

"Everything I needed at the time"

"Looking for accommodation. I'm working my way out of here"

In general comments about staff were positive:

"Helpful, polite, friendly"

"Staff try their best"

"Staff are brilliant, Caring, give you space"  
 "Support worker's been brilliant"  
 "Speak to staff if I've got a problem - problem shared is a problem halved"  
 "Staff compliment me - I'm not used to it"  
 "They found a cough bottle I could take - go the extra mile"

A few residents commented on lack of relevant staff training in relation to issues they experience:  
 'Think it should be run a bit better - people suffer from PTSD - none of the staff have medical training'.  
 'Military experience would be nice'  
 'Staff are not trained enough to deal with situations they find themselves in - one day training course is outrageous'

Overall most people appeared happy with the service.  
 'They gave me the kick up the arse I needed. To try to get into civvy street and be normal - whatever that is'.

We shared comments about how the service had handled the recent death of a resident, in particular how they had communicated this to residents and how they had supported people with their loss. There is a strong sense of community in Whitefoord House, with people looking out for each other, particularly older residents. We shared the very positive suggestions about how they could improve this in future. These included having a "quiet" place where people could find out about the person's death, pay their respects and find out about things like funeral arrangements. This would also be a place where the service could provide information about support services people could use if they need to talk to someone. They also suggested that staff could be more aware of the need to spend time talking and listening to people who may be affected and that the service should better use opportunities, like the coffee morning, for people to remember the person who has died, celebrate their life and express their feelings of loss. We felt reassured that managers took these comments and suggestions on board and that they would be thoughtful how they communicate and support people through a resident's death in future.

We continue to hear some concerns about the smell of drug use in Whitefoord House. We understand the difficulties with completely preventing this, but encouraged the service to continue to work with the community police and to get ideas from other temporary accommodation services and people living at Whitefoord House to continue to improve how this is managed.

The service supports a range of people with different needs and wishes; young people who are homeless, older veterans in retirement, recent war veterans, some with post traumatic stress disorder, people with mental health difficulties, people who misuse drugs and/or alcohol, people recovering from drug and/or alcohol misuse and women who may feel vulnerable. Whitefoord House is a large building and we heard the mix of people sharing can be difficult. One suggestion to improve the situation was to identify areas of the building and allocate rooms based on who could share those areas more easily.

## Self assessment

We are not asking services to submit a self-assessment for this inspection year. Instead, we will ask services for their improvement or development plan and discuss any improvements they may have made or intend to make since the last inspection.

## From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of staffing	not assessed
Quality of management and leadership	5 - Very Good

## What the service does well

Many people achieved positive outcomes. They moved to a permanent home, reduced their alcohol and drug use and improved their mental and physical health. People's support was more structured and they had more say in what they needed and wanted support with. Staff encouraged people to have things to do, with yoga, walking groups and outings available and opportunities for learning and work.

Staff were very committed to working with people to make a positive difference in their life. People felt staff tried really hard to provide the help they needed. The service has developed links with a range of services including housing, veterans services, mental health, drug and alcohol and welfare rights. This has been very positive, providing people opportunities to link in with other helpful support. They have started working with Lothian Veterans who provide complimentary support to individuals to make positive behaviour changes, helping people maintain their accommodation now and in future.

The management team had good working relationships. Communication between managers and the support team continued to improve, through 1:1 meetings, team meetings and more informal discussion and support. The support team worked well together, with staff more confident in their role. The service had improved the use of quality audit. The three SVR managers had worked together to develop an improvement plan. People had opportunities to have a say in service development through coffee mornings, residents meetings and surveys. People could feel managers were committed to improving the service.

## What the service could do better

People could feel more in control of their support if the service developed outcomes focused support. We suggested considering "Outcomes Star". A number of people said they felt unsupported with mental health difficulties, including post-traumatic stress disorder. A range of support was available and we suggested working with people to highlight the supports currently available and other things people would find helpful.

The service had recently improved their training plan for staff, recognising the complex issues they support people with. It's important this is delivered and developed so people can feel more confident in staff supporting them.

The service could continue to improve use of quality audits. We saw improvement actions repeated in file audits. We suggested they could develop ways of checking the actions had been completed.

We still hear comments from people that they are not listened to when they raise concerns or make suggestions. We heard lots of ideas on how the service could improve from people. The managers need to continue to develop relationships with people and work with them to improve the service. A positive development would be to share the improvement plan with staff and people living at Whitefoord House, hear their views on the plan, add ideas they have and involve them in making the improvements happen. We also shared some of the ideas we heard, such as how information could be better communicated, and highlighted some of the ideas they'd had when we last visited that haven't really been progressed.

We shared information on psychologically informed environments for people who are homeless. The service could use the five key areas as a framework to review what they are doing well and what they could do better.

## Requirements

Number of requirements: 0

## Recommendations

Number of recommendations: 0

## Complaints

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

## Inspection and grading history

Date	Type	Gradings
10 Dec 2015	Announced (short notice)	<div>Care and support</div> <div>Environment</div> <div>Staffing</div> <div>Management and leadership</div> <div>5 - Very good</div> <div>Not assessed</div> <div>5 - Very good</div> <div>5 - Very good</div>
3 Mar 2015	Announced (short notice)	<div>Care and support</div> <div>Environment</div> <div>Staffing</div> <div>Management and leadership</div> <div>4 - Good</div> <div>Not assessed</div> <div>4 - Good</div> <div>4 - Good</div>
8 Aug 2014	Unannounced	<div>Care and support</div> <div>Environment</div> <div>4 - Good</div> <div>Not assessed</div>

Date	Type	Gradings	
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
15 Aug 2013	Announced (short notice)	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
19 Oct 2012	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
20 May 2011	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
4 May 2010	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
8 Jan 2010	Re-grade	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	3 - Adequate
22 May 2009	Announced	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	2 - Weak

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