

Milestone Support Services Limited

Milestone Support Services

Inspection report

Unit 416
Solent Business Centre, 343 Millbrook Road West
Southampton
Hampshire
SO15 0HW

Date of inspection visit:
01 May 2019

Date of publication:
06 June 2019

Tel: 07480394621

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service:

This service provides care and support to one person living in a 'supported living' setting, so that they can live as independently as possible. The person's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The person using the service had high support and care needs, requiring staff to be present throughout the day at night.

People's experience of using this service:

We received positive feedback about the care the person received. The service met the characteristics of Good in all areas.

The person received safe care. There were policies and procedures in place to help protect the person against abuse, harm or risks associated with their health or wellbeing.

Staff received appropriate training and ongoing support in their role.

The person told us that staff were kind and promoted their choice and independence.

The person was involved in developing their care plans and received care in line with their needs.

There were effective management systems in place to monitor the quality and safety of the service.

Rating at last inspection:

This was our first inspection of the service since it registered in October 2017.

Why we inspected:

This was a planned, comprehensive inspection of the service.

Follow up

We did not identify any concerns at this inspection. We will therefore re-inspect this service within the published timeframe for services rated Good. We will continue to monitor the service through the information we receive.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our safe findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our safe findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our safe findings below.

Good ●

Is the service well-led?

The service was well led.

Details are in our safe findings below.

Good ●

Milestone Support Services

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection team consisted of one inspector.

Service and service type:

This service provides care and support to one person living in a 'supported living' setting, so that they can live as independently as possible. The person's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at the person's personal care and support.

The person using the service had high support and care needs, requiring staff to be present throughout the day at night.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection:

We gave the service two days' notice of the inspection visit because it is small, and the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in.

Inspection site visit activity was completed on 1 May 2019. We visited the office location to see the registered manager and to review care records and policies and procedures.

What we did:

Before the inspection the provider sent us a Provider Information Return. Providers are required to send us key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We reviewed information we held about the service, for example, statutory notifications. A notification is information about important events which the provider is required to tell us about by law.

During the inspection site visit we spoke with the registered manager. We also reviewed one person's care plan, two staff recruitment files, staff supervision records, audits and the provider's business continuity plan.

We visited one person at their home to gain their feedback about the care provided. We spoke with two relatives.

We also spoke with one member of staff.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- The person who received support from Milestone Support Services told us they were happy with the care they received. They told us, "I'm very happy with the care so far."
- The provider had a safeguarding policy in place which detailed actions required to keep people safe in the event of concern to their health or wellbeing.
- Staff had completed safeguarding training as part of the provider's mandatory induction.

Assessing risk, safety monitoring and management

- The person's care plan contained detailed, individualised risk assessments. These included the risks associated with health and behaviour.
- Risk assessments incorporated guidance from other professionals involved in the person's care.
- The registered manager carried out assessments of the person's home environments to help ensure they were safe for the person and staff.
- The provider's business continuity plan contained details about appropriate actions for staff to take in case there was an emergency, such as adverse weather conditions.
- There was an out of hours phone line where the person or their relatives could call if they needed to speak with the registered manager in an emergency.

Staffing and recruitment

- The person was supported by enough numbers of suitable staff with the right skills and training.
- The provider had recruited a mixture between 'permanent' and 'bank staff'. Bank staff covered in the absence or sickness of permanent staff. The registered manager regularly worked care shifts, which was an additional contingency if permanent staff were absent.
- The registered manager used robust systems and checks when recruiting staff to help ensure that they were suitable for their role.

Using medicines safely: Preventing and controlling infections

- The support that the person required around their medicine's management was clearly documented in their care plans.
- Nobody using the service was currently receiving support with the administration of their medicines.
 - Staff used personal protective equipment such as gloves and aprons when supporting the person with their personal care. The registered manager monitored staffs use of this equipment during observations of their working practice.

Learning lessons when things go wrong

- The provider had a duty of candour policy in place. The registered manager understood their responsibilities in communicating openly with the person if things went wrong.
- The registered manager kept a log of all incidents that took place such as when the person became anxious. They analysed incidents to look for trends and ways to avoid risk of reoccurrence.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

Good: People's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The provider had recently implemented an electronic care planning system. Staff recorded details of care visits or incidents on the system, which the registered manager could view when accessing the system in the provider's office. This helped the registered manager monitor the quality of care remotely. It also enabled them to quickly respond to incidents and changes in the person's health.
- The registered manager assessed the person's needs thoroughly and documented them in their care plans.
- Assessments were comprehensive and contained details about the support the person required in areas such as washing and dressing, managing behaviour and anxiety, maintaining good nutrition and promoting choice and independence.
- The registered used information from assessments by social workers, healthcare professionals and previous care providers to help ensure the person's care assessments reflected their needs.

Staff support: induction, training, skills and experience

- The person was supported by staff who had received comprehensive training.
- Staff received training based on the Care Certificate. The Care certificate is a nationally recognised set of competencies relevant to staff working in social care settings.
- The provider assessed staff's knowledge of key areas of their role by making them complete online assessments of their current knowledge.
- They used results from these assessments to tailor ongoing training to staffs individual needs. The registered manager told us, "Staff complete assessments to identify how much baseline knowledge they have. Following this training, a combination of e-learning and face to face learning is identified and staff will undertake this within three months of being in service." This helped to ensure staff were competent in their role
- The registered manager met with staff for regular supervisions, where their working practice and training needs were discussed.

Supporting people to eat and drink enough to maintain a balanced diet

- The person's nutritional needs were documented in their care plans. This included preferences, risks and allergies.
- The person using the service was independent in their planning and cooking of their meals.

Staff working with other agencies to provide consistent, effective, timely care

- The provider worked in partnership with professionals from health and social care to meet the person's

needs.

- The provider had systems and processes in place to aid the smooth transition when people came and left the service. The registered manager told us, "Our transition planning involves the identification and communication with other agencies supporting the person, ensuring that we have a key contact in each agency."

Supporting people to live healthier lives, access healthcare services and support; staff working with other agencies to provide consistent, effective, timely care

- The person were supported to access help from health professionals such as GP's when required.
- When the person had healthcare appointments the provider planned so staff could support them to attend if needed.
- The provider worked with the person to promote their independence around managing their healthcare needs. In one example, the person was supported to work with healthcare professionals to identify and purchase equipment which helped enable them to independently monitor their health condition. The registered manager told us, "Where people need support to manage their health, we ensure that this is pitched at the right level and they are supported to access resources, where possible to improve their skills and maintain their well-being."

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

- The registered manager visited the person to go through their care plans to help ensure they understood and were happy to receive care. This helped to ensure that the person gave appropriate consent to their care arrangements.
- The provider understood the appropriate actions to take if a person could not consent to their own care. The registered manager told us, that in this event they would gain consent from a person who had legal authority to consent on their behalf such as their power of attorney. An appointed power of attorney is somebody with legal authority to make decisions on behalf of another person, if they are unable to make decisions themselves. The registered manager told us they would consult an appointed advocate in the absence of a legally appointed power attorney.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

Good: People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- The person was given control about how their care was planned and delivered. They were treated as equal partners who the provider worked in partnership with to develop goals and expectations around care. The registered manager told us, "[Person] had a session as part of induction where they presented to the staff team and focussed on their personal and family history, what they want to achieve and how they want to be treated in their own home." This helped to ensure staff understood and respected the person as an individual.
- The person's care was planned around their individual needs. The provider had a strong ethos to enable the person to explore their interests and develop their skills. The registered manager told us, "Our overall aim is to ensure that those who use our services and staff feel that their rights are respected, and they are valued."
- The person told us that staff were positive, encouraging and caring, but not overbearing. The registered manager told us, "Staff are made aware that they are partnering with service users who are experts in their own care."

Supporting people to express their views and be involved in making decisions about their care

- The person and relatives told us they were consulted about their care and involved in developing their care plans.
- The person had the chance to meet staff before they started, to help determine whether they were suitable for their role. They were able to request changes and exclusions to their staff team if they felt they were not suitable.
- The registered manager made regular visits and phone calls to the person to gain their feedback about the care provided. The person told us the registered manager was easily contactable when needed.
- The provider had developed questionnaires to be sent out to the person and relatives to gain feedback about the quality of care they received. The questionnaire had been adapted into an easy read format. This helped to ensure that the person was able to understand the format in which it had been presented. The provider had not sent out questionnaires as they had only recently started providing services.

Respecting and promoting people's privacy, dignity and independence

- The person and their relatives told us staff treated them with dignity and respect.
- Staff were respectful of the person's homes and understood their professional boundaries.
- The person was encouraged to develop rules for staff to follow when supporting them in their home. The registered manager told us, "A list of agreed rules [for staff conduct] was developed and this continues to be refined as part of ensuring privacy and dignity." This helped to ensure there was a shared understanding between the person and staff about promoting respectful professional conduct.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

Good: People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- The provider complied with the Accessible Information Standard, a law which aims to make sure people with a disability or sensory loss are given information they can understand, and the communication support they need.
- The provider gave information in a format that people could understand. This included providing pictorial staffing rotas and activity planners and helping the person develop care plans in adapted form to aid their understanding of them.
- The person's care plan detailed their preferred routines around their personal care and daily life. This helped ensure that staff understood how to provide care responsive to their needs.
- The person was supported to explore social and vocational opportunities to help them find meaningful occupation. Their relatives confirmed staff were supporting their family member to explore job opportunities and join social events to avoid risk of isolation.
- The provider was committed to helping the person utilise technology to increase their skills and independence. This included the use of technology to prompt them around medicines or home safety. The aim of this was to reduce their need to access formal support services.

Improving care quality in response to complaints or concerns

- The person and their relatives told us that they would feel comfortable raising a concern and they believed the registered manager would be listen would act upon their feedback.
- The provider had a complaints policy in place which outlined how the person could make a complaint and how their concerns would be responded too. The policy had been adapted into simplified language and pictorial prompts. This was designed to help aid the person understand how they could make a complaint.
- The registered manager spoke with the person and relatives on a regular basis to go through any issues or concerns.
- The provider had not received any complaints at the time of inspection.

End of life care and support

- At the time of the inspection, the service was not supporting anyone who needed care at the end of their life.
- The registered manager told us they would consult people, families and other stakeholder to develop an end of life care plan for a person, should they require this.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The person and their relatives told us that the registered manager was approachable and professional. They told us they were in regular contact and were a good communicator when co-ordinating care arrangements.
- The registered manager was a good role model for staff. They had a prominent presence in supporting staff and understood the person's needs well.
- The registered manager had a clear vision about how to instil the visions and values of the provider. They said, "It is important that I model the behaviours which we expect from staff and that these expectations are clear for everyone in the organisation. Our overall aim is to ensure that those who use our services and staff feel that their rights are respected, and they are valued."
- The registered manager had a clear vision about the standards required to maintain a high-quality service. They had carefully considered how to sustainably grow the number of people who used the service without compromising safety or quality.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager used effective systems to monitor the quality and safety of the service.
- This included developing audits around key areas of the service, such as recruitment processes, to help ensure staff were recruited in line with regulatory requirements.
- The registered manager kept abreast of industry best practice through a variety of methods. This included attending local provider forums and receiving updates from nationally recognised bodies such as Skills for Care.
- The registered manager understood their regulatory responsibilities in informing CQC about significant events at the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The person and their relatives were involved in planning and reviewing their care.
- The provider had developed questionnaires to be sent out to the person and relatives to gain feedback about the quality of care they received. The questionnaire had been adapted into an easy read format. This helped to ensure that the person was able to understand the format in which it had been presented. The provider had not sent out questionnaires as they had only recently started providing services to people.
- The provider had engaged with the person to help design quality assurance surveys. This helped to ensure

that feedback was specific to the person and relevant to their care.

- The registered manager regularly met with staff to implement learning from feedback, incidents and observations of their working practice.

Continuous learning and improving care

- The registered manager had a 'things to do list'. This included a list of areas where improvements were planned in the upcoming months.
- Planned improvements included, updating policies and procedures, implementing improvements to promote effective communication and adapting quality assurance so it is tailored in line with individual needs.
- The registered manager frequently reviewed and updated the 'things to do list'. This helped them to track where improvements had been made.

Working in partnership with others

- The provider had established links with other stakeholders to provide positive outcomes for people.
- In one example, they had supported the person to make referrals to the fire service to arrange home safety assessment. This helped to ensure their homes were safe for both themselves and staff.