

Care service inspection report

Jericho Benedictines Housing Support Unit (Bank Street)

Housing Support Service

5 - 7 Bank Street

Greenock

PA15 4PD

Inspected by: Marjorie Bain

Type of inspection: Unannounced

Inspection completed on: 30 June 2011



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Service provided by:

The Jericho Benedictine Society

Service provider number:

SP2003000252

Care service number:

CS2009198981

Contact details for the inspector who inspected this service:

Marjorie Bain

Telephone 01698 208150 Lo-call: 0845 600 8336

Email enquiries@scswis.com

Summary

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

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

We gave the service these grades

Quality of Care and Support	5	Very Good
Quality of Staffing	6	Excellent
Quality of Management and Leadership	0	N/A

What the service does well

The service is very person centred and involves service users in all aspects of its activities and development. Highly motivated and dedicated staff offer services users one to one counselling and group work therapy, which delivers a significant success rate in enabling service users to remain drug free when they leave the service.

What the service could do better

The service operates on very limited resources and consequently could benefit from increased staffing levels which would help the service to further develop and offer even more one to one support and group activities.

What the service has done since the last inspection

The service has continued to develop its service user participation strategy and seeks to continue to meet the individual needs of each service user. The service continue to press for improved funding to help them further develop the service and gain recognition for their success rate in helping service users remain drug free.

Conclusion

Despite the constrained resources available to this service, staff and volunteers demonstrate an incredibly high level of commitment towards empowering service users to address their addiction issues and service users told us how much they valued the support provided.

Who did this inspection

Marjorie Bain

Lay assessor:

1 About the service we inspected

The Jericho Benedictines Bank Street service registered with SCSWIS on 1 April 2011, and aims to provide a combined Housing Support and Care at Home service to adults with drug addiction problems.

There is an expectation that people will remain drug free when using the service.

The service adopts a holistic approach and states that it 'aims to provide support for individuals who need resettlement due to becoming unstable through addiction. This primary aim is achieved through a needs focused assessment process and a structured service delivery with a resettlement programme designed to meet the needs of the service users'.

The service use as its foundation the '12 Steps Programme' and all service users regularly attend addiction meetings.

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

Quality of Care and Support - Grade 5 - Very Good

Quality of Staffing - Grade 6 - Excellent

Quality of Management and Leadership - N/A

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.scswis.com or by calling us on 0845 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

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.

We inspected the service on 15 June 2011 between the hours of 10:20 am and 18:10 pm. We issued 20 Quality Standards Questionnaires to service users and 14 were returned prior to the inspection. We issued 20 Quality Standards Questionnaires to staff and 8 were returned prior to the inspection.

In this inspection we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents, including:

- Housing support plans for people using the service (4)
- Housing Support service agreement
- Service Brochure
- SCSWIS service users Quality Standards Questionnaires (14)
- Service Users Satisfaction Questionnaire
- Service User Involvement - Action Plans
- 12 Steps Programme
- Outcomes for service users - West Dunbartonshire - Sept 2002 to May 2010
- Inverclyde Alcohol Drug Partnership Strategy 2010-2013
- Staff files (3)
- SCSWIS staff questionnaires (8)
- Staff Development and Training Programme
- Interview paperwork from recent staff appointment
- Staff Induction Checklist
- Minutes of staff meetings (2)
- Confidentiality and Harassment policies; Code of Conduct and Complaints procedure
- Fire Safety instructions

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.firelawscotland.org

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

There were no recommendations arising from the last inspection.

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 document from the service provider. The service provider identified what they thought they did well, some areas for development and any changes they planned. Service users had had input into the development of the self assessment.

The self assessment would have benefited from being more comprehensive regards identifying strengths, which at times were understated, and providing more detail in their areas for improvement.

Taking the views of people using the care service into account

The service users with whom we met provided some of the best and most comprehensive evaluation of why and how this service was meeting their needs.

We met with four service users whom we randomly selected. Each told us how they had sought to come to this particular service as they had heard about the service's approach to helping people address their drug addiction. Everyone gave staff a glowing report, describing how staff had helped them through difficult times and were helping them build up their confidence and social skills.

"I agree that everything is done in Jericho for my benefit and my support and care"

"My time here in Jericho house has been difficult but I receive the proper treatment needed and am happy"

"the help am getting from all the different staff its been good for me"

"I am happy with the support and care that I get"

Taking carers' views into account

We did not speak to any carers during our 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

Overall grade awarded for this theme: 5 - Very Good

Statement 1

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

Service strengths

Each service user has regular opportunities to comment on the quality of care and support being provided by the service. Service users participate in regular therapeutic groups and in one to one support with their Keyworker.

There are regular service user surveys and service users are encouraged to comment on all aspects of the service.

The service has a suggestion box and service users put forward their ideas for service improvement, the suggestions examined included topics on activity equipment; outings and timing of key work sessions. When suggestions are received they are discussed by staff and feedback is given to all service users as to the response to suggestions. Wherever possible staff seek to respond positively to suggestions.

Prior to this inspection we issued 20 Quality Standards Questionnaires and 14 were returned prior to the inspection. With the exception of one recent resident, everyone who replied confirmed that they had a support plan. Everyone confirmed their satisfaction with all aspects of the service, with the exception of one new service user who was unsure how to answer some of the questions.

"I'm not long in, thats why I don't know much"

Thirteen out of fourteen people knew how to make a complaint to SCSWIS but four people did not know how to make a complaint to the service and two were unsure. Comments received in the Quality Standards Questionnaires were very positive. See service user views at the end of this report for more detail about views expressed.

We met with four randomly selected service users. All said they were confident that they could raise any issues with staff and said they felt listened to and valued.

Longer established service users work with staff to help support newer service users particularly in the first few weeks of their stay to help integrate them into their new surroundings.

Staff ensure they are fully conversant with National Care Standards and pass this information to service users to ensure they know their full range of rights and responsibilities.

All service users participate in the service's drama group and give a number of performances to publicise the problems of drug addiction and how people can be supported to be drug free. Any funds raised enable service users to attend Narcotics Anonymous meetings, related conferences, support activities such as arranged football matches and on occasions support charitable fundraising activities. Participation in the drama activities is designed to boost service users' confidence and social skills.

Areas for improvement

The service should continue to adopt an inclusive approach to developing participation opportunities for service users. The manager accepts the service could do more to record and evidence how the views received from service users have helped the service to develop.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 6

People who use, or would like to use the service, and those who are ceasing the service, are fully informed as to what the service provides.

Service strengths

The service accepts referrals from: GP's; community and hospital addiction services; social services; probation service; and criminal justice. A recent report which covered the West Dunbartonshire area reported that 95% of male service users had self referred.

The service brochure describes the service as an 'Abstinence Based Recovery project' and that group work and one to one sessions offer person centred key working. The service has three key prohibitions:

- * No illicit drugs or alcohol
- * No verbal or physical violence
- * No harassment of any kind

Prior to admission, most people have two assessment sessions to assess their suitability for the project and willingness to work through the 12 step programme. Referrals are accepted from anywhere in the UK. Of the four service users we met, two had come from Central Scotland, one person had come from England and one person had come from a remote rural area.

We randomly selected four service user housing support files to examine and spoke to each of the four service users. There was a record of staff having fully explained what the service could offer and what would be expected of those who attended. Of the four people we interviewed, all had been attracted to attending the service because they had heard that staff had personal experience of tackling addiction issues. Some had attended other services but stated the biggest attraction of this service was that staff listened and had a better understanding of the issues confronting each individual.

On the day we visited, arrangements were being made for one new service user to attend who had been referred by a community addiction team. Staff discussed how to make them welcome and help them settle in. Service users are free to leave at any point and one service user left on the day we inspected, staff had been unable to persuade them to remain with the programme.

When new people first arrive, they are paired with a more experienced service user to help them cope with the difficulty of the early days of withdrawal. Service users, who have had months of abstinence, play a key role in supporting newer arrivals and take turns in ensuring that as well as staff availability, there is always a service user also

available to offer support and encouragement. One service user told us how they would often sit in the evening or during the night with new people to offer them company and support. As new service users are discouraged from leaving the project during the first few weeks, other service users will arrange to get them soft drinks and snacks.

One of the service users we met had been in the service for a few weeks. They had self referred, having heard from others about the approach the service adopted and that staff had personal experience of the recovery process. They told us they felt this service offered them the best chance of recovery.

Service users discuss with their key worker the progress being achieved and individual goals are set. When staff and the service user feel that it is time to move on, they discuss a stepped approach to being fully integrated back into the community. Referral can be made to other services which provide supported accommodation and specialist advice and staff seek to ensure that ongoing support is made available. Often service users will maintain contact with the service to seek advice, guidance and reassurance and several ex service users have gone on to return as volunteers and have gone on to undertake training or employment in the field of addiction work and recovery process. Service users are encouraged to attend external addiction meetings during their stay and the hope is that they will continue to attend when they leave. They are also encouraged to improve their education and lifestyle skills to improve their chances of abstinence when they leave.

The volunteer we spoke to was attending training classes and hoped one day to gain employment in the field of addictions.

Of 29 service users from one local authority area, two remained within the programme and just over half had remained drug free for periods of between two years and over seven years. Eight were known to be in employment. Lengths of stay at the service had been between two weeks and eleven months.

Areas for improvement

Current staffing levels, limit the time staff can publicise the work of the service. Nonetheless, a staff member visits schools to discuss the problems associated with drugs and staff regularly seeks to publicise the service via all possible avenues.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 6 - Excellent

Statement 1

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

Service strengths

Service users have a variety of ways in which they can provide feedback about staff: in one to one guidance sessions; in group therapy settings; and via the service user involvement group. In addition, service users regularly use a suggestion box to make suggestions for improvements to service delivery and staff provide feedback on all suggestions received to the service user involvement group or to individual service users. One of the suggestions made involved a desire on the part of some service users for more one to one time on a regular basis. Staff had re-arranged group meetings and other activities to ensure half a day per week was set aside for one to one sessions. This was in addition to the regular less formalised discussions between staff and service users.

The service had recently interviewed to replace a member of staff who had moved on. Service users agreed who they wished to represent them on the interview panel, were involved in drawing up questions to put to candidates, and had an equal say in who should be appointed. They recorded their views following each interview and this was used to provide feedback to the unsuccessful candidate. One of the service users we met confirmed that they had been involved in the recent interview process.

Service users have an input into staff and volunteer induction and provide feedback for staff 3 monthly probationary period assessments.

All staff and volunteers had been involved in a recent training day, which was externally facilitated by the Scottish Training on Drugs and Alcohol (STRADA) which is a partnership with University of Glasgow's Centre for Drug Misuse Research, to help staff develop their skills and expertise with a particular focus on user involvement. In addition staff and service users had recently attended a 3 day national addictions conference in England.

Areas for improvement

The service is considering how best to involve service users in all staff appraisals on a more formalised basis.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

The manager and one senior support worker are qualified to SVQ 4 level. Senior staff have certificates in 'Effective and Efficient Service Delivery' and one of the senior staff has a Counselling Supervisors Certificate. All staff are qualified to SVQ 3 level and the two newest member of staff will shortly commence their SVQ 3 training.

There had recently been internal changes to the management structure of the service, to make the best use of staff skills and expertise. The new manager had undertaken a two course in Managing and Supervising and also attended a time management course. The manager will be attending an ACAS organised course on staff appraisal. The manager attends SSSC learning framework meetings and cascades learning to staff and service users.

Eight members of staff completed our staff questionnaire prior to the inspection. Staff were very positive about working in the service.

"I feel I have been given great support by my line management in doing my job at Jericho House. My training needs are identified at regular supervision sessions and I am supported in gaining qualifications including an SVQ3 and developing my practice"

"Jericho is a safe and friendly environment to work in. I also have good opportunities to gain qualifications"

"I feel all my needs are being met I am happy within my workplace"

"I started as a volunteer. After a period of time I was asked to join the staff team as a part time night shift worker. I was then offered a position as a day staff member"

"Training opportunities are also ongoing on an in-house and external basis"

We interviewed three members of staff and a volunteer. All were knowledgeable about the National Care Standards and sought to keep up to date with best practice in addiction work. We observed a staff shift handover where updates were given about each individual service user and strategies discussed about how to best address each service user's particular issues. We were impressed by the level of commitment each member of staff and volunteer demonstrated to helping the service to develop. One member of staff told us:

"for us this can't just be a job, you must be fully committed to assisting the boys to

achieve their goals and when required must put in extra hours' and effort"

The staff we met appeared to be part of a close knit team who were dedicated to offering support and assistance to those attending the service.

Staff were observed to be very respectful when interacting with service users and there was an air of calm in the building, with service users appearing to be relaxed and comfortable talking to staff and sharing news and jokes.

We interviewed four service users. Each one, in their own way, told us how they felt cared for by staff and that staff often stayed on beyond their shift to give them more of their time if this was required. One service user told us:

"I know the staff love and care for me, it is not like other places where you are just a number, here they listen, they all really care for you and will continue to care about me when I move on"

Areas for improvement

As the service currently receives no specialist addiction funding it is reliant on housing benefit as its sole source of funding. The financial constraints limit training opportunities so the service has to seek as far as is possible to source training which is free or at little cost.

Staff are very ambitious for their service, they want the best for service users and felt they could achieve even more if day to day funding was not always so tight. In addition, to the current service users, ex service users often stay in regular contact to report progress and sometimes seek reassurance. The service feels it could benefit from an additional staff member which would enable it to further develop the range of supports it can offer and free up management time to promote the work of the organisation. It is committed to ensuring that the service continues to fully evaluate and measure outcomes for service users past and present.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership - NOT ASSESSED

4 Other information

Complaints

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

Enforcements

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

Additional Information

In line with the service's participation strategy, service users asked that our feedback was given to all service users and staff at the same meeting. We provided everyone with feedback on 30 June 2011 between the hours of 11 am and 12.20 pm.

This is a service which achieves good outcomes for many service users but is constrained in how it can further develop as its sole source of funding at present is housing benefit.

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in SCSWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 6	6 - Excellent
Quality of Staffing - 6 - Excellent	
Statement 1	6 - Excellent
Statement 3	6 - Excellent
Quality of Management and Leadership - Not Assessed	

6 Inspection and grading history

Date	Type	Gradings
30 Nov 2010	Announced	Care and support 5 - Very Good Staffing Not Assessed Management and Leadership 4 - Good
17 Dec 2009	Announced	Care and support 4 - Good Staffing 4 - Good Management and Leadership 3 - Adequate

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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هه باباى تسرد سىم وونابز رگى د روا وولکش رگى د رپ شرازگ تعاشا هى

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Telephone: 0845 600 9527

Email: enquiries@scswis.com

Web: www.scswis.com