

Jericho Benedictines Housing Support Unit (Bank Street) Housing Support Service

5 - 7 Bank Street
Greenock
PA15 4PD

Telephone: 01475 (S) 742383 / (B)783063

Type of inspection: Unannounced
Inspection completed on: 20 March 2018

Service provided by:
The Jericho Benedictine Society

Service provider number:
SP2003000252

Care service number:
CS2009198981

About the service

The Jericho Benedictines Housing Support Unit Greenock provides a combined Housing Support and Care at home service to adults with drug addiction problems. Men are supported at the Bank Street service in Greenock and Women in the Shankland Road service in Port Glasgow. The Jericho Benedictines Society are the provider of this service and are a registered Scottish charity and unincorporated association. Its principal office is in Kilbarchan, Renfrewshire.

The service promotes community involvement, family reconciliation via a family group, physical and emotional wellbeing and abstinence. The service adopts a 12 step model to help people address addiction issues, gain skills, build confidence and maintain recovery.

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

The service is delivered by a registered manager, senior support workers, support workers and volunteers with lived experience of recovery. Staff employed at the service also have lived experience of recovery.

At the time of this inspection the service was supporting ten men and seven women.

What people told us

During this inspection visit we met with and sought the views of all of the people staying at each service site. We also took into consideration the feedback in the 10 questionnaires that were returned to the Care Inspectorate. Comments included:

"Wouldn't have been able to do it without them".

"Big leap from where I was to where I am now, you feel safe in here".

"No other place like it".

"First thing that has worked for any length of time".

"No down side yet, its only as good as we make it".

"Maybe more 1-2-1 key works".

"This service has helped me enormously in my recovery. The support and understanding shown has been very beneficial. I cannot really fault the service provided".

"The service support/assists my complex needs. They provide health nutrition and an exercise programme designed personally to improve my fitness and wellbeing".

Self assessment

We did not ask the provider to submit a self assessment prior to this inspection.

From this inspection we graded this service as:

Quality of care and support	3 - Adequate
Quality of staffing	not assessed
Quality of management and leadership	3 - Adequate

What the service does well

People told us that the benefits of using this service were that they had maintained abstinence from substances, improved in confidence and had better family relationships. Some people told us that this was the only service that had worked for them. Anecdotal information through the service's excellent links with the recovery community, specifically Narcotics Anonymous, suggested that people continued to maintain abstinence after they left the service.

The well established family support group evenings continued to provide a valuable resource for people living at the service and their relatives. This helped families to repair often fractured relationships.

Mutual support plays an important role in recovery and people indicated the benefits of being supported by staff who had lived experience of recovery. Modelling recovery in this way, offers a lived example of the possibility of progression and growth and instills hope.

There were opportunities for people using the service to become peer volunteers once they had completed the programme. This meant that people were being supported by individuals who understood their situation empathically through shared experience.

Staff at all levels presented as motivated and committed to help people make sustainable changes. People told us that staff were skilled and went "above and beyond their job". One person told us "staff just want the best for you".

Managers were described as accessible, open and honest and transparent, one person said "nothing is hidden".

People we spoke with identified that the structure of the programme and nightly fellowship meetings were the key element to maintaining their recovery. At the Shankland Road service we met women who told us about the benefits of being able to access a women only service. Others identified the flexible duration of stay as a key strength.

What the service could do better

We found that at the Bank Street service some people did not have a support plan and reviews of the support provided were either overdue or had not taken place. We heard that this was as a consequence of the depleted team at the Bank Street service and the manager was working to address this situation. (See recommendation 1)

Risk assessments were not robust and those we looked at lacked detail and actions to manage risk were generic and as such not person centred. (See recommendation 2)

In the absence of medical intervention, people detoxing from substances could potentially be experiencing unnecessary discomfort. Individuals who had used benzodiazepines were also at risk of harmful withdrawal. Enforced withdrawal increases the risk of relapsing and overdosing as a result of loss of tolerance. (See requirement 1)

As people were not registered at a local GP practice on admission this further compounded the risks associated with detoxing from substances. (See requirement 1)

We saw incidents associated with withdrawal that required hospital attention. We noted that these had not been reported to the Care Inspectorate. (See recommendation 3)

A requirement for admission was that people cease taking all prescribed antidepressant and antipsychotic medication. We found that the prescribing GP had not always been consulted about the impact of this. This meant that people could be ceasing taking prescribed medication against medical advice and increased the potential for adverse reactions. Rapidly stopping antidepressants can cause anxiety, insomnia and other symptoms and generally a phased approach is needed, ideally under supervision of a GP. (See requirement 1)

It is important in group living settings that people are aware of their rights and responsibilities as this helps them to manage their expectations. At this service we found that the rules, sanctions and restrictions were not always explicit. Some could also be conflicting with a trauma informed way of thinking and working. We asked the provider to review practices and approaches with this in mind.

When noted that supervision meetings had not been held regularly for all of the staff throughout the year. Supervision provides an opportunity for staff to reflect on their practice and identify development needs to help them continuously improve their practice.

We agreed with a recent independent review of the service that identified the need to work in a more integrated way. The provider should seek to strengthen links with partners in health and social work to help deliver this service model cohesively and aligned to best practice.

Requirements

Number of requirements: 1

1. The provider must make proper provision for the health, welfare and safety needs of service users. To do this they must:

Adhere to the service's own policies and procedures in regard to the criteria for admission where people present positive for benzodiazepine use.

Prior to admission seek guidance from prescribing GP's or relevant healthcare professionals in relation to any contraindications to ceasing prescribed antidepressant, antipsychotic and analgesic medication.

Make clear on the questionnaire for prescribing GP's a description of the service, the entry requirements and service philosophy.

Support people to register with a local GP on admission to the service to allow general medical support and support with detoxification if necessary.

Develop closer working links with key partners in addiction services to help drive improvements to ensure that the care provided is evidence based, safe and consistent with best practice approaches.

This is to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 4(1)(a) Welfare of Users.

National Care Standards for Housing Support Services, Standard 4 - Housing Support Planning.

Timescale for completion: By 29th June 2018

Recommendations

Number of recommendations: 3

1. The provider will ensure that all people supported by the service have person centred support plans in place that are reviewed on a six monthly basis or earlier in accordance with their changing needs.

National Care Standards for Housing Support Services, Standard 4 - Housing Support Planning.

Timescale for completion: By 29th June 2018

2. The provider will ensure that all people supported by the service have individual assessments of risk and management plans to mitigate against the risks identified. These should be reviewed on a six monthly basis or earlier in accordance with their changing needs.

National Care Standards for Housing Support Services, Standard 3 - Management and Staffing Arrangements.

Timescale for completion: By 29th June 2018

3. The provider should ensure that notifications of accidents and incidents are made timeously to the Care Inspectorate in accordance with the guidance 'Records that all registered care services must keep (except childminding) and guidance on notification reporting' (February 2012 Care Inspectorate).

This is to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/28) Regulation 4(1) (a) (b) Requirements for records notifications and returns.

Timescale for completion: By 29th June 2018

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Inspection and grading history

Date	Type	Gradings
2 Mar 2017	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership Not assessed
31 Mar 2016	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 5 - Very good
16 Dec 2014	Unannounced	Care and support 6 - Excellent Environment Not assessed Staffing 6 - Excellent Management and leadership 6 - Excellent
8 Jan 2014	Unannounced	Care and support 6 - Excellent Environment Not assessed Staffing 6 - Excellent Management and leadership 6 - Excellent
14 Feb 2013	Unannounced	Care and support 6 - Excellent Environment Not assessed Staffing 6 - Excellent Management and leadership 6 - Excellent
30 Jun 2011	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 6 - Excellent Management and leadership Not assessed
30 Nov 2010	Announced	Care and support 5 - Very good

Date	Type	Gradings	
		Environment Staffing Management and leadership	Not assessed Not assessed 4 - Good
17 Dec 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 3 - Adequate

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