

# Inspection report

## Addaction - North Glasgow Community Rehab Support Service

Petershill Community Business Centre  
28 Adamswell Street  
Springburn G21 4DD

**Inspected by:** Tanko R. Akpo  
**(Care Commission Officer)**

**Type of inspection:** Announced

**Inspection completed on:** 14 May 2007

**Service Number**

CS2005097268

**Service name**

Addaction - North Glasgow Community Rehab

**Service address**

Petershill Community Business Centre  
28 Adamswell Street  
Springburn G21 4DD

**Provider Number**

SP2004004093

**Provider Name**

Addaction Scotland

**Inspected By**

Tanko R. Akpo  
Care Commission Officer

**Inspection Type**

Announced

**Inspection Completed**

14 May 2007

**Period since last inspection**

This was the first inspection of the service

**Local Office Address**

Central West Region,  
4th Floor,  
1 Smithhills Street,  
Paisley.  
PA 1 1EB

## **Introduction**

Addaction North Glasgow Community Rehab is ran by Addaction Scotland. The service was registered by the Care Commission in August 2006 and is based in the Possilpark area of Glasgow.

The service is registered to provide community rehabilitation service to 52 adults aged 18 and over who have experienced drug or alcohol misuse problems. Support is provided through one-to-one and individually tailored packages and groupwork programmes.

Opening hours of the service are from Monday to Friday 9am to 7pm.

The service utilises the premises of St Matthews Church and manages service users between two sites which are directly next to each other. The Manager reported that there are plans to move the service into a purposely-built accommodation in the future.

The staff team comprised of the manager, project workers (5) and an administrator.

The mission statement of the organisation is:

"Helping individuals and communities to manage the effects of drug and alcohol misuse."

## **Basis of Report**

This report was written following an announced inspection of the service over the period of one day in May 2007.

Annual Returns are used to ensure that the Care Commission has up to date and accurate information about care services. This service returned an annual return.

Each year, care services are requested to complete and return a self-evaluation form in respect of how well they are meeting the National Care Standards (NCS) that will inform the inspection for that year. The service submitted a self-evaluation form. It contained information on what the manager felt the service did well and identified areas for improvement.

The service was inspected after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers: complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

The assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required as a result. The inspection was then based upon the relevant Inspection Focus Areas (IFAs) and follow up on any recommendations and requirements from previous inspections, complaints or other regulatory activity.

During the inspection, evidence was gathered from a number of sources including:

A review of a range of policies, procedures, records and other documentation, including the following:

- Care plans and Reviews
- Safer recruitment policy and a sample of staff files
- Child and Vulnerable Adult Protection policies
- Violence and Aggression Policy
- Induction and Probation Policy
- Training records
- Learning and Development Policy
- Supervision policy and records
- Restraint policy
- Service User Introductory Booklet
- Client Satisfaction Survey

Discussion took place with care staff including:

- The Manager
- 1 Team Leader
- 2 Project Workers

The CCO also spoke with six service users and solicited their views and experiences.

Staff practice was also observed.

All of the above information was taken into account and reported on.

This year's inspection focus areas (IFAs) have been developed from statutory and policy considerations and have been widely consulted upon. During this inspection the CCO inspected the following IFAs associated with NCS Support Services: Standard 2: Management and Staffing Arrangements:

1. Protection of People with sub-sections on:

- Child Protection in services for adults
- Restraint
- Adult Protection
- SSSC Codes and Staff Training

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at [www.infoscotland.com/firelaw](http://www.infoscotland.com/firelaw)

### **Action taken on requirements in last Inspection Report**

This was the first inspection of the service.

### **Comments on Self-Evaluation**

A fully completed self-evaluation document was submitted by the service. This was completed to a satisfactory standard and gave relevant information for each of the standards

associated with the inspection focus area. The service identified its strengths and some areas for future development and gave good evidence of service user involvement.

### **View of Service Users**

The Care Commission Officer spoke with six service users and obtained their views and experiences about the service. All the service users were very complimentary about the support provided. Some of their comments were:

"I've not got anything bad to say about the service....no complaints."

"T's a good service." "They bring your confidence back up."

"I meet with my key worker for 1:1 session every two to three weeks."

"Staff are knowledgeable and have experience."

"The service I get is brilliant for me."

"This place definitely helped me."

"I find key worker sessions helpful."

### **View of Carers**

No carers were interviewed during this inspection.

## **Regulations / Principles**

### **Regulation :**

### **Strengths**

### **Areas for Development**

## **National Care Standards**

### **National Care Standard Number 2: Support Services - Management and Staffing Arrangements**

#### **Strengths**

This report does not include comments on elements 5, 6, 11, 12 and 13 of this standard as these did not apply at this visit.

Staff and service users interviewed indicated that children were allowed to visit the service. Parents had responsibility for their children when they brought them into the service.

The service had a Child Protection Policy in place. The policy detailed action to be taken in the event of a child protection incident of allegations.

All staff spoken with have had Child Protection awareness training and interviews with them evidenced that they were aware of the policy and understood how to implement it.

A policy and procedure was in place with regard to restraint. The Manager stated that de-escalation was practised by staff. All service users had an initial risk assessment which was reflected in their support plans and reviewed each month.

Staff have had training in challenging behaviour, counselling skills, anger management, mental health issues and cognitive behaviour intervention skills. These training have assisted staff in de-escalation and assessment.

The service had an Adult Protection Policy in place which contained information such as:

- staff/manager responsibilities
- what the manager will do in an event of suspicions of abuse
- recording of information,
- arrangements to ensure staff awareness of adult protection issues
- information on independent advocacy services.

Staff have had access to training in adult protection and they were able to articulate about adult abuse issues. Staff have been trained to an appropriate level such as Scottish Vocational Qualification (SVQs).

The Manager informed that there has been no adult abuse concerns since the registration of the service in 2006.

A staff training needs assessment was in place as per supervision minutes and staff development plans examined.

The organisation has a training and development policy and procedure in place that contained information such as new staff induction, accessing of training and evaluation of the effectiveness of all training.

The service had in place an annual staff training plan and staff have had the relevant mandatory training in for instance food hygiene.

There was a rolling training programme in place to allow all staff to access SVQ 3 and thus register with the Scottish Social Services Council (SSSC). The t Manager has completed her Registered Managers Award (RMA).

Service users spoken with were complimentary about the way in which the service was delivered and the supportive approach of staff.

### **Areas for Development**

The service was not children and family friendly and neither was it disability friendly. The Manager informed that there were plans to move the service into a purposely built premises which would take cognizance of these issues. A family worker would also be appointed.

Although the service had a child protection policy in place there were no appropriate local contact details of agencies such as Social Work Services. (see Recommendation 1)

There was no copy of 'Rights, Risks and Limits to Freedom (2006)' - Mental Welfare Commission Best Practice Guidance in place. (see Recommendation 2)

An Adult Protection Policy was in place however the document did not contain the following:

- a statement that the provider will follow the local area adult protection guidelines.
- a description of information to be recorded
- appropriate phone numbers
- arrangements for policy review. All staff should thereafter be made aware of the policy review. (see Recommendation 3)

The manager stated that the service worked closely with Care Managers from Social Work Services and advised them of any concerns in relation to adult abuse . However, the service did not have a copy of the Area Inter - Agency Adult Protection policy and procedure in place.(see Recommendation 4)

**Enforcement**

This was the first inspection of the service.

**Other Information**

None

**Requirements**

None

**Recommendations**

1. The child protection policy of the organisation should be further developed to contain appropriate local contact details of relevant agencies. NCS Support Services: Standards 2.1 & 2.2: Management and Staffing Arrangements.
2. The organisation should obtain and implement best practice guidance including: 'Rights, Risks and Limits to Freedom' - Mental Welfare Commission Best Practice Guidance. NCS Support Services: Standard 2.4: Management and Staffing Arrangements.
3. The Adult Protection Policy should be further developed to contain information such as
  - a statement that the provider will follow the local area adult protection guidelines.
  - a description of information to be recorded
  - appropriate phone numbers
  - arrangements for policy review. All staff should thereafter be made aware of the policy review. NCS Support Services: Standard 2.1 & 2.2: Management and Staffing Arrangements.
4. The service will obtain a copy of the local inter-agency adult protection policy. NCS Support Services: Standard 2.1: Management and Staffing Arrangements.

**Tanko R. Akpo**

**Care Commission Officer**