

Clouds House

Quality Report

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This report describes our judgement of the quality of care at this location. It is based on a combination of what we found when we inspected and a review of all information available to CQC including information given to us from patients, the public and other organisations

Overall summary

We undertook this inspection to find out whether Clouds House had made improvements to the residential substance misuse service following the last comprehensive inspection of the service in October 2016. We published our report in early February 2017, and told the provider to take the following actions:

- The provider must ensure that all care plans, including those that detail physical health needs are reflective of individual needs and that they are client centred, holistic and created in partnership with clients.
- The provider must ensure that where processes are in place to allow nurses to administer certain medicines without a prescription when clients first arrive at the service, that the framework that allows this practice to happen lawfully is signed by a qualified pharmacist.

• The provider must ensure that it reports all relevant incidents and safeguarding events to the CQC as is their statutory responsibility.

At this inspection, we found that they had met all the requirements stated above. The service now completed detailed assessments and care plans for each new client when they were admitted. They had also put Patient Group Directions in place so they could administer medicines to clients who had just been admitted to the service. They were also correctly notifying the CQC of any incidents and safeguarding events when needed.

Summary of findings

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Background to Clouds House

Clouds House is in the Wiltshire countryside, providing residential treatment for people with addictions, including alcohol and drug dependency. Clouds House provides medical detoxification and a therapeutic programme based on the 12 step model.

Our inspection team

The team that inspected the service comprised two CQC inspectors and two CQC assistant inspectors. Following the site visit the inspectors also received professional advice from a pharmacy inspector.

Why we carried out this inspection

We undertook this inspection to find out whether Clouds House had made improvements to the residential substance misuse services following the last comprehensive inspection of the service in October 2016. We published our report in early February 2017. The requirement notices related to breaches of regulation 9 (person-centred care), regulation 12 (safe care and treatment), and regulation 18 (notification of other incidents).

Following the October 2016 inspection, we told the service it must take the following actions:

- The provider must ensure that all care plans, including those that detail physical health needs are reflective of individual needs and risks and that they are client centred, holistic and created in partnership with clients.
- The provider must ensure that processes are in place to allow nurses to administer certain medicines without a prescription when clients first arrive at the service, that the framework that allows this practice to happen lawfully is signed by a qualified pharmacist.
- The provider must ensure that it reports all relevant incidents and safeguarding events to the CQC as is their statutory responsibility.

How we carried out this inspection

To fully understand the experience of people who use services, we normally ask the following five questions of every service and provider:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

For this unannounced inspection, we were looking specifically at the safe, effective and well-led domains only. Before visiting, we reviewed a range of information we held about Clouds House. We carried out an unannounced inspection on 04 April 2018. During the inspection visit, the inspection team:

- spoke with one manager
- spoke with one acting treatment manager
- reviewed six care records and medication administration records

Summary of this inspection

• toured the premises

• reviewed policies and procedures relating to the service.

What people who use the service say

We did not speak with any clients who used the service during this inspection.

Summary of this inspection

The five questions we ask about services and what we found

We always ask the following five questions of services.

Are services safe?

We do not currently rate substance misuse services.

We did not review the whole domain of safe, but just focused on key lines of enquiry relating to medicines management at the service.

 The provider had systems in place to safety administer medicines to clients using the service. The provider had reviewed the systems used by the nurses to administer a small number of medications kept in the service to keep clients safe. These are called patient group directions. The clients were still being assessed and having their medication prescribed by medical staff.

Are services effective?

We do not currently rate substance misuse services.

We did not review the whole domain of effective, but just focused on key lines of enquiry relating to the assessment of clients' needs and planning of care.

• Care-plans were person-centred, holistic and specific to clients' needs. They included actions to address areas of potential risk. The care plans also reflected the views of clients themselves.

Are services caring?

Since the last inspection in October 2016, we have received no information that could cause us to re-inspect this key question.

Are services responsive?

Since the last inspection in October 2016, we have received no information that could cause us to re-inspect this key question.

Are services well-led?

We do not currently rate substance misuse services.

We did not review the whole domain of well-led, just focused on key lines of enquiry related to the sending of notifications to the CQC.

• Statutory and safeguarding notifications were being completed and sent to the CQC.

Detailed findings from this inspection

Substance misuse/detoxification

Safe	
Effective	
Caring	
Responsive	
Well-led	

Are substance misuse/detoxification services safe?

We do not currently rate standalone substance misuse services.

Assessing and managing risks to patients

- Following the previous inspection in October 2016, we told the provider that they must ensure that processes are in place to allow nurses to administer certain medicines without a prescription when clients first arrive at the service, and that the framework that allows this practice to happen lawfully is signed by a qualified pharmacist.
- At this inspection, we found that the provider had three core Patient Group Directions in place for the administration of medicines. A Patient Group Direction allows specified health care professionals to administer a medicine directly to a patient with an identified clinical condition without the need for a prescription or an instruction from a prescriber. This was overseen by a qualified pharmacist.
- We found that the use of patient group directions was well thought through and appropriate. The service made use of three Patient Group Directives (oral diazepam, rectal diazepam and naloxone) which were approved through their Clinical Governance Board and Medicines Management Group. These were also signed off by the clinical lead, pharmacist, chief executive and registered manager. We found that the criteria for using the three Patient Group Directions were reasonable, pragmatic and that the provider was carefully monitoring its use.
- The general medical assessment at the service was efficient. They had sufficient medical cover and did not admit more than three clients on one day in order to safely manage the admission and ensure that the

consultant saw each client in a timely manner. The consultant normally initiates prescribing. As all admissions were planned, each client had a slot reserved with the consultant for effective management of care and transfer of care. Clouds House have also had access to a non-medical prescriber nurse, and had recently secured funding to train another nurse in non-medical prescribing.

Are substance misuse/detoxification services effective? (for example, treatment is effective)

We do not currently rate standalone substance misuse services.

Assessment of needs and planning of care

- At the inspection in October 2016, we found that the care records were not always person-centred, holistic or written with the input of clients.
- At this inspection, we found that the care plans had improved and were person-centred, holistic, individualised and also included clients' own views. We reviewed six care records. The care plans contained detailed information specific to the clients' needs. They were updated regularly.
- The assessments for drug and alcohol use were comprehensive and clear, using the Clinical Institute Withdrawal Assessment for Alcohol, Revised (CIWA-AR) to monitor clients. Physical assessments were done upon admission and continued on an ongoing basis if needed. Each client had a discharge care plan, evidencing the recovery focus of the service.
- Exit plans were present in the care records, and signed by the clients themselves in case a client chose to leave part-way through their treatment.

Substance misuse/detoxification

• At the previous inspection it wasn't always clear if clients had a copy of their care plans, and if they were offered a choice of having a copy. However, the care plans had been changed to include a tick box and signature gap to indicate if clients were offered or given a copy of their care plan or not.

Are substance misuse/detoxification services caring?

We do not currently rate standalone substance misuse services. Since our inspection in October 2016 we have received no information that would make us re-inspect this key question.

Are substance misuse/detoxification services responsive to people's needs? (for example, to feedback?)

We do not currently rate standalone substance misuse services. Since our inspection in October 2016 we have received no information that would make us re-inspect this key question.

Are substance misuse/detoxification services well-led?

We do not currently rate standalone substance misuse services.

Good Governance

• Since the last inspection, the provider had improved in the sending of notifications to the CQC. All the notifications relating to incidents and safeguarding events that the provider was lawfully required to inform CQC about had been completed.