

# Life Success Academy CIC

## Quality Report

374 -376 Slade Road  
Erdington  
Birmingham  
West Midlands B23 7LP  
Tel: 0121 384 4484  
Website: [www.life-successacademy.co.uk](http://www.life-successacademy.co.uk)

Date of inspection visit: 13/09/2016 - 29/09/2016  
Date of publication: 23/03/2017

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

### Mental Health Act responsibilities and Mental Capacity Act and Deprivation of Liberty Safeguards

We include our assessment of the provider's compliance with the Mental Capacity Act and, where relevant, Mental Health Act in our overall inspection of the service.

We do not give a rating for Mental Capacity Act or Mental Health Act, however we do use our findings to determine the overall rating for the service.

Further information about findings in relation to the Mental Capacity Act and Mental Health Act can be found later in this report.

### Overall summary

We do not currently rate independent standalone substance misuse services.

We found the following issues that the service provider needs to improve:

- Staff did not have the right skills and experience for their roles and the registered manager did not supervise and appraise staffs work performance consistently.
- The service did not deal with incidents of harm or risk of harm appropriately.
- The clients did not have care plans, risk assessments or risk management plans in place.
- The service did not have a fire safety assessment.

- The service did not have contingency plans in place for safe staffing at all times.
- The service was unaware of any harm reduction strategies or safe advice around alcohol and drug use.
- The service was unaware of how to deal with an overdose.
- The service was unaware of how to support clients through an opiate or alcohol detox.
- The service was unaware of therapeutic interventions for drug and alcohol users.
- The service did not respond to clients complaints.

# Summary of findings

- The service did not have robust policies and procedures in place to safeguard staff and service users.
- The service was unaware of the importance of safeguarding children and adults from risk of harm.
- The service was unaware of clients' rights to come and go freely from the service.

# Summary of findings

## Contents

<b>Summary of this inspection</b>	Page
Background to Life Success Academy CIC	5
Our inspection team	5
Why we carried out this inspection	5
How we carried out this inspection	5
Information about Life Success Academy CIC	6
What people who use the service say	6
The five questions we ask about services and what we found	7
<hr/>	
<b>Detailed findings from this inspection</b>	
Mental Capacity Act and Deprivation of Liberty Safeguards	10
Outstanding practice	20
Areas for improvement	20

---

# Brooke House

**Services we looked at**

Substance misuse services

# Summary of this inspection

## Background to Life Success Academy CIC

Life Success Academy registered with the CQC on 25 June 2014. The location is Brooke House and they registered to provide accommodation for persons who require treatment for substance misuse.

Their statement of purpose states that they provide residential substance misuse treatment and / or rehabilitation services for adults between the ages of 18 and 65 years. Life Success Academy has a registered manager, who was also the director of Life Success Academy. Life Success Academy states that they aim to reach out to marginalised people in the community who have dependency and behavioural issues. They state they can offer a methadone and subutex detoxification to men and women aged between 18 and 65, with long term drug and alcohol dependencies. Their literature reports that this is offered in conjunction with a local pharmacy and is supervised by local GP's.

The organisation is a Christian based charity, they offer life coaching and mentoring to those individuals who want to change. They state that they offer a 10 step programme and a "stick man" programme to support people through detoxification.

Life Success Academy is able to accommodate up to 12 clients. There are 10 bedrooms. Bedrooms were not ensuite. Clients shared three showers, one bath and three toilets. Life Success Academy is located in inner city Birmingham, close to public transport, shopping and leisure facilities.

Before Life Success Academy registered with the CQC Life Success Academy was a supported hostel.

Life Success Academy has not been previously inspected.

## Our inspection team

The team that inspected the service comprised CQC inspector Lisa Dainty (inspection lead), a CQC inspector and a CQC Inspection Manager.

An expert by experience also joined the first day of inspection. An expert by experience is a person who has personal experience of using, or supporting someone using, substance misuse services.

## Why we carried out this inspection

We inspected this service as part of our comprehensive inspection programme to make sure health and care services in England meet the Health and Social Care Act 2008 (regulated activities) regulations 2014.

## How we carried out this inspection

To understand the experience of people who use services, we ask the following five questions about every service:

- Is it safe?
- Is it effective?
- Is it caring?

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

Before the inspection visit, we reviewed information that we held about the location and asked other organisations for information.

During the inspection visit, the inspection team:

# Summary of this inspection

- visited Life Success Academy, looked at the quality of the physical environment, and observed how staff were caring for clients
- spoke with seven clients
- spoke with the registered manager and the deputy manager
- spoke with two staff members employed by the service provider
- spoke with a carer who was employed to work with two individual clients
- looked at eight clients care and treatment records, including medicines records
- observed medicines administration at breakfast time
- looked at policies, procedures and other documents relating to the running of the service.

## Information about Life Success Academy CIC

After the inspection we began enforcement activity on Life Success Academy to serve them with a Notice of Proposal to cancel their regulated activity under Section 17(1)(c) of the Health and Social Care Act 2008 but we were unable to take this action as Life Success Academy de-registered with the CQC.

They are currently providing hostel accommodation.

## What people who use the service say

Two clients who used the service said that they liked living there as they were not bullied by other clients as

they had been in previous hostels. They did not agree with being fined and said that they could not challenge any 'rules' of the house and that there was not any point in making complaints as they were not listened to.

# 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 standalone substance misuse services.

We found the following issues that the service provider needs to improve:

- The front and back doors were locked at night and fire doors were wedged open. The service did not comply with the Regulatory reform (Fire Safety) Order 2005 as it did not have a fire safety risk assessment. The kitchen did not have a fire safety blanket and emergency exits and doors did not have signage.
- The bedrooms smelt of urine and beds did not have a complete bedding set. Bedlinen was dirty, torn and stained.
- There was no cleaning schedule or cleaning records available.
- They did not complete health and safety audits or have an environmental risk assessment.
- Medicines were not stored and dispensed safely and there was no medication management policy in place.
- There were no models to assess the staffing requirements for the service, no rotas in place to show how the service was staffed and no contingency plans in place to cover annual or sick leave.
- Staff did not have any mandatory training. The staff had no training in completing risk assessments. Staff were not trained in managing aggression and violence.
- Clients did not have any care plans or risk assessments completed.
- Staff did not deal with safeguarding incidents and concerns.
- The service was not able to provide consistent evidence that incidents were reported and recorded and that statutory notifications were made to the CQC as required.

### **Are services effective?**

We do not currently rate standalone substance misuse services.

We found the following issues that the service provider needs to improve:

- Care records we reviewed did not document how and why decisions were made for clients. The records did not show how a client's ability to manage money independently was assessed, and whether or not the client had capacity to make this decision.

# Summary of this inspection

- There was no evidence available to show us that detoxification programmes were supported and we could see no evidence of psychosocial recovery based approaches in practice. Staff lacked knowledge around substance misuse, alcohol use, blood borne virus transmission, harm reduction techniques and therapeutic interventions.
- Staff did not know what National Institute for Clinical Effectiveness (NICE) Guidelines were.
- None of the staff had worked previously in the substance misuse field or had any training or relevant qualifications to do the job effectively and competently.
- Clients were not allowed to have any visitors.
- Clients were locked in the building between 11pm and when the day staff came to work at 9am. If they missed the 11pm curfew they had to find somewhere else to sleep.

## Are services caring?

We do not currently rate standalone substance misuse services.

We found the following issues that the service provider needs to improve:

- We did not observe staff interacting with clients in a kind, caring and respectful manner. Some of the clients told us that staff shouted at them.
- We saw evidence that some residents were given on the spot fines for behaviours such as spitting or damaging the furniture while using it.
- There were not any methods for clients to feedback how they felt about the running of the service or the rules of the house.

## Are services responsive?

We do not currently rate standalone substance misuse services.

We found the following issues that the service provider needs to improve:

- Clients did not have any discharge plans in their client files. The service did not have a discharge policy.
- Clients did not have a choice regarding whether or not they shared rooms with other clients.
- The kitchen was kept locked between 11pm and 8am so clients could not make hot meals during this time.
- Staff were observed walking into clients bedrooms without knocking on the door first.



# Summary of this inspection

- Clients did not have access to any advocacy or support services.

## **Are services well-led?**

We do not currently rate standalone substance misuse services.

We found the following issues that the service provider needs to improve:

- There were not any governance systems or procedures in place.
- There were not any policies and procedures available that related to the running of the service.
- No audits had been completed.
- There was not a recruitment process in place.
- The provider did not have any Liability insurance in place for the year prior to our visit.
- There was not a whistleblowing policy or procedure in place.

# Detailed findings from this inspection

## Mental Capacity Act and Deprivation of Liberty Safeguards

The staff at Life Success Academy stated that they did not know what the Mental Capacity Act was or what Deprivation of Liberty Safeguards were. We did not see any evidence of any knowledge of the principles of the act.

# Substance misuse services

Safe	
Effective	
Caring	
Responsive	
Well-led	

## Are substance misuse services safe?

### Safe and clean environment

- Clients did not have a front door key and relied on staff to let them back into the house if they had been out. At night, the registered manager told us two “trusted” clients locked the front door and locked the door that led to the smoking area at 11pm and they were instructed not to open the doors to anyone after that time. We said that this was a restriction of clients’ freedom of movement and a fire safety risk. The registered manager said if there was a fire one of the key holders would be able to open the door. This was not a satisfactory answer as fire doors should not be kept locked.
- We saw the fire exit to the rear of the property had been blocked and locked during the first day of inspection. We also saw that two fire doors were wedged open. We pointed this out to the staff and they unlocked and cleared the exit immediately. They also removed the wedges from the fire doors.
- We made an unannounced night time inspection two days later to check clients were not locked in. We found the doors to be unlocked and the clients said they had been told by the registered manager to stop locking the door after 11pm.
- The provider did not have a fire evacuation plan to follow in case of a fire. The emergency routes and exits did not have signage. The client kitchen did not have a fire blanket. The provider was unable to provide us with evidence of servicing and testing of the fire alarm and that emergency lighting had been carried out. We saw stickers on fire extinguishers indicating they had not been maintained and checked since 2012. Our concerns with fire safety were

serious so we informed West Midlands fire service. They completed a fire safety audit on Friday 16 September and found the provider to be non-compliant with the Regulatory reform (Fire Safety) Order 2005.

- All communal areas were monitored via CCTV. The registered manager informed us they viewed the CCTV remotely when not at the premises. This was to ensure people did not enter the premises after the 11pm curfew.
- The furnishings and fittings throughout the client areas were dirty, stained and worn. We saw stains on walls. Kitchen fixtures around the hand wash sink were broken. All three shower basins had mould on them. The shower curtain in the downstairs shower was hanging loose and had mould on it. The bath side panel was loose. A ceiling panel downstairs was broken with wires hanging out of it.
- Toilets did not have hand soap dispensers or facilities to dry hands. The registered manager told us they had stopped supplying paper towels due to clients blocking the toilets. On a return visit on the 22 September we saw hand dryers were being installed.
- There was a strong smell of urine in bedrooms.
- Five of the clients’ bedrooms that we looked at did not have a full set of bedding. The bedlinen and pillows were visibly dirty, stained and soiled.
- We saw food had been spilt on the dining table, dried out and not cleaned up.
- We found a jar of tartare sauce in the fridge labelled with a ‘use by’ date of 8 December 2015.
- There was no cleaning schedule or cleaning records available. We spoke with one member of staff who told us they sometimes came in early to clean as Life Success Academy did not have a permanent cleaner.
- The provider did not have an infection control policy or adhere to infection control principles. They did not

# Substance misuse services

complete health and safety audits or have an environmental risk assessment. This meant they were unable to monitor and reduce risks to the health and safety of clients and staff.

- Life Success Academy did not have a clinic room. Each client had medication individually dispensed by a local pharmacy in the form of blister pack boxes. Staff stored these in a filing cabinet overnight and during the day left them in an unlocked drawer in the staff office. We informed the staff that medication should be locked away. However, on all subsequent inspection days we saw medication was left in an unlocked drawer. We saw medication had been left in a plastic cup on top of the drawer. Staff were unable to say why it had been left there or who it belonged to. Staff were unaware that if medication is not stored securely, it may be stolen, accidentally mixed up with another person's, be taken by someone it is not prescribed to with potentially serious consequences.

- Staff dispensed medication to the clients from their dispensing boxes from the pharmacy. However, staff did not have any training in the management and handling of medication. There was no medication management policy for staff to refer to. Staff were unaware that it is important to have a written medicines management procedure in place and that practice is monitored in order to ensure that all staff follow safe practice.

- There was no standard operating procedures for controlled drugs. There was no controlled drugs cupboard. Staff lacked knowledge of the potential risks of controlled drugs. Staff were not aware of the legal issues of holding another person's controlled drugs.

- All clients had medication administration record (MAR). These were signed and dated. However, we noted the security guard staff had signed the cards at weekends and on some Friday evenings. This would indicate they had dispensed the medication. We asked staff about this and got conflicting answers. The registered manager told us security guards gave medication, however the deputy manager said they did not. He said the security guards only prompted clients to take the medication once staff had left it in their bedrooms. One staff signature on a MAR cannot accurately record different tasks done by other members of staff at different times.

- We found a naloxone pen in the administration office which staff said they had taken from an ex client. Its expiry

date was August 2016 and it had not been disposed of. Naloxone is a medication used to block the effect of an opioid overdose. Staff were not trained in the use of naloxone. There was no naloxone policy for staff to refer to in order to follow correct administration procedures and adhere to safe practice.

- No staff were trained as first aiders and there was not a first aid box available.

- On the 13 September 2016 we asked for evidence of portable appliance electrical testing on any electrical equipment, the registered manager told us that they were not sure if electrical equipment had been tested. Staff were unable to provide us with assurance that equipment was safe to use.

## Safe staffing

- Life Success Academy had four permanent staff members. This included the registered manager, her husband who was a volunteer and a former client who was also a volunteer. Both volunteers were paid expenses. The registered manager said that they all covered a Monday to Friday rota from 9am to 10pm.

- The fourth member of staff was employed as a carer for three clients who had additional personal care needs. The care worker carried out her duties for two and half hours Monday to Friday. It was unclear who supported these clients at weekends. The manager told us they did not need support at weekends.

- Agency security staff were employed Monday to Friday 10 till 11pm and at weekends between 9am to 11pm. Documentation we viewed stated that the role of the security staff was to randomly search clients and their rooms, answer the door (as clients were forbidden to do so), prompt clients to take their medication, enforce the rules and regulations and warn any violators regarding possible consequences.

- Two staff told us they were often short of time and pressured as there was not enough staff to cover the house, particularly when staff were on leave.

- On 14 September 2016 we asked about staffing requirements. There were no models to assess the staffing requirements for the service and no rotas in place to show how the service was staffed.

# Substance misuse services

- There was no contingency plan in place to cover unexpected staff leave other than a friend of the registered managers 'helping out'. There was no use of agency staff. We were concerned there was not enough staff to support clients with recovery plans and day to day living. Clients and one member of staff told us staff were not always present during the day. The registered manager told us and showed us that they were able to monitor clients at Life Success Academy remotely via CCTV viewed on a tablet if they were not at the premises.
- We made an unannounced visit on 22 September and arrived at 8.10am. Staff were not present. Two clients let us in. We found that the kitchen was locked. Therefore clients were unable to use the kitchen to make breakfast. If clients needed their medication early they would not have been able to access it. Staff did not arrive until 9.20 am.
- The registered manager told us that they operate an on call system for out of hours and weekends. This meant security staff and clients could telephone the registered manager if they had any concerns. She would then contact a volunteer who lived locally to attend the premises if required. The volunteer told us that she was regularly called out to let residents in after the 11pm curfew so she moved further away from Life Success Academy.
- Three clients told us that staff were not always available during the day. The carer also told us that staff were not always present during the day.
- Staff did not have any mandatory training. The registered manager told us two staff had completed first aid training but on reviewing the certificate we found that it had expired 11 July 2015.

## Assessing and managing risk to clients and staff

- On the first day of inspection we asked to see client records. We were told that they were held on the computer. The registered manager told us she was unable to access them and that another staff member would be able to show us these. The following day another member of staff attempted to show us the files on the computer but was unable to do so. During an unannounced visit on the 22 September we requested files again. We were given eight paper files which were the client care records. There were no up to date risk assessments evident in the clients' notes. The registered manager said that they would inform each

other of any changes in risk via a private social media group using their mobile telephones. We were unable to see how risk assessments were completed or recorded. The staff had no training in completing risk assessments.

- We were told that visitors including children were not allowed to enter the premises to reduce the risk of drug taking on the premises.
- Staff were not trained in managing aggression and violence. The registered manager told us that they advised staff to should lock themselves in the office and call the police if they felt in danger.
- Staff had not completed any safeguarding children or adults training and the registered manager was unaware of the importance of this.
- The registered manager did not monitor safeguarding referrals to the local authority but said that she knew how to do so. However when asked to explain the process she was unable to.
- We were not assured that staff dealt with safeguarding incidents and concerns adequately. The registered manager told the inspection team about incidents in which a client had called the police as he thought he needed an ambulance; the registered manager said they had the request as felt he did not need it. He then called the police. The registered manager told us about a client wanting to go out on their mobility aid. The registered manager said that they had prevented them leaving on the advice of the general hospital they had recently been discharged from. The client contacted the police to report that staff were keeping them at Life Success Academy against their will. The registered manager confirmed that they had not reported these incidents to the local authority safeguarding team or to the CQC.
- We asked the registered manager about safeguarding children. The registered manager told us that they had not completed child safeguarding training and that "what happened outside of Life Success Academy was of no concern". This showed a lack of understanding of the safeguarding principles in relation to clients they support and children they may be in contact with.
- The registered manager told us about an agreement the service had with 3 clients to know and use their cash card PIN (Personal Identification Number). Banks advise that on no account should the customer disclose their PIN to a

# Substance misuse services

third party in order for them to access their account. It is legitimate to access someone else's bank account with their permission by seeking a third party mandate from the client's bank. Staff showed us contracts drawn up, signed and dated between Life Success Academy and the clients. These showed that the client had signed an agreement that Life Success Academy could use the clients PIN number and withdraw monies. However, these arrangements had not been formally made using the post office/ banks 'third parties mandates' and were therefore not arrangements which met with the banking requirements to safeguard those who wish to authorize a third party. An informal agreement between Life Success Academy and the clients does not safeguard clients or staff.

- On 22 September 2016 we reviewed cash logs and could see that clients were given financial charges in addition to the weekly utility charges. For example, a client was charged for using the laundry facility more than once a week and for a deep carpet clean. Client B told the inspection team that he was charged an additional £80 per week. Client C told us he was charged additional £400 pounds per month. It was not clear from the paperwork, policies and procedures how and why clients were charged extra. All the clients we spoke with were not clear about the additional charges. We were not assured that there were systems and processes in place that would protect clients from potential financial abuse.

- The service did not have any protocols on personal safety and they did not have a lone working policy.

## Track record on safety

- No serious incidents were reported to have happened twelve months prior to inspection.

## Reporting incidents and learning from when things go wrong

- When asked about reporting of incidents the registered manager was not able to provide consistent evidence that incidents were reported and recorded. We reviewed two incident forms, which the registered manager took a long time finding as she was not sure where they were kept. Throughout the interview, the registered manager told us about incidents that she had no written record of. For example, when asked about the absence of a fire blanket in the kitchen, she said it had not been replaced since it had last been used in a recent fire. There was no incident form for this.

- Since registration with the CQC, the CQC had not been notified of any statutory notifications. During our interview on the 13 and 14 September 2016, the registered manager told the inspection team about incidents where abuse had been alleged between clients and between staff and clients. We were told about two incidents that had been reported to or investigated by the police. These are statutory notifications and they had not been reported as such to the CQC. The registered manager told us that they were not aware that they needed to report incidents to the CQC.

- There were no incident and reporting guidelines for staff to refer to

- The registered manager could not provide us with evidence that they learnt from when things went wrong. However, she did share with us that she had added to the list of house rules that clients could not go into each other's rooms in an effort to prevent theft from each other.

## Duty of candour

- The registered manager was not aware of what 'Duty of Candour' meant and how it related to service provision.

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

Assessment of needs and planning of care (including assessment of physical and mental health needs and existence of referral pathways)

- The registered manager screened referrals and spoke with the client before they signed the license agreement to stay at Life Success Academy.

- The registered manager said they always discussed with the clients before admission what their goals were and assessed whether the client was ready to change their lifestyle. However, we did not see evidence of this in client's files.

- None of the eight care records we reviewed documented how and why decisions were made for clients. For example, the registered manager told us that some clients had agreed for Life Success Academy to manage their finances using a personal allowance scheme as they could not

# Substance misuse services

manage their money effectively. However, care records we reviewed did not show how a client's ability to manage money independently was assessed, and whether or not the client had capacity to make this decision.

- It was unclear if Life Success Academy actually provided what their website and referral form claimed. We could find no evidence that detoxification programmes were supported and we could see no evidence of psychosocial recovery based approaches in practice. Staff did not have the skills or knowledge to support clients through these programmes.

- Through discussion with staff it was clear that they lacked knowledge to offer supported detoxification programmes to clients with substance misuse. Staff were unable to explain to us what programme of support they offered and any evidence base.

- The deputy manager was unable to tell us what a controlled drug was. They were not able to explain the dangers posed to an alcohol dependent person who may suddenly stop drinking. Staff were unable to tell us what signs and symptoms might be present if someone was suffering from an opiate overdose. They were unable to give any drug or alcohol harm reduction advice or information to clients. They were unaware of blood borne virus transmission risks or routes.

- One client was prescribed metformin and staff were not aware that he had diabetes.

- On the 13 September 2016 the inspection team asked to review the care records for all clients. The registered manager could not access them at that time and arranged for a staff member to show us the following day. On the 14 September 2016, staff were unable to access the files on the computer. It was a concern that staff were not able to readily access care records. This could prevent care being given as identified. It prevents staff from recording care given accurately and within a timely manner.

## Best practice in treatment and care

- We could find no evidence to support best practice in treatment and care.

- The registered manager had not heard of National Institute of Clinical Excellence guidelines and said that she found information that she needed via an internet search engine.

## Skilled staff to deliver care

- Life Success Academy had four permanent staff members. This included the registered manager, her husband who was a paid volunteer, and a former client who was also a paid volunteer. None of the staff had any training in the substance misuse field or had worked within substance misuse services.

- We were not assured that staff had the competence to work with people who misuse substances or experienced co morbid mental illness. Staff had no specialist training. On 22 September 2016, Client A told us that staff had told him spitting onto the floor put others at risk of catching a blood borne virus.

- Staff were not able to tell us what a controlled drug was or explain the details of the 28 day detoxification program Life Success Academy offer clients.

- The inspection team asked the registered manager about developing standards of practice within the drugs and alcohol national occupational standards (DANOS) – they had no knowledge of DANOS. DANOS outline skills needed for staff working within substance misuse to perform the job competently.

- None of the staff had received any supervision or appraisals.

- No staff were able to identify and manage training needs and poor performance promptly and efficiently, and there was not a service policy.

## Multidisciplinary and inter-agency team work

- The registered manager said that the service had weekly house meetings which consisted of prayers and bible studies; however she said that these had not happened for a “long time” and she had never taken any minutes of these meetings.

- Staff did not appear to have any good links with other services although they said that they supported clients to attend meetings or appointments in the community.

- The service said that they liaised with mental health services, GPs, voluntary services and acute hospitals. They reported that they had referral pathways in place, although these were unclear. There were no supporting documents, policies or procedures to support this.

# Substance misuse services

Good practice in applying the MCA (if people currently using the service have capacity, do staff know what to do if the situation changes?)

- Staff had no training or understanding of the mental capacity act. They were unable to share knowledge when asked questions regarding the main principles of the mental capacity act. They did not have an understanding of what capacity was.
- There was no evidence in any of the client care records that staff assessed mental capacity.
- It was not clear that staff had any understanding in how to assess capacity or what to do if a person's capacity changed. We asked staff how they would assess capacity; they were unable to demonstrate this.
- The registered manager did not have an understanding of the legalities of restricting person's movements. For example, they instructed two clients to lock people in the house every night from 11pm onwards and when challenged about this she said it was for the clients' safety. The registered manager was unaware of the risks to clients from a house fire or that she was unable to restrict their movements legally.

## Equality and human rights

- Only males could access the service as the registered manager said that they had had problems with female clients in the past. • Clients were not allowed any visitors at all to the property.
- Clients were not allowed a key to the property.
- Clients had to be back in the property by 11pm or they would be locked out and some residents had said that they had "slept rough" because they could not get back in after 11pm.

## Management of transition arrangements, referral and discharge

- There was no referral or discharge policy to guide staff.
- Clients had signed a tenancy license to stay at the accommodation. The license included a list of financial contributions that clients were expected to make and house rules that had to be followed.
- There were no exit plans in place for clients or plans to support an unexpected exit from the service.

- The registered manager said that the local police "rehomed" clients that she evicted although she could not give any examples where this had happened or give any details to corroborate this.

## Are substance misuse services caring?

Kindness, dignity, respect and support

- Four clients told us that three of the staff shouted at clients. We did not observe staff interacting in a kind, compassionate and respectful manner. They did not attempt to provide practical and emotional support during their interactions. They were not responsive to the needs of clients and did not demonstrate a positive approach.
- Three clients told us that staff imposed 'on the spot' fines. On the 22 September we asked the deputy manager about this and they initially denied doing this. We found written evidence in a petty cash log that fines were imposed. They ranged from five pounds to fifty pounds for behaviours such as spitting or urinating in the bedroom sink. When we asked the deputy manager about this he said that it was only for one client and that it was a behaviour modification programme. We could see from the cash log that this client was fined from £5 to £50 for the same 'offence' of spitting on the floor. We found further written documents that showed other clients were being fined. One client was fined for damaging furniture with his weight by sitting down on it and another was fined for urinating in the sink. When we asked the deputy manager about this they stated they did not know about those fines and we would have to discuss with registered manager. The registered manager had gone away and was unavailable. We were told she would be returning on 6 October.

The involvement of clients in the care they receive

- The service told us that they ran weekly house meetings for clients to give feedback but did not have any minutes of these. Clients told us that the rules could not be challenged or changed in the house. The registered manager said that she would not change any rules if residents complained and they would have to find somewhere else to live if they did not like the rules of the house.
- Two clients we spoke with said that they liked living at the property. They said that they had lived in hostels before where they had been bullied by other clients but that did not happen here.



# Substance misuse services

•One client we spoke with said that he was fined regularly and also had to do jobs in the house such as moving furniture and cleaning communal areas. He did not agree with the 11pm curfew and wanted to be rehoused. He was unclear why fines were imposed and unclear what constituted an offence that he would be fined for.

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

### Access and discharge

•Life Success Academy received referrals from a variety of services such as probation, prisons and community mental health teams.

•We did not see any discharge arrangements in client files.

The facilities promote recovery, comfort, dignity and confidentiality

The physical environment and rules imposed upon the clients did not promote recovery, comfort and dignity because:

•Clients were not given a choice in whether they share or have a single room. Two clients told us that they were often asked to move rooms and were not given a reason as to why. Rooms were basic. Clients were able to personalise the rooms.

•Clients had access to a kitchen and dining room. The dining room was small and cramped. It had a table and chairs for six people, but Life Success Academy was registered to accommodate up to 12 clients. It also housed a freezer and small table with a hot water urn. The hot water urn was accessible 24 hours a day.

•The kitchen furnishings were basic and in some areas damaged. Documentation that Life Success Academy gave us prior to the inspection stated that if clients cooked in the kitchen they must do so with the outside kitchen door open. We were concerned that this would make the kitchen/house cold in winter months.

•We were told the kitchen was kept locked between 11pm and 8am to reduce the risk of fires although when we arrived after 9am the kitchen was still locked. This meant clients were unable to make hot meals at times when it was locked.

•There was a lounge. Furniture was worn and in poor condition. There were stains on the walls. There was a television. However, there were strict rules as to when it could be watched. This was not in place to ensure that clients were participating in a therapeutic recovery programme. Staff were unable to say why this rule was in place. •We noted that the shower room on the ground floor had two shower compartments, separated by a partition. This did not ensure clients had privacy when showering.

•When the inspection team was being shown around Life Success Academy on 13 and 14 September 2016, we observed that staff did not always knock before entering clients' rooms.

### Meeting the needs of all clients

•One client had significant mobility needs. He was accommodated on the ground floor and had access to the ground floor toilet and shower. However, staff told us that he was unable to leave due to his limited mobility, difficult getting in out of cars and poor eye sight. Staff had not addressed these needs in his recovery/ support plan.

### Listening to and learning from concerns and complaints

•Clients did not know how to complain and told us that the rules of the house could not be challenged. The registered manager said that they would not change the rules of the house.

•We asked the registered manager how the service monitored and reviewed complaints. They said they did not have a formal procedure in place.

•The service did not have any information available within the service to tell people how to complain or access support to make a complaint for example through advocates or interpreter services.

## Are substance misuse services well-led?

### Vision and values

•The service did not have any visions or values.

### Good governance

•There was no evidence of governance structures in place and when questioned, the registered manager did not know what this was or why it was important.

# Substance misuse services

•On 13 and 14 September 2016 we noted that the staff office had a shelf of policies and procedure files. We asked the registered manager about these. The registered manager told us that they had purchased them. As part of the pre inspection information request the registered manager had returned 15 policies and procedure documents to the CQC. We noted they had the provider address and location typed upon them, but they did not all relate to the service that Life Success Academy provided, for example we received a catering management protocol. This document records the chefs' day to day duties and quality control within the catering area. However, the service did not employ a chef and clients self-catered. The relevance of this policy was not clear.

- The service did not have a fire risk assessment.
- There was no environmental risk assessment, health and safety audit or associated checks in place.
- There was no infection control policy.
- There was no medicines management policy or a standard operating procedure that covered the safe storing and administering, recording and destruction of controlled drugs.
- There was no medicines management policy or a standard operating procedure that covered the safe storing and administering, recording and destruction of medication.
- There was no lone working policy.
- There was no on call policy.
- There was no search policy.
- There was no code of conduct policy.
- There was no safeguarding policy.
- There was no staff supervision or appraisals recorded. The registered manager said she supported staff as and when needed.
- As part of the pre inspection information request they provided us with a one page Auditing Policy and procedure. It did not show how or what would be audited. It did not have an action plan attached. During our interview with the registered manager on 13 September 2016, we asked how the service was audited. We asked how they knew the

service was 'doing a good job'. The registered manager said that they did not complete formal audits and that "knowing that clients left Life Success Academy having got their life back together was enough".

- The inspection team looked at the four staff files held by Life Success Academy. There were no interview records for staff members. Files were unable to show how staff were recruited and how the registered manager assessed their suitability for the position. There were no records of support given or training requirements. There were no references held for staff. Files did not contain information about job roles, responsibilities or duties.

- We saw in a staff member file that the Disclosure and Barring Checks certificate (DBS) was registered to a fitness service and not Life Success Academy. It also contained highly confidential information that should not have been present in the file. In another staff file we found a paid volunteer contract and a photocopied DBS registered to another service. We could not ascertain the date on this as it was not visible. The records confirmed that staff had commenced employment using DBS from previous employment dating back over a year. The registered manager had not completed or requested an up to date Disclosure and Barring Check for these two staff. There was no DBS certificate present in the registered managers or third staff member's files. There were no processes in place to ensure necessary DBS checks were undertaken and reviewed as necessary.

- We saw that Liability insurance had been purchased the week before our inspection. The registered manager said that it had not been purchased for the previous year.

## Leadership, morale and staff engagement

- The registered manager told us that there were no bullying or harassment cases within the service.

- Staff told us they felt unable to raise concerns with management and the provider did not have a whistleblowing procedure.

- Staff reported morale as being good and said that they worked together as a 'family'.

- The service did not offer staff opportunities for leadership.

- Staff were unable to provide feedback to the management team and offer ideas for service improvement.

## Commitment to quality improvement and innovation

# Substance misuse services

- The registered manager could not provide us with any evidence of their commitment to quality improvement and innovation.

# Outstanding practice and areas for improvement

## Areas for improvement

### Action the provider MUST take to improve

- The provider must ensure that care records are maintained in a timely manner.
- The provider must ensure that all clients have a recovery focused, holistic and person centred recovery careplan.
- The provider must ensure that all clients have a risk assessment and risk management plan in place.
- The provider must ensure that the mandatory training identified is sufficient to support staff to carry out their roles safely and effectively
- The provider must ensure that any behaviour modification programme is completed and supported by an informed approach. Behaviour modifications programs should be based on a functional assessment of behaviour, time specified and clearly care planned, regularly reviewed and reassessed. These must not consist of financial fines being imposed upon the clients.
- The provider must ensure that any blanket restrictions imposed upon clients are individually assessed, managed and recorded.
- The provider must ensure that they do not restrict clients right to movement to and from Life Success Academy.
- The provider must ensure that clients have access to the kitchen at all mealtimes.
- The provider must ensure the privacy and dignity of all clients at Life Success Academy.
- The provider must ensure that staff have an understanding of capacity and consent. They must show how decisions are made for people and whether or not the person has capacity.
- The provider must ensure that they comply with The Regulatory Reform (fire safety) order 2005.
- The provider must ensure that servicing of fire equipment and testing of fire alarms are carried out on regular basis.
- The provider must ensure that electrical equipment is fit for use.
- The provider must ensure that it has an environmental risk assessment in place.
- The provider must ensure the premises are kept clean and furniture, fixtures and fittings well maintained.
- The provider must ensure that food hygiene and infection control principles are maintained.
- The provider must ensure it has an effective and accessible system for identifying, receiving, handling and responding to complaints from people using the service, people acting on their behalf or other stakeholders.
- The provider must ensure there is a robust governance system in place. This must assess, monitor and drive improvement in the quality of the services provided, including the quality of the experience for people using services and others.
- The provider must ensure there are systems and processes in place, to assess, monitor and mitigate risks relating to health, safety and welfare of people using the services and others.
- Policies and procedures must be available to all staff to guide the running of the service and ensure that systems and processes ensure the safe running of the service for both clients and staff.
- The provider must ensure that staff have access to mandatory training.
- The provider must ensure that staff have the skills and knowledge to provide support as needed and that staff have access to ongoing training, supervision and appraisal.
- The provider must ensure that staffing levels meet the identified needs of the service.
- The provider must ensure that medication is stored appropriately and administered correctly.
- The provider must ensure that it safeguards its clients against abuse and improper treatment.

# Outstanding practice and areas for improvement

- The provider must ensure that staff are suitably qualified, competent, skilled and experienced to work with the client group.The provider must ensure that recruitment and employment procedures are established and operated effectively.

- The registered person must establish and operate effectively an accessible system for identifying, receiving, recording, handling and responding to complaints by service users and other persons in relation to the carrying on of a regulated activity.