

Westcliffe House Limited

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 do not currently rate independent standalone substance misuse services.

Our last comprehensive inspection of Westcliffe House was in December 2016. At that inspection, we issued five requirement notices. Issuing a requirement notice notifies a provider that we consider they are in breach of legal requirements and must take steps to improve care standards.

On 9 May 2018 we undertook an unannounced, focused inspection to see whether the provider had made the required improvements. We found that the improvements were either underway or complete.

- Since the previous inspection, the provider had started to update their policies and staff records.

- The provider had also completed work to ensure the privacy and dignity of patients was respected at all times.
- The provider had ensured that incidents were recorded and learning was acted upon and disseminated to all staff.

However:

- Further work was needed to ensure the provider had the appropriate systems in place to ensure that all staff had regular recorded supervision and that all staff had completed the training needed to undertake their roles.

Summary of findings

Our judgements about each of the main services

Service

Rating

Summary of each main service

Substance misuse services

We do not currently rate standalone substance misuse services.

Summary of findings

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Summary of this inspection

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Westcliffe House Limited

Services we looked at

Substance misuse services

Summary of this inspection

Background to Westcliffe House Limited

Westcliffe House Limited is located in the small seaside town of Weston-super-Mare.

Westcliffe House Limited provides accommodation for persons who require treatment for substance misuse. It has the capacity to treat and care for up to 20 men and women at any one time. The service had 10 clients admitted at the time of the inspection.

The service offers residential treatment programmes for clients recovering from drugs, prescription medication and alcohol addiction. They also offer accommodation for clients requiring detoxification; this treatment is delivered and monitored by Addaction, an external organisation with whom Westcliffe House have a written agreement. Westcliffe House Limited also offers counselling to clients with mental health problems such

as obsessive compulsive disorder, eating disorders, gambling and co-dependency. Westcliffe House offers a range of services that include specialist therapies, training programmes and aftercare.

The service had a registered manager in post. A registered manager is a person who has registered with the CQC to manage a service and they have a legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations. At the time of the inspection Westcliffe House Limited was registered for accommodation for persons who require treatment for substance misuse and treatment for disease disorder and injury.

We last inspected Westcliffe House Limited on 14 December 2016. We issued five requirement notices following this inspection.

Our inspection team

The team that inspected the service comprised of two CQC inspectors.

Why we carried out this inspection

We undertook this inspection to find out whether the provider had made improvements to their substance misuse services since our last comprehensive inspection of the hospital in December 2016.

At the last inspection we said the provider had to make the following improvements:

- At the last inspection in 2016 we asked the provider to put in place robust governance structures to support the delivery of care by the team. This includes clear systems and processes and up to date policies to assess, monitor, and improve the quality and safety of the service.
- At the last inspection in 2016 we asked the provider to ensure there is a robust incident reporting procedure in place to promote learning.

- At the last inspection in 2016 we asked the provider to ensure there is a robust induction and training programme that prepares staff for their role and is updated on a regular basis to ensure they can meet the needs of the clients. Staff competence to do their job should also be assessed both during and following induction and periodically and the provider must ensure all staff are competent to carry out the roles required of them.
- At the last inspection in 2016 we asked the provider to maintain the client's privacy at all times including when they are asleep.
- At the last inspection in 2016 we asked the provider to support the confidentiality of people using the service and not contravene the Data Protection Act 1998.

Summary of this inspection

Following the December 2016 inspection, we issued requirement notices related to breaches of regulation 10 (dignity and respect), regulation 12 (safe care and treatment) and regulation 17 (good governance).

How we carried out this inspection

As this was an unannounced focused inspection to follow up on specific areas of concern, we did not consider all of the five key questions that we usually ask.

Instead, we concentrated on whether the action that we had told the provider it must carry out at Westcliffe House had been completed.

During the inspection visit, the inspection team:

- visited Westcliffe House to observe the environment where clients received treatment
- spoke with two staff, including the registered manager
- looked at six medicine charts
- looked at six staff records
- looked at relevant policies and procedures
- reviewed examples of how incidents had been managed
- reviewed action plan and audits

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 were satisfied that the service had completed the improvements in the requirement notice, given in December 2016 because:

- Medicine management had improved since our last inspection. We saw medicine charts were filled in correctly and medication errors were logged in a timely manner.
- Incidents were being recorded and actions and learning following incidents were disseminated to staff in team meetings.

Are services effective?

We do not currently rate standalone substance misuse services.

We were satisfied that the service had completed the improvements in the requirement notice, given in December 2016 because:

- There was an identified process for new staff members to help them get a rounded induction to the service. Newly recruited staff would start as volunteers, become part of a mentoring scheme before becoming part-time and then full-time members of staff. However, the induction process was not fully structured with a clear checklist with what staff should be learning with each stage of their induction.

Are services caring?

We do not currently rate standalone substance misuse services.

We were satisfied that the service had completed the improvements in the requirement notice, given in December 2016 because:

- Confidential information was not left unattended in public areas at this inspection.

Are services responsive?

We do not currently rate standalone substance misuse services.

We were satisfied that the service had completed the improvements in the requirement notice, given in December 2016 because:

Summary of this inspection

- At the previous inspection, one shared bedroom with an ensuite shower had no wall, which meant clients had to agree not to be in the room whilst the other was taking a shower. The provider had fitted a shower curtain around the shower to ensure patients' privacy and dignity.
- At the previous inspection, we told the provider they needed to ensure the privacy of clients at all times, including when they slept. A policy was now in place to ensure that double rooms were only occupied by one person unless they had given their consent to sharing.

Are services well-led?

We do not currently rate standalone substance misuse services.

We were satisfied that the service had completed the improvements in the requirement notice, given in December 2016 because:

- The provider had sought external advice on completing audits of the service, updating policies, improve systems and processes as well as suggesting other action points to help ensure they provided a high quality service. This process was still continuing at the time of this inspection but was due to be completed by the end of June 2018. We saw evidence of these audits leading to action plans and those actions either being completed or scheduled for completion by the end of June 2018.

However:

- Clear systems for recording the completion of staff supervision or training were not in place. This meant that the manager might not know when staff needed to have supervision or update their training. The registered manager was in the process of updating staff files to ensure all staff had current disclosure and barring service (DBS) checks, as well as up to date training and supervision records. All staff records we saw had current DBS checks or applications had been made.

Substance misuse services

Safe	
Effective	
Caring	
Responsive	
Well-led	

Are substance misuse services safe?

Assessing and managing risks to patients and staff:

- Medicine management had improved since our last inspection. We saw medicine charts were filled in correctly and medication errors were logged in a timely manner. The provider had written a 'medicine management improvement plan' to audit medication errors on a daily, weekly and monthly basis. These audits highlighted trends to inform quality improvement.

Reporting incidents and learning from when things go wrong:

- Incidents were being recorded by staff involved. The registered manager reviewed individual incidents to find any actions or learning needed. Any actions and learning following incidents were disseminated to staff in team meetings. For example, on one occasion a deep fat fryer had accidentally been left on overnight. Following this incident the registered manager introduced a kitchen appliance check four times a day, and there was evidence of this being completed.

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

Skilled staff to deliver care

- The manager of the service was able to explain to us how someone new to working with the service would start as a volunteer, become part of a mentoring scheme before becoming part time and then full-time members of staff. This was to help them get a rounded induction to the service. However we did not see checklists being completed to record that all the necessary learning had taken place.

Are substance misuse services caring?

The involvement of clients in the care they receive

- At the last inspection in 2016 we said the provider must support the confidentiality of people using the service and not contravene the Data Protection Act 1998. During this inspection we saw that confidential information was not left unattended in public areas at this inspection.

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

The facilities promote recovery, comfort, dignity, and confidentiality

- At the last inspection in one shared bedroom we saw the ensuite shower had no wall, which meant clients had to agree not to be in the room whilst the other was taking a shower. The provider has now fitted a shower curtain around the shower to ensure patients' privacy and dignity.
- At the last inspection, we told the provider they needed to ensure the privacy of clients at all times, including when they slept. We saw that the provider had sought advice on setting up a permanent divider in their joint rooms, but this would not comply with health and safety laws. The provider had also considered a temporary divider, but received advice that that could present fire risks and a ligature risk. Instead, they had put in a policy to help ensure that double rooms were mostly single occupancy. Clients were made aware that they may be

Substance misuse services

asked to share a room but their consent would be sought before this happened. If clients consented to this, it would only come into place towards the end of their treatment at Westcliffe house.

Are substance misuse services well-led?

We do not currently rate standalone substance misuse services.

Good governance

- The provider had sought external advice on completing audits of the service, updating policies and suggesting action points to help ensure they provided a high quality service. This process was still continuing at the time of this inspection but was due to be completed by the end of June 2018. We saw evidence of these audits leading to action plans and those actions either being completed or scheduled for completion by the end of June 2018.
- Clear systems for recording staff attendance, completion of recruitment checks, supervision and completion of training were being implemented but were not yet fully in place. However, the registered manager was in the process of updating staff files to ensure all staff had current disclosure and barring service (DBS) checks, as well as up to date training. We saw that this work was underway, and in all of the staff files we reviewed the person had a completed DBS. We saw that staff's qualifications were on file and saw the new format that the provider would be using to track training rates. The provider showed us their action plan that detailed the work they had done to improve staff training compliance while the new paperwork was embedded. Supervision was provided for staff but these sessions were not always recorded.

Outstanding practice and areas for improvement

Areas for improvement

Action the provider **MUST** take to improve

- The provider must complete the implementation of systems, so they can be sure they are able to monitor staff attendance, appraisals, training and supervisions.

Action the provider **SHOULD** take to improve

- The provider should ensure the induction process is fully structured with a clear checklist of what staff should be learning with each stage of their induction.

This section is primarily information for the provider

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

Regulated activity	Regulation
Accommodation for persons who require treatment for substance misuse	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The provider must complete the implementation of systems, so they can be sure they are able to monitor staff attendance, appraisals, training and supervisions.</p> <p>Regulation 17 (2)(d)</p>