

Steps Together Rehab Limited

Bank House

Inspection report

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Sutton In Ashfield
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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

Ratings

Overall rating for this location

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive to people's needs?

Good 

Are services well-led?

Good 

Summary of findings

Overall summary

Bank House is a 17-bedded, mixed gender, residential substance misuse service providing detoxification and rehabilitation interventions.

Our rating of this location improved. We rated it as good because:

- The service provided safe care. The clinical premises where clients were seen were safe and clean.
- The service had enough staff, including nursing staff for safe detox.
- Staff assessed and managed risk well and followed good practice with respect to safeguarding. Staff now had access to alarms, and clients had access to call alarms in their rooms.
- Staff developed holistic, recovery-oriented care plans informed by a face to face comprehensive assessment. They provided a range of treatments suitable to the needs of the clients and in line with national guidance about best practice.
- Staff engaged in clinical audit to evaluate the quality of care they provided. Clinical audits now ensured care records were holistic and well ordered.
- The teams included or had access to the full range of specialists required to meet the needs of clients under their care. Managers ensured that these staff received training, supervision and appraisal. Staff worked well together as a multidisciplinary team and relevant services outside the organisation.
- Staff treated clients with compassion and kindness, and understood the individual needs of clients. They actively involved clients in decisions and care planning.
- The service was easy to access. Staff planned and managed discharge well.
- The service was well led, and the governance processes ensured that its procedures ran smoothly. This included the management of medical stationary which was an improvement since our previous inspection.

Summary of findings

Our judgements about each of the main services

Service	Rating	Summary of each main service
Substance misuse services	Good 	

Summary of findings

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Summary of this inspection

Background to Bank House

Bank House is a 17-bedded, mixed gender, residential substance misuse service providing medically managed detoxification and rehabilitation interventions based in Sutton in Ashfield. The service has a few rooms for people who are detoxing and the rest of the rooms are for post detox therapeutic support. The service offers an abstinence-based programme that includes a structured day, group based interventions, educational workshops, mutual aid (12 step and Self-Management and Recovery Training), and discharge and relapse prevention plans. Length of stay ranges from seven days to 12 weeks.

All clients at Bank House are self-funded and choose to receive treatment at Bank House. When we inspected, Bank House had 16 clients.

Bank House registered with CQC in August 2017. It is the only registered location under the provider Steps Together Rehab Limited. It provides the regulated activities:

- Accommodation for persons who require treatment for substance misuse
- Treatment of disease, disorder or injury

Bank House has a CQC registered manager in post at the time of this inspection.

This was the third inspection of Bank House. The previous inspection was in October 2018, this inspection identified areas of improvement required, and requirement notices were issued prompting action the provider must take to meet:

- Regulation 9 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Person-centered care
- Regulation 12 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014-Safe care and treatment
- Regulation 15 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Premises and equipment
- Regulation 17 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014-Good governance

The provider submitted action plans for the requirement notices.

During this inspection we found the provider had made improvements since the previous inspection and met all the previous requirement notices.

What people who use the service say

Clients were very positive about the care they received at Bank House. They praised the staff and the therapy program that they felt was better than places they had previously received care. Clients said the food was of very good quality and that the chef was brilliant and would cook to meet their dietary needs.

Clients said they felt heard at community meetings, and that their feedback was taken on board. They said that staff would make adaptations to meet their needs if they had any protected characteristics. Clients said that staff empowered them to make changes in their own lives without forcing them to participate.

Summary of this inspection

How we carried out this inspection

We were on site for one day. Our inspection team comprised of a CQC inspector, a specialist professional advisor and an expert by experience. An expert by experience is someone with lived experience of care services.

During the inspection we:

- Reviewed eight care records.
- Conducted an inspection of the environment, including the clinic rooms.
- Reviewed five staff files.
- Spoke with six staff including therapists, nursing staff and the manager.
- Spoke with seven clients.
- Reviewed a variety of policies and procedures.

You can find information about how we carry out our inspections on our website: <https://www.cqc.org.uk/what-we-do/how-we-do-our-job/what-we-do-inspection>.






Our findings

Overview of ratings

Our ratings for this location are:

	Safe	Effective	Caring	Responsive	Well-led	Overall
Substance misuse services	Good	Good	Good	Good	Good	Good
Overall	Good	Good	Good	Good	Good	Good

Substance misuse services

Safe	Good 
Effective	Good 
Caring	Good 
Responsive	Good 
Well-led	Good 

Are Substance misuse services safe?

Good 

Our rating of safe improved. We rated it as good.

Safe and clean environment

All premises where clients received care were safe, clean, well equipped, well furnished, well maintained and fit for purpose.

Staff completed and regularly updated thorough risk assessments of all areas and removed or reduced any risks they identified.

Clients were separated by gender on different floors to meet mixed sex guidance.

At our previous inspection, we told the provider they must install call alarms and provide alarms to staff. At this inspection, we saw that this had been completed. There were call alarms in client's rooms and staff had access to pendant alarms for lone working.

All clinic rooms had the necessary equipment for clients to have thorough physical examinations.

All areas were clean, well maintained, well-furnished and fit for purpose. Staff made sure cleaning records were up-to-date and the premises were clean. We reviewed the safety checks done in the kitchens and saw these had been completed appropriately.

Staff followed infection control guidelines, including handwashing.

Staff made sure equipment was well maintained, clean and in working order.

Safe staffing

The service had enough staff, who knew the clients and received basic training to keep them safe from avoidable harm.

Substance misuse services

Nursing staff

The service had enough nursing and support staff to keep clients safe. The service had no vacancies. The service had low rates of bank staff. Sickness levels were low. Managers made arrangements to cover staff sickness and absence. Managers supported staff who needed time off for ill health. Nursing staff were present 24/7 while a client was undergoing detox.

Managers limited their use of bank staff and requested staff familiar with the service. Managers made sure all bank staff had a full induction and understood the service before starting their shift.

The service did not use agency staffing.

The number and grade of staff matched the service's staffing plan.

Medical staff

The service had enough medical staff. There was a specialist interest GP that visited the service, as well as a psychiatrist employed by the service.

The service could get support from a psychiatrist quickly when they needed to, including out of hours.

Mandatory training

The service had recently changed over training providers and all staff had either completed (77% of staff) or were due to complete their mandatory training shortly after this inspection.

The mandatory training programme was comprehensive and met the needs of clients and staff.

Managers monitored mandatory training and alerted staff when they needed to update their training.

Assessing and managing risk to clients and staff

Staff assessed and managed risks to clients and themselves well. They responded promptly to sudden deterioration in clients' physical and mental health. Staff made clients aware of harm minimisation and the risks of continued substance misuse. Safety planning was an integral part of recovery plans.

Assessment of client risk

We reviewed eight care records and saw staff completed risk assessments for each client on admission, and reviewed this regularly, including after any incident. This included assessing risks of blood borne viruses. We saw that staff were using appropriate risk assessment tools, such as the Clinical Institute Withdrawal Assessment for Alcohol (CIWA) to assess alcohol and substance withdrawal symptoms. These scales were used as suggested by the prescriber for the client's detox. This was an improvement since the previous inspection. These assessments were completed face to face.

Staff could recognise when to develop and use crisis plans and advanced decisions according to client need. Staff gave harm reduction advice when clients decided to leave treatment early.

Management of client risk

Staff responded promptly to any sudden deterioration in a client's health. Staff would call 999 in an emergency.

Staff followed clear personal safety protocols, including for lone working. This included using pendant alarms when working alone with clients.

Substance misuse services

Safeguarding

Staff understood how to protect clients from abuse and the service worked well with other agencies to do so. Staff had training on how to recognise and report abuse, and they knew how to apply it.

Staff received training on how to recognise and report abuse, appropriate for their role. Seventy-five per cent of staff were up to date with their training at the time of this inspection, all staff were due to be up to date by the end of May 2022.

Staff could give examples of how to protect clients from harassment and discrimination, including those with protected characteristics under the Equality Act.

Staff knew how to recognise adults and children at risk of or suffering harm and worked with other agencies to protect them

Staff knew how to make a safeguarding referral and who to inform if they had concerns.

Staff access to essential information

Staff kept detailed records of clients' care and treatment. Records were clear, up-to-date and easily available to all staff providing care.

Client notes were comprehensive, and all staff could access them easily. At the previous inspection we found that care records were not organised, and it was difficult for staff to access information they needed. At this inspection, we saw that the eight care records we reviewed were organised and complete.

Records were stored securely.

Medicines management

The service used systems and processes to safely prescribe, administer, record and store medicines. Staff regularly reviewed the effects of medications on each client's mental and physical health.

Staff followed systems and processes to prescribe and administer medicines safely.

Staff reviewed each client's medicines regularly and provided advice to clients and carers about their medicines.

Staff completed medicines records accurately and kept them up-to-date. Staff stored and managed all medicines and prescribing documents safely. At our previous inspection we saw that medical stationary was not always stored correctly. At this inspection, we saw that it was.

Staff followed national practice to check clients had the correct medicines when they were admitted, or they moved between services.

Staff learned from safety alerts and incidents to improve practice.

The service ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff reviewed the effects of each client's medicines on their physical health according to the National Institute for Health and Care Excellence (NICE) guidance.

Substance misuse services

Track record on safety

The service had a good track record on safety.

Reporting incidents and learning from when things go wrong

The service managed client safety incidents well. Staff recognised incidents and reported them appropriately. Managers investigated incidents and shared lessons learned with the whole team and the wider service. When things went wrong, staff apologised and gave clients honest information and suitable support.

Staff knew what incidents to report and how to report them. At our previous inspection we saw that staff did not always report incidents. At this inspection, we saw that staff reported incidents appropriately. We reviewed eight care records and saw that where incidents had occurred these had been reported appropriately.

Staff raised concerns and reported incidents and near misses in line with the service's policy. Staff reported serious incidents clearly and in line with the service's policy. The service had no never events.

Staff understood the duty of candour. They were open and transparent and gave clients and families a full explanation if and when things went wrong.

Managers debriefed and supported staff after any serious incident

Managers investigated incidents thoroughly. Staff received feedback from investigation of incidents, both internal and external to the service.

Staff met to discuss the feedback and look at improvements to client care.

Are Substance misuse services effective?

Good 

Our rating of effective improved. We rated it as good.

Assessment of needs and planning of care

Staff completed face to face comprehensive assessments with clients on accessing the service. They worked with clients to develop individual care plans and updated them as needed. Care plans reflected the assessed needs, were personalised, holistic and recovery-oriented.

Staff completed a comprehensive mental health assessment of each client. Staff made sure that clients had a full physical health assessment and knew about any physical health problems.

Staff developed a comprehensive care plan for each client that met their mental and physical health needs.

Staff regularly reviewed and updated care plans when clients' needs changed.

Substance misuse services

Care plans were personalised, holistic and recovery-orientated. At the previous inspection, we saw that care plans did not cover all areas of a client's health. However, at this inspection we saw that the provider had changed the care planning process to make it more holistic and personalised for the client. We reviewed eight care plans and saw that they reflected the client's needs holistically.

Best practice in treatment and care

Staff provided a range of care and treatment interventions suitable for the client group and consistent with national guidance on best practice. They ensured that clients had good access to physical healthcare and supported clients to live healthier lives.

Staff provided a range of care and treatment suitable for the clients in the service. Staff delivered care in line with best practice and national guidance, from relevant bodies such as NICE.

Staff made sure clients had support for their physical health needs, either from their GP or community services. A GP with special interests in substance misuse visited the service weekly. Clients undergoing detox had regular health checks as appropriate. The service did not use rapid detoxification schedules.

Staff supported clients to live healthier lives by supporting them to take part in programmes or giving advice on healthy eating.

Staff used recognised rating scales to assess and record severity and outcomes. They also participated in clinical audit, benchmarking and quality improvement initiatives.

Managers used results from audits to make improvements. For example, audits of care records had led to developing more detailed audit tools for the therapy records.

Skilled staff to deliver care

The teams included or had access to the full range of specialists required to meet the needs of clients under their care. Managers made sure that staff had the range of skills needed to provide high quality care. They supported staff with appraisals, supervision and opportunities to update and further develop their skills. Managers provided an induction programme for new staff.

The service had access to a full range of specialists to meet the needs of each client. This included therapy staff as well as nursing, medical and support staff.

Managers made sure staff had the right skills, qualifications and experience to meet the needs of the clients in their care, including bank staff.

Managers gave each new member of staff a full induction to the service before they started work.

Managers supported staff through regular, constructive appraisals of their work. We saw this in the five staff records we reviewed. All had an appraisal.

Managers made sure staff attended regular team meetings and gave information to those who could not attend. We reviewed the last three months meeting notes and saw that audits were discussed and staff acted on the outcomes.

Substance misuse services

Managers identified any training needs their staff had and gave them the time and opportunity to develop their skills and knowledge.

Managers recognised poor performance, could identify the reasons and dealt with these.

The service had no current volunteers. However, they previously had helped previous service users to begin careers in addiction support and we spoke with staff who had been previous service users.

Multidisciplinary and interagency team work

Staff from different disciplines worked together as a team to benefit clients. They supported each other to make sure clients had no gaps in their care. The team had effective working relationships with other relevant services outside the organisation.

Staff held regular multidisciplinary meetings to discuss clients and improve their care.

Staff made sure they shared clear information about clients and any changes in their care, including during transfer of care. Staff had effective working relationships with external teams and organisations.

Good practice in applying the Mental Capacity Act

Staff supported clients to make decisions on their care for themselves. They understood the service's policy on the Mental Capacity Act 2015 and knew what to do if a client's capacity to make decisions about their care might be impaired.

Staff received and kept up-to-date with training in the Mental Capacity Act and had a good understanding of at least the five principles. At the time of this inspection 68.7% of staff were up to date with this training. However, all staff were due to complete this by the end of May 2022.

There was a clear policy on the Mental Capacity Act, which staff could describe and knew how to access.

Staff knew where to get accurate advice on Mental Capacity Act.

Staff gave clients all possible support to make specific decisions for themselves before deciding a client did not have the capacity to do so.

Staff assessed and recorded capacity to consent clearly each time a client needed to make an important decision.

Are Substance misuse services caring?

Our rating of caring stayed the same. We rated it as good.

Kindness, privacy, dignity, respect, compassion and support

Staff treated clients with compassion and kindness. They understood the individual needs of clients and supported clients to understand and manage their care and treatment.

Substance misuse services

Staff were discreet, respectful, and responsive when caring for clients. Staff gave clients help, emotional support and advice when they needed it. Staff supported clients to understand and manage their own care treatment or condition.

Staff directed clients to other services and supported them to access those services if they needed help.

Clients said staff treated them well and behaved kindly. Staff understood and respected the individual needs of each client.

Staff felt that they could raise concerns about disrespectful, discriminatory or abusive behaviour or attitudes towards clients and staff.

Staff followed policy to keep client information confidential.

Involvement in care

Staff involved clients in care planning and risk assessment and actively sought their feedback on the quality of care provided. They ensured that clients had easy access to additional support.

Involvement of clients

Staff involved clients and gave them access to their care plans.

Staff made sure clients understood their care and treatment and found ways to communicate with clients who had communication difficulties. This included obtaining translators or sign language interpreters where needed.

Staff involved clients in decisions about the service, when appropriate.

Clients could give feedback on the service and their treatment and staff supported them to do this. They sought feedback through an online survey service and had chance to feedback through weekly community meetings. The results of the online survey were very positive.

Staff informed and involved families and carers appropriately.

Involvement of families and carers

Staff informed and involved families and carers appropriately. They sought consent from clients to speak with their families and carers.

Staff helped families to give feedback on the service. We reviewed the latest feedback and saw that it was extremely positive about the service.

Staff gave carers information on how to find the carer's assessment.

Are Substance misuse services responsive?

Our rating of responsive stayed the same. We rated it as good.

Substance misuse services

Access and waiting times

The service was easy to access. Staff planned and managed discharge well. The service had alternative care pathways and referral systems for people whose needs it could not meet.

The service had clear criteria to describe which clients they would offer services to and offered clients a place on waiting lists. The service had no people waiting at the time of this inspection.

Staff supported clients when they were referred, transferred between services, or needed physical health care.

The facilities promote comfort, dignity and privacy

The design, layout, and furnishings of treatment rooms supported clients' treatment, privacy and dignity.

The service had a full range of rooms and equipment to support treatment and care.

Interview rooms in the service had sound proofing to protect privacy and confidentiality.

Meeting the needs of all people who use the service

The service met the needs of all clients, including those with a protected characteristic or with communication support needs.

The service could support and make adjustments for people with disabilities, communication needs or other specific needs. Managers made sure staff and clients could get hold of interpreters or signers when needed. We saw that they had sourced this to meet clients' needs.

Staff made sure clients could access information on treatment, local services, their rights and how to complain.

The service provided information in a variety of accessible formats so the clients could understand more easily. The service had information leaflets available in languages spoken by the clients and local community.

Listening to and learning from concerns and complaints

The service treated concerns and complaints seriously, investigated them and learned lessons from the results, and shared these with the whole team and wider service. The service had received no complaints in the six months before this inspection.

Clients, relatives and carers knew how to complain or raise concerns.

Staff understood the policy on complaints and knew how to handle them.

Staff knew how to acknowledge complaints and clients received feedback from managers after the investigation into their complaint.

Managers investigated complaints and identified themes.

Staff protected clients who raised concerns or complaints from discrimination and harassment.

Clients received feedback from managers after the investigation into their complaint.

Substance misuse services

Managers shared feedback from complaints with staff and learning was used to improve the service.

The service used compliments to learn, celebrate success and improve the quality of care.

Are Substance misuse services well-led?

Good 

Our rating of well-led improved. We rated it as good.

Leadership

Leaders had the skills, knowledge and experience to perform their roles, had a good understanding of the services they managed, and were visible in the service and approachable for clients and staff.

Leadership development opportunities were available, the manager had completed a leadership course supported by the service.

Senior leadership was visible and involved in the development and delivery of the service. Staff told us that senior leaders often visited the unit.

Vision and strategy

Staff knew and understood the service's vision and values and how they were applied to the work of their team. The organisations values were safe, tenacious, enduring, professionally responsive, and stronger together.

Culture

Staff felt respected, supported and valued. They reported that the service promoted equality and diversity in its day-to-day work and in providing opportunities for career progression. They felt able to raise concerns without fear of retribution.

All staff we spoke with said that there was a good team culture of mutual support and team working. They felt positive about working for the service. All staff we spoke with were aware of the whistleblowing process and we saw that this was displayed in the staff office.

Staff appraisals covered the development goals of staff and how they could be supported.

Governance

Our findings from the other key questions demonstrated that governance processes operated effectively at ward level and that performance and risk were managed well.

There was a clear framework of what must be discussed in team meetings to ensure that essential information, such as learning from incidents and complaints, was shared and discussed. We reviewed meeting minute notes and saw that lessons from incidents were discussed and noted.

Substance misuse services

Staff undertook or participated in local clinical audits. For example, auditing care records. The audits were enough to provide assurance and staff acted on the results when needed. This was an improvement since our last inspection where audits of care records had not been sufficient to ensure they were holistic and completed appropriately. The provider had acted on our requirement notices and made improvements to meet them since our previous inspection.

Management of risk, issues and performance

Teams had access to the information they needed to provide safe and effective care and used that information to good effect.

The service had plans for emergencies – for example, adverse weather or a flu outbreak. We saw that the service had appropriate plans in place should there be an outbreak of COVID-19. This included appropriate cleaning schedules and use of personal protective equipment (PPE).

Information management

Staff collected analysed data about outcomes and performance.

Staff had access to the equipment and information technology needed to do their work. The information technology infrastructure, including the telephone system, worked well and helped to improve the quality of care.

Information governance systems included confidentiality of patient records and referenced the General Data Protection Regulation (GDPR).

Team managers had access to information to support them with their management role. This included information on the performance of the service, staffing and patient care.

Staff made notifications to external bodies as needed. This included statutory notifications to the Care Quality Commission.