

Swanswell Worcester

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

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.

Summary of findings

Our judgements about each of the main services

Service	Rating	Summary of each main service
Substance misuse services		We do not rate substance misuse services

Summary of findings

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Swanswell Charitable Trust Worcester

Services we looked at

Substance misuse services

Summary of this inspection

Our inspection team

The team that inspected the service comprised Inspector Julie Bains (inspection lead), an inspector and an assistant inspector.

Why we carried out this inspection

When the service was inspected on the 8th September 2016 there was a breach of the Health and Social Care Act 2008 (Regulated Activities) regulations 2014. The breach was Regulation 12: Safe care and treatment. We found risk assessments and risk management plans were not

consistently completed and did not address the risks identified, plans were not in place for clients if they disengaged with treatment and staff had not completed and recorded identified mandatory training.

This inspection was to check if Swanswell had undertaken the actions to address the identified breaches to become compliant.

How we carried out this inspection

Before the inspection we reviewed information we held about the location including provider engagement minutes, policies and provider action plans produced to address the breach of the regulation. Since the September 2016 inspection CQC has met with the service manager monthly.

During the inspection visit, the inspection team:

- looked at 12 care and treatment records, including risk assessments and care plans for clients.
- spoke with 11 members of staff employed by the service, including substance misuse workers, young person substance misuse workers, recovery workers, team leader and non-medical prescriber.

Information about Swanswell Worcester

Swanswell Charitable Trust is a specialist treatment provider for substance misuse. They have six individual contracts in England registered with the CQC. Swanswell Worcester provides one such individual contract. The service is part of the overall contract commissioned and funded by the local authority for Public Health England and the Police and Crime Commissioner to provide drug and alcohol services for the whole of Worcestershire.

Swanswell Worcester shares a registered manager with the three other Swanswell services in Worcestershire. Swanswell senior managers are responsible for the delivery of services in fixed bases and countywide.

Specialist roles delivered in a range of settings by family workers, nurses, young person workers, peer mentor and volunteer co-ordinator, non-medical prescriber, doctors, criminal justice workers and an assertive outreach team.

Swanswell Worcester provides community based substance misuse services to young people and adults who have drug and alcohol related problems. They provide group work and one to one interventions, substitute prescribing for opiate dependence, community detoxification from opiates and alcohol, needle exchange programme, harm reduction information, blood borne virus testing and administer hepatitis B immunisations, issue the emergency opioid overdose medication kits. A family service provides support to individuals who have

Summary of this inspection

been affected by others drug and alcohol use. Staff delivered training and learning events for other organisations working with clients who have substance misuse issues.

Swanswell Worcester service has disabled access, is close to the city centre, and easily accessed by public transport and public car parking is within a two minutes' walk. Swanswell Worcester offers a service from 9am – 5pm Monday to Friday, with extended opening hours every Tuesday until 7pm. They offer a satellite service for clients living in Droitwich and surrounding areas. This service is open every Wednesday between 9am – 7pm.

The service recruits ex-clients to become peer mentors to promote recovery to clients by offering support at drop-in

sessions, a welcome in the reception area and to facilitate mutual aid groups. The service has a number of volunteers, from a wide range of backgrounds, who undertake tasks including helping with administration and supporting clients to attend appointments.

The service was previously inspected on the 8th September 2016 and is registered with the Care Quality Commission to provide:

1. Diagnostic and screening procedures
2. Treatment of disease, disorder or injury

This was a responsive inspection.

Summary of this inspection

The five questions we ask about services and what we found

We always ask the following five questions of services.

Are services safe?

On the inspection on the 9th May 2017 we found Swanswell Worcester had met the requirement notice;

Regulation 12: Safe care and treatment.

Further detail is provided below.

Substance misuse services

Safe

Summary of findings

On the inspection on the 9th May 2017 we found Swanswell Worcester had met its requirement notice;

Regulation 12: Safe care and treatment

Are substance misuse services safe?

Safe staffing

- On the inspection in September 2016 we found staff had not completed and recorded identified mandatory training. On this inspection we found the provider had introduced a rolling programme of mandatory training for staff to attend and developed an electronic system to identify individual training needs, the system also recorded when the training has been completed. The team leaders reviewed training compliance with staff in supervision. The 11 staff interviewed confirmed they attended the mandatory training and the data produced by the provider confirmed mandatory training was being completed and recorded.

Assessing and managing risk to clients and staff

- On the inspection in September 2016 we found risk assessments and risk management plans were not consistently completed and did not address the risks identified. On this inspection we found the provider had undertaken a service wide audit of risk assessments and management plans and produced an action plan, which included providing mandatory training on assessing and monitoring risk for all relevant staff, updating the risk assessment paperwork and monitoring the quality of risk assessment and plans during supervision. We reviewed 12 care records during this inspection, which showed the risk assessments and management plans had been updated with new risk information in a timely manner.
- On the inspection in September 2016 we found plans were not in place for clients who disengage with treatment. On this inspection we found the provider had reviewed and updated the re-engagement policy, updated staff during team meetings, via email and the organisational update. We saw evidence in the care records of staff trying to re-engage clients including the documenting of telephone calls, copies of letters and contact with other agencies.