

# Lifeline Newcastle (Harm Reduction Service)

## 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.

### Overall summary

We carried out this focused inspection of Lifeline Newcastle (Harm Reduction Service) to review remedial actions taken by the provider in relation to a regulatory breach. The inspection was unannounced.

When we inspected the service in December 2016, we found the provider was in breach of Regulation 12 (Safe Care and Treatment), Health and Social Care Act (Regulated Activities) Regulations 2014. This regulation was not being met, as we found that:

- The provider had commissioned a fire risk assessment. This risk assessment identified a

number of actions that were required to reduce the risks to clients and staff in the event of a fire. At the time of inspection, the service had not addressed all of the recommended actions in the report.

During this focused inspection, we reviewed the actions taken by the provider to address the issues raised in the previous inspection in December 2016. We were assured these changes had been made prior to the termination of the service.

At this inspection, we found that:

# Summary of findings

- The provider had addressed the issues in relation to the breach of Regulation 12 (Safe Care and Treatment), Health and Social Care Act (Regulated Activities) Regulations 2014, identified during the previous inspection in December 2016.

# Summary of findings

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### Summary of this inspection

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# Summary of this inspection

## Background to Lifeline Newcastle (Harm Reduction Service)

Lifeline Newcastle (Harm Reduction Service) is commissioned by Newcastle-upon-Tyne City Council, Safer Newcastle Partnership to minimise the risks associated with using harmful substances.

This is an open access service, which assists people to deal with physical health needs related to their substance use. People who use the service can access information, regarding a range of injecting and other harm reduction equipment. The service offers brief interventions where people have the opportunity to speak with staff about the impact of their drug use.

The service carries out blood borne virus screening and employs a nurse who assists people with physical health needs related to their substance use. Lifeline Newcastle (Harm Reduction Service) is registered with the CQC to carry out the following regulated activities:

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

The service has a CQC registered manager. A registered manager is the person appointed by the provider to

manage the regulated activity on their behalf, where the provider is not going to be in day-to-day charge of the regulated activities themselves. As a registered person, the registered manager has legal responsibilities in relation to that position.

CQC had inspected Lifeline Newcastle (Harm Reduction Service) in September 2012 and September 2013 using the previous inspection methodology. On both of these occasions, the service was found to be meeting all the required standards inspected.

This location was inspected on in December 2016 using the new Care Quality Commission inspection methodology. At this inspection, the provider was found to be in breach of Regulation 12 (Safe Care and Treatment), Health and Social Care Act (Regulated Activities) Regulations 2014. Lifeline has now gone into administration and at the time of inspection another provider who has taken over Lifeline Newcastle (Harm Reduction Service) was running the service. The change of provider took place on 1 June 2017.

## Our inspection team

The team that inspected the service comprised of the lead CQC inspector Brian Cranna and an assistant inspector.

We arranged our inspection to take place on the same day as a fire safety visit by the local fire and rescue service.

## Why we carried out this inspection

We inspected this service to review what action the provider had taken in relation to the breach of Regulation 12 (Safe Care and Treatment), Health and Social Care Act (Regulated Activities) Regulations 2014, identified during the previous inspection in December 2016.

# Summary of this inspection

## How we carried out this inspection

The focus of the inspection was to establish what actions the provider had taken to address and resolve the regulatory breach from the comprehensive inspection in December 2016. The inspection was unannounced.

During the inspection visit, the inspection team:

- Spoke with the team leader, specifically in relation to the fire risk assessment and actions that have been carried out.
- Spoke with the fire safety officer from the local fire and rescue service, specifically in relation to the fire risk assessment and actions that have been carried out.
- Took a tour of the premises.

## What people who use the service say

We did not seek the views of service users during this inspection due to its focus.

# 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?

The provider had addressed the issues in relation to the breach of Regulation 12 (Safe Care and Treatment), Health and Social Care Act (Regulated Activities) Regulations 2014, identified during the previous inspection in December 2016. We were assured that the changes identified as priorities had been made prior to the termination of the service:

- Fire risk improvements had been made throughout the building.
- Fire risk assessment was up to date.
- The local fire and rescue service were satisfied that the service had addressed fire safety issues in the building.
- The premises were clean, well maintained and accessible to patients.

### Are services effective?

Since the last comprehensive inspection in December 2016, we received no information that would cause us to re-inspect this key question.

### Are services caring?

Since the last comprehensive inspection in December 2016, we received no information that would cause us to re-inspect this key question.

### Are services responsive?

Since the last comprehensive inspection in December 2016, we received no information that would cause us to re-inspect this key question.

### Are services well-led?

Since the last comprehensive inspection in December 2016, we received no information that would cause us to re-inspect this key question.

# Substance misuse services

Safe	
Effective	
Caring	
Responsive	
Well-led	

## Are substance misuse services safe?

### Safe and clean environment

The last comprehensive inspection of the service in December 2016 found that the service had commissioned a fire risk assessment in February 2016. The risk assessment made a number of recommendations in relation to fire safety in the building including the installation of appropriate fire doors. The service had not taken action to address all the recommendations in the report to reduce the risks to clients and staff in the event of a fire.

On our return to the service we found that they had carried out all outstanding recommended actions in the fire risk assessment. We were shown round the premises by the service manager who pointed out the fire risk improvements. The improvements included the replacement of doors and additional smoke detectors, emergency lighting and fire proof foam around wiring and electrics, fitted throughout all three floors and stairwells. The manager told us they were confident they had addressed all required actions in their fire risk assessment.

As part of the inspection we also spoke to the fire safety officer from the local fire and rescue service. The fire safety officer was on the premises and had completed a fire safety audit. They confirmed that the work completed is compliant with their expectations and all policies are up to date.

The service was located over three floors of a building in Newcastle upon Tyne city centre. Access from the discreet entrance was via an intercom leading to a staircase to the main reception area on the first floor. The environment overall appeared clean, well maintained and accessible to patients. A member of staff met patients who were unable to use the stairs, downstairs. We witnessed this happen on

two occasions while we were on-site. If service users preferred they could be seen at another location nearby. We observed five clients attending the service in the main reception area and saw staff were caring and had supportive conversations with clients. The two staff on duty appeared to have good relationships with the clients.

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

Since the last comprehensive inspection in December 2016, we received no information that would cause us to re-inspect this key question.

## Are substance misuse services caring?

Since the last comprehensive inspection in December 2016, we received no information that would cause us to re-inspect this key question.

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

Since the last comprehensive inspection in December 2016, we received no information that would cause us to re-inspect this key question.

## Are substance misuse services well-led?

Since the last comprehensive inspection in December 2016, we received no information that would cause us to re-inspect this key question.