Ark House

Quality Report

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Date of inspection visit: 28.11.17
Date of publication: 12/01/2018

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 that each client had a current risk assessment and these were reviewed each week or when an incident occurred.
- Staff were aware of the risk assessments and told us they had a better understanding of the clients they were supporting.

Summary of findings

Our judgements about each of the main services

Service	Rating	Summary of each main service
Substance misuse services		We found the following • All clients had a risk assessment that identified the nature of the risk and included a safety plan relating to how staff and the clients would manage identified risks. • Staff discussed any risks at handover but also reviewed risk assessments as a team for all clients each Wednesday or following an incident. • We saw that the service had improved their record keeping to include more detail and had implemented a weekly review of risk. Staff told us they felt they were more involved in supporting the clients and they felt they were more cohesive as a team.

Summary of findings

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Background to Ark House

Ark House is a residential service provided by Ark House Rehab Limited. The service provides treatment to rehabilitate people with drug or alcohol dependency. It is registered with the Care Quality Commission to provide accommodation for persons who require treatment for substance misuse. Ark House has a registered manager and a nominated individual.

The service is located in a large house in a residential area of Scarborough. It is close to all amenities and public transport. The service is able to take up to 20 people at any time and has staff on duty 24 hours. At the time of our inspection, there were seventeen clients. All clients have to be free of any substance use before admission, so they often arrive at the service following a detoxification programme. Ark House does not offer clinical or prescription medicine treatments. It delivers psychosocial interventions and provides a therapeutic environment for recovery.

Ark House has been operating for more than 20 years. Clients take part in a therapeutic programme based on the 12-step principles of Alcoholics Anonymous. Staff deliver treatment for people whose main addiction is to alcohol or drugs. However, due to the model used, staff also considered secondary addictive behaviours, for example, eating disorders or gambling. The 12-step approach works sequentially as a process to guide a person through the journey of recovery to a new way of life. The programme addresses the physical, mental, emotional and spiritual aspects of recovery. The principles behind this approach give a person a starting point for a lifelong process. All aspects of Ark House follow the ethos of the 12-step approach.

Ark House clients fall into one of four categories:

1. Assessment – people waiting for assessment for suitability and preparation for admission.

2. Primary – clients admitted and at steps one to nine of the programme.

3. Secondary – clients who have moved into step 10 of the programme, concentrating on daily maintenance.

4. Aftercare – ongoing support to clients who have left Ark House.

- Following our comprehensive inspection in November 2015 and follow up inspection in September 2016, we found areas of good practice for effective, caring, responsive and well led. Since these inspections, we have received no information that would cause us to re-inspect these key questions.
- During our focussed inspection on 15 March 2017, we found that the service had addressed most of the issues needed to improve safe following the November 2015 and September 2016 inspections. Ark House was now meeting Regulations 13, 15 and 17 of the Health and Social Care Act (Regulated Activities) Regulations 2014.

During this inspection carried out in November 2017 we found the service had addressed the need to improve their records relating to identified risks and could give assurances that all staff knew how to manage or minimise individual client risks. Ark House was now meeting Regulation 12 of the Health and Social Care Act (Regulated Activities) Regulations 2014 in respect of risk management.

Our inspection team

The team that inspected the service comprised CQC inspector Pauline O'Rourke (inspection lead), one other CQC inspector, and a specialist professional advisor who had a background in substance misuse services.

Summary of this inspection

Why we carried out this inspection

We undertook this focused, unannounced inspection to find out whether Ark House had made improvements to their service since our last focused inspection in September 2016.

Following the November 2015 inspection and follow up in September 2016, we told the provider it must make the following action to improve their service:

- The provider must ensure all clients have a comprehensive risk assessment in place with a risk management plan that staff review and update as necessary.

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. This information suggested that the findings for effective, caring, responsive and well led following the November 2015 inspection, were still valid. Therefore, during this inspection, we focused on those concerns, which led us to issue the service with requirement notices for safe.

During the inspection visit, the inspection team:

- spoke with five clients
- spoke with the registered manager
- spoke with two other staff members employed by the service provider,
- looked at seven care and treatment records,

What people who use the service say

We spoke with five clients about their experience of the service. They spoke positively about the service and described staff as supportive. Clients told us they felt safe at Ark House and personally involved and responsible for their recovery. They told us that staff genuinely cared about them and were available for support throughout the day and if needed at night.

Clients said they kept to a daily routine and had to contribute to the domestic chores, as this was their home during their stay. Clients told us they were personally responsible for keeping their rooms clean and had dedicated time to do their laundry, which included bedding. Two clients commented that this was what reality felt like.Clients told us they did not expect to like being at Ark House but were surprised by the care and support they had received from staff and from their peers.

Clients also told us they did not like the idea of sharing a room but the experience had been positive as they had been able to provide support and had benefitted from support from their roommate.

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?

In November 2015, staff did not manage risk effectively. When we visited in March 2017, records showed all clients had a risk assessment. Staff still communicated risks verbally and recorded very limited detail in handover notes. This meant there was no assurance that all staff knew how to manage or minimise individual client risks.

At this inspection, we found that risk was recorded for each client and that risks were discussed at least once a week. Following any incidents risk was also assessed and discussed. This meant that all staff were informed about client risk and we were assured they knew how to minimise or manage risk.

Substance misuse services

Safe	
Effective	
Caring	
Responsive	
Well-led	

Are substance misuse services safe?

Safe and clean environment

We will assess this at the next comprehensive inspection.

Safe staffing

We will assess this at the next comprehensive inspection.

Assessing and managing risk to clients and staff

In November 2015, staff did not manage risk effectively. Not all clients had risk assessments or risk management plans. Staff communicated risks verbally and recorded very limited detail in handover notes. When we visited in March 2017, records showed all clients had a risk assessment. Staff still communicated risks verbally and recorded very limited detail in handover notes. This meant there was no assurance that all staff knew how to manage or minimise individual client risks.

At this inspection, we found that each client had a detailed risk assessment. This included the nature of the risk and a safety plan or actions for staff to follow if a client's behaviour became risky. The risk assessments were kept in a separate file and staff spoken with knew where they were.

Staff assessed patients on their arrival to the service. The assessment included a risk assessment tool that prompted staff to consider risks including self-harm, overdose, violence, criminal history, conflict, parental responsibilities, housing and domestic violence. We looked at all the risk assessments and the records for seven clients. All risk assessment identified the nature of the risk and included a safety plan relating to how they would manage identified risks. Assessments reviewed showed some clients had risks. These included previous injecting behaviours, depression, self-harm, debts domestic abuse and children's safeguarding. Each risk had a plan detailing how staff would manage or minimise these risks.

The manager told us they highlighted any risks at handover but also reviewed risk assessments as a team for all clients each Wednesday or following an incident. The information at handover was recorded for each individual client as well as being discussed. The daily meetings, attended by all staff, occurred twice a day and lasted between 30 to 40 minutes. We looked at the handover records from 1 October 2017 to our inspection date of 28 November 2017. The entries contained enough detail to inform staff of how clients had been in the previous shift and if there were any noted concerns.

Clients told us that staff addressed their risks whilst at Ark House and staff were confident that the service identified and managed risks effectively. For example, they described interventions, in relation to domestic abuse, and safeguarding describing what actions staff needed to take in the event of an incident. The manager informed us that they had increased their record keeping to include more detail and had implemented a weekly review of risk. Staff told us they felt they were more involved in supporting the clients and they felt they were more cohesive as a team.

Staff planned for unexpected treatment exits. This included informing the referring body and the client's funder. They would also contact any other individuals or organisations if the client had agreed to this in advance.

On admission, staff searched clients' bags in their presence to ensure they brought in no banned items, such as alcohol and drugs, that might compromise their own, or other client's safety and recovery. Staff carried out random searches for clients returning from outside excursions where they had suspicions or concerns. Clients agreed to these searches in the rules prior to their admission.

Track record on safety

We will assess this at the next comprehensive inspection.

Substance misuse services

Reporting incidents and learning from when things go wrong

We will assess this at the next comprehensive inspection.

Duty of candour

We will assess this at the next comprehensive inspection.

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

At the last comprehensive inspection in November 2015, we found areas of good practice. Since that inspection, we have received no information that would cause us to re-inspect this key question.

Are substance misuse services caring?

At the last comprehensive inspection in November 2015, we found areas of good practice. Since that inspection, we have 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?)

At the last comprehensive inspection in November 2015, we found areas of good practice. Since that inspection, we have received no information that would cause us to re-inspect this key question.

Are substance misuse services well-led?

At the last comprehensive inspection in November 2015, we found areas of good practice. Since that inspection, we have received no information that would cause us to re-inspect this key question.