

Review of compliance

<p>Hebron Trust Hebron House</p>	
<p>Region:</p>	<p>East</p>
<p>Location address:</p>	<p>10-12 Stanley Avenue Norwich Norfolk NR7 0BE</p>
<p>Type of service:</p>	<p>Residential substance misuse treatment and/or rehabilitation service Care home service without nursing</p>
<p>Date of Publication:</p>	<p>January 2012</p>
<p>Overview of the service:</p>	<p>Hebron House is owned and operated by Hebron Trust. It is the only home they run and is registered to provide the regulated activity of 'accommodation for persons who require treatment for substance misuse.'</p> <p>It provides accommodation and treatment for up to 10 women with a</p>

	drug and /or alcohol dependency.
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Hebron House was meeting all the essential standards of quality and safety.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

People told us they were very satisfied with the support and treatment they receive at this home. One person told us it had "Been brilliant." They spoke about mutual trust between themselves and staff. People using the service told us they felt listened to and were confident that their views were taken seriously.

When speaking about their treatment regimes, people spoke about the house rules that exist to support their rehabilitation. One person said that it was "Amazing what they've achieved with me." They told us about how the many sessions they were required to attend help them to prepare to return to the local community. People were positive about their futures and the role the service had played in their improvement and return to healthy living.

What we found about the standards we reviewed and how well Hebron House was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

The service is compliant with this outcome. People understand the treatment and support they receive at the service. Staff ensure that people are respected and treated in a dignified way.

Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights

The service is compliant with this outcome. People receive appropriate care and treatment that meets their specific needs. Treatment and support is planned and agreed with the person.

Outcome 07: People should be protected from abuse and staff should respect their human rights

The service is compliant with this outcome. People are protected from the risk of abuse by well trained staff. Robust processes are in place to look after people's money and valuables.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

The service is compliant with this outcome. People are supported by staff who are well trained and competent. Staff are supported by supervision arrangements in place.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

The service is compliant with this outcome. The service monitors the quality of the support and treatment provided. Systems are in place to manage risk.

Other information

Please see previous reports for more information about previous reviews.

**What we found
for each essential standard of quality
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- * Understand the care, treatment and support choices available to them.
- * Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- * Have their privacy, dignity and independence respected.
- * Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

People using the service told us that the experience had "Been brilliant." One person said that it was "Amazing what they've achieved with me." They said they felt they were listened to and their views and opinions were constantly sought about their treatment and how it was progressing.

One person spoke about the house rules that provided structure to their stay. They told us how they had resented the house rules at first, but that they now understood why they were there for the sake of their treatment.

People were fully engaged with their treatment regime and because of this worked closely with the staff. One person told us about her plans to do charity work over Christmas with support from staff at the service. People said the staff were supportive and always available to talk to.

Other evidence

We looked at two care plans and could see that the involvement of the service user was central to the success of their treatment. People using the service were required to be fully engaged with the process from the start and rigorous interviews took place before

the placement was agreed. After admission to the service, people were involved in the arrangement of counselling and educational sessions as part of their treatment regime.

We spoke with staff about how they ensured that people using the service were treated with respect and dignity during their stay. Staff told us they always respected what people said and they spoke about valuing the individual and being sensitive to the fact that they were very vulnerable when first arriving at the home.

Our judgement

The service is compliant with this outcome. People understand the treatment and support they receive at the service. Staff ensure that people are respected and treated in a dignified way.

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

We spoke with two people in private. One person was coming to the end of their treatment regime, whilst the other was half way through the agreed twelve week period.

Both spoke positively about their experience of the service and their determination to succeed. They spoke about the structured week and how they missed the structure over the weekends when more personal time was available. People told us they were supportive of each other and appreciated the support and encouragement they received from staff. One person said that it was "Amazing what they've achieved with me." They also spoke a great deal about mutual trust between themselves and staff.

One person told us about the things they disliked about the regime such as not keeping their own money but having a weekly allowance. However, they accepted these were the house rules and they understood why they were there.

Other evidence

We looked at two care plans in detail. They were detailed and gave good information about the person and the treatment regime they required. We could see the process for admission was rigorous, with a searching interview taking place that explored the person's needs and whether they were ready to undertake rehabilitation that followed a strict regime over a twelve week period. Once the person had successfully gained a place at the service, their progress was fully recorded within the care plan so that

progress could be seen.

The care plans were well written and contained the information required to show that treatment was based on the person's individual needs. Each person had aims and objectives that were specific to them. The plans were up to date and kept under constant review. They included signed consent forms to allow the service to share information with other agencies such as the drug and alcohol team, social worker, GP and other relevant professionals.

Our judgement

The service is compliant with this outcome. People receive appropriate care and treatment that meets their specific needs. Treatment and support is planned and agreed with the person.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

People living at the service said they felt safe and well supported. One person told us about sessions named here and now, where they could raise any issues and concerns. They said they would be listened to if they had a complaint and action would be taken.

People told us they were well supported by staff throughout their period of rehabilitation and one person spoke about the mutual trust that existed between residents and staff.

Other evidence

We were told that staff received training about abuse. When speaking to staff they demonstrated a good understanding of what was abuse and what they should do if they suspected abuse was occurring. Staff training records showed that all staff were up to date with their safeguarding training, including refresher training. When speaking with staff, they showed us that they understood what they should do and the steps they would take to safeguard the people living at the home.

People living at the service told us they received a weekly allowance, with the rest of their money and credit cards being looked after by the service during their stay. This arrangement was part of the house rules that all people using the service signed up to. Controlling their finances in this way helped to ensure that people did not stray from their treatment regime. We were told that each person had their own account and all transactions were countersigned by the person. Budgeting was one of the life skills

sessions that all people undertook during their stay.

Our judgement

The service is compliant with this outcome. People are protected from the risk of abuse by well trained staff. Robust processes are in place to look after people's money and valuables.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

We did not speak with people using the service on 12 December 2011 about how the service supports staff.

Other evidence

We looked at two staff files and could see that staff received training that was relevant to their role. They received fully recorded induction training and all mandatory training was up to date. In addition, training relevant to the issues they dealt with was in place such as healthy eating, nutrition and interviewing. Staff were also given opportunities to identify and attend other training.

Staff confirmed they received supervision sessions every three months, although they said they could seek guidance and support at any time as there was always someone available to speak to. A member of staff told us that the supervision process included discussing physical, emotional and work related issues. The supervision process also identified training needs and opportunities.

Our judgement

The service is compliant with this outcome. People are supported by staff who are well trained and competent. Staff are supported by supervision arrangements in place.

Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:

* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us

People using the service told us they were very satisfied with the support and treatment they received. One person said it had "Been brilliant." They also said that it was "Amazing what they've achieved with me." People spoke about mutual trust between themselves and staff.

Other evidence

We looked at maintenance records and saw evidence that they were kept up to date. We saw evidence that weekly fire alarm tests were conducted and regular fire drill took place. Maintenance of fire equipment and systems were up to date and risk assessments were in place. We saw that the service had complied with recommendations made by the fire safety officer. Portable appliance testing had been completed and the certificate was awaited.

We looked at the questionnaires that were collected at the time each person completed their course of rehabilitation. All of these contained positive comments about their future. Comments from the questionnaires included "I have loved my placement." "I am very excited about my future. I have learned a lot about myself." "I've enjoyed my stay and it has given me a better perspective on life and life skills."

Our judgement

The service is compliant with this outcome. The service monitors the quality of the support and treatment provided. Systems are in place to manage risk.

What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Information for the reader

Document purpose	Review of compliance report
Author	Care Quality Commission
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