

Alcohol and Drugs Action Recovery Services Support Service

7 Hadden Street
Aberdeen
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Telephone: 01224 577120

Type of inspection: Announced (short notice)
Inspection completed on: 29 November 2017

Service provided by:
Alcohol and Drugs Action

Service provider number:
SP2016012708

Care service number:
CS2016346966

About the service

The service is based in Aberdeen and offers a community based harm reduction service . Evidence based interventions are offered to people to address risk associated with alcohol or drug use.

The service operates as an integral component of the integrated drugs service and alcohol service .

What people told us

Service users spoke positively about the service they received. Comments included:

"They encourage me to budget and face up to issues instead of ignoring them."

"I feel safe with my worker, I know everything is confidential."

"I am treated with respect."

"I am given a choice of where to meet my worker."

"He listens to my best interests and we develop a plan."

"They have never let me down."

"I would have been lost without this team."

"Without my support plan I'd be going round in circles."

"I feel I am listened to and not judged."

"They are good at their job, make me feel at ease."

"I am encouraged to get out my comfort zone."

"They had a leap of faith in me."

"The manager has been very supportive."

"Staff are well-trained, I can relate to them."

Self assessment

No self assessment was requested from the service.

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of environment	5 - Very Good
Quality of staffing	5 - Very Good
Quality of management and leadership	5 - Very Good

Quality of care and support

Findings from the inspection

There was a range of initial information gathered by the service. The service user and those who worked with the service user had contributed to the initial gathering of information. In some cases the initial contact may be when someone walks through the door to ask for help.

The service works closely with other services including NHS based services. They share office space and have positive lines of communication. NHS staff commented on this, saying "we have joint training and they are a valuable part of the team" and "they are key for family support, they help provide consistency".

One service user spoke about the developments she has seen over the years. She advised that being involved in this service has reduced the stigma. She spoke about completing the DART (Drugs Action and Recovery Training) she felt this had been a turning point. All service users spoken with or who provided comments spoke positively about the service they had received.

During one inspection visit a volunteer worker explained their role. They advised that they were there to support people who came through the door. To provide advice and to support people after they had taken the big step of walking through the door.

The service worked to a recovery model and service users had a recovery plan in place. Service users and staff would look at the outcomes they should work to and record these. Day to day contacts were recorded which demonstrated the range of inputs staff would have. In discussions with staff they advised they "work on anything that is a barrier to recovery". Staff acknowledged the challenging aspects of their job and how at times they would have to take on roles that would be best served by others and this can impact on the work they do. What was clear from talking with staff was their focus on supporting and working with service users in a flexible manner.

The records contained a wide range of information. It was noted that while there were recovery plans in place which had an opportunity to identify outcomes, it was not always clear what was being done to achieve that outcome or the reflection process on whether that outcome had been achieved. **(See recommendation 1).**

The service should also ensure that records are accurately dated and signed by staff and service users if they wish to sign their plans.

In making the above recommendation there is a recognition that this service also shares notes and records with NHS services.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The provider should review how they record their planning of care to ensure they are working toward current best practice.

National Care Standards Support Services. Standard 5: Support Arrangements.

Grade: 5 - very good

Quality of environment

Findings from the inspection

The service is provided from various sites across the city and also in the local community.

There is an office in Aberdeen city centre which is open to people dropping in or for ongoing support.

In addition to this the service is also located on sites within Royal Cornhill Hospital in Aberdeen.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of staffing

Findings from the inspection

The service had staff with a variety of qualifications and experiences. In discussions with staff they came across as motivated to provide as high a quality of service as they could for service users.

Staff placed the needs of the people they supported at the centre of what they were doing. It was clear this could be challenging as staff would deal with situations that would perhaps be better suited for an alternative service. However as staff explained if an issue is pressing it has to be dealt with rather than someone going on a waiting list elsewhere.

Comments from service users as regards staff included:

"I know I can trust them."

"They don't judge me."

"They are reliable."

There were records in place regarding staff supervision and this took place on a regular basis. It was also clear from talking to staff and line managers that they would provide informal supports at any time.

Staff spoke positively about the supervision they received. However there was a thought that perhaps a more clinical model of supervision could be available to staff.

Regular team meetings were taking place and these had been recorded.

Staff were also being encouraged to come forward with innovative ideas and plans for improving practice. In some cases finance had been made available to develop these ideas.

Comments from staff included:

"We get regular supervision."

"I do feel supported but I also feel that some form of clinical supervision would be useful. This is available for NHS staff."

"We have to have a flexible attitude."

"It is concerning how much time is spent trying to sort out benefits."

"Overall the staff team were working holistically with people and looking at a range of issues in their lives".

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of management and leadership

Findings from the inspection

Information contained within previous statements would also apply to this statement.

The service has a clear management structure in place. This was explained by the registered manager and it was also possible to speak with the general manager during the course of the inspection.

Management meeting minutes were in place. This included information on quality and practice issues.

In discussions with the line managers they were fully aware of all aspects of the service they were managing. They had worked at building positive lines of communication with the NHS teams and this had been commented on during the inspection.

The general manager had a clear idea of where she wished the service to go along with a commitment to improvement within the service.

A quality meeting would take place. At this meeting quality issues were discussed and if there had been any incidents these were discussed at this meeting and reflected on.

An improvements actions tracker was in place. This looked at any areas that required improvement and a date was set for the improvements to be put in place.

Following discussions with management and observing the records, it was clear that the service did have an emphasis on the quality aspects of their work.

A file audit had taken place. This had looked at ensuring that the files had been compiled correctly. The service also advised that at supervision staff would be encouraged to bring files along to look at the quality of the recording within the files.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

There are no outstanding requirements.

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

There are no outstanding recommendations.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

This service does not have any prior inspection history or grades.

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