

Case Study

How a bespoke accreditation programme has helped the Tabor Group ensure its treatment centres are meeting best practice standards



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Miriam Rigney, Quality and Risk Manager, Tabor Lodge

Background

The Tabor Group provides a range of residential addiction treatment centres in Cork city and county. This consists of the residential centres at Tabor Lodge, Fellowship House and Renewal. A continuing care programme and a family programme are also key elements of the services offered by the group.

Tabor Lodge is a residential addiction treatment centre offering primary treatment for people addicted to alcohol, drugs or gambling, or those who may have an eating disorder. It was established by the Sisters of Mercy in 1989 to alleviate the damage and distress caused by addiction to people of Cork and surrounding counties. It provides a 28 day residential treatment programme and a two year continuing care programme. Tabor Lodge also provides a pre-treatment programme for people who, following assessment may not yet be ready for residential treatment.

Fellowship House and Renewal are extended treatment centres based in Cork city. These extended treatment centres offer an option of a further 12-week extended treatment to men (Fellowship House) and women (Renewal) who have completed a primary treatment programme for their addiction. Renewal is the only extended treatment facility for women in Ireland.



The Challenge

In 2007 the organisation decided it should benchmark its services to ensure the treatment and care it provided was in line with best practice. However, existing accreditation programmes were not tailored to residential addiction treatment centres. The Tabor Group wanted to find a company that could provide a suitable accreditation process which was responsive to its specific needs.

The Solution

The Tabor Group decided to work with CHKS which tailored its hospital-based accreditation programme to suit addiction treatment centres. This meant reviewing each standard and process to ensure it was applicable and removing any that were not. Tabor Lodge was the first of the three centres to be accredited by CHKS, and achieved re-accreditation in 2013.

Fellowship House and Renewal were accredited by CHKS for the first time in 2013. Quality and Risk Manager, Miriam Rigney, says members of staff were much more familiar with the accreditation process after Tabor Lodge was accredited for the second time.

"All three centres are represented at Clinical Governance Committee meetings. Quality and accreditation is a standing item on the agenda for these meetings. Any learning from the initial accreditation process at Tabor Lodge was carried through to the extended treatment centres as they underwent the accreditation process," she says.

"There are certain policy groups that apply across all three centres, such as health and safety and HR, but also, there are specific ones for each centre. Each centre has its own identity and areas that are specific to its client group. We found that a lot of things were being done but were not being recorded, so it was about making staff members aware of the standards and facilitating the understanding of our aim of meeting best practice standards as described in the CHKS standards."

Although at the outset it seemed like a lot of work was involved, the structure of the accreditation process made it straightforward.

However, Miriam recommends having a dedicated member of staff who is responsible for accreditation and who can champion the process within the organisation. This person can then delegate to the various members of the team.

The benefits of working with CHKS

Miriam says the accreditation online system was user friendly and for most staff the only challenge was getting used to uploading responses and data. "The one enduring benefit of accreditation has been the emphasis on quality. It is an agenda item on every meeting and we constantly keep it in mind."

A more structured awareness of audit was another benefit that Miriam highlights. "We can see where we are and measure what we are doing in a way that wasn't possible before. It means we are getting smarter at looking at the information we have about the treatment and care we provide."

Tabor Group has now developed other key performance indicators which are used to report back to board meetings. "We now monitor attendance, assessment and follow up appointments. The board is very engaged and is including elements from accreditation into the strategic plan for the next five years."

