

# drugworld DIARIES



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Cranstoun City Roads is a 17-bed residential detoxification unit for planned and crisis admissions. We were a pan-London service, but recently we have developed contracts with outer London and the Midlands. My post as Service Manager at Cranstoun's City Roads was always going to be challenging, despite over 20 years experience in substance misuse work and nursing prior to that. However, I am on a steep learning curve, especially given the wider social and political issues concerning health and social care delivery and funding.

City Roads is a very busy service with over 1,000 referrals annually, 500 of which become admissions. The crisis remit can throw up the unexpected too, so I am often involved in troubleshooting.

As service manager, I need to ensure that all teams operate effectively and communicate well. Our large staff team includes the admissions team for all of Cranstoun's tier 4 services and 19 volunteer/trainee workers, a vital part of our service.

Monday morning and I arrive for the handover early, so I can talk to night and day shift staff who provide 24-hour cover (nurses and social care). We discuss any dilemmas, such as behavioural issues that might jeopardise a client's successful completion. I catch up with the housekeeper, chef, and check in with admissions. Only then do I head off to tackle email, the ever-beckoning taskmaster.

I hold a practice management meeting with the social care and nurse team managers to agree the allocation of this week's business. These meetings cover anything from staff training,

Health and Safety reporting, menus, stats and clinical practice issues to whose turn it is to buy the coffee. It's always focussed on ensuring we are delivering the best possible service.

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This afternoon I have one of many partnership meetings with the London Pathways project at University College Hospital, working to reduce inappropriate hospital admissions from the homeless. Our common interest in working effectively with some of London's most vulnerable clients makes this a crucial discussion. My two managers support me and attend some of these frequent interagency meetings. Networking and liaising could almost be a full time job!

Throughout the day, I pop into the admissions department to discuss emerging issues around the contracts and liaison with commissioners. Today the team tells me that at 1.30pm they were asked if they could do a same day admission for a female who needs detoxification, but is also experiencing severe domestic violence and needs a place of safety. Our team excels at

responding quickly; by 4pm this client is safely admitted.

The care team are highly skilled but occasionally call on me for support. The new admission, Michelle, is aggressive; they were worried that she might hit someone. Meeting Michelle, I realise that she is simply terrified and defensive. As I talk to her about how we can support her, she stops shouting and starts sobbing..

I rush back to working on the report, due in tomorrow! There is always an urgent piece of written work, but we are here to support our clients – it's not always easy to decide what and how to prioritise! Our team are dedicated and most have worked at City Roads for a long time, but I try to maintain an open door policy. My two managers also support the teams well – especially when there is a deadline to meet.

I am concerned for the future of the crisis component of the service, because of the increasing emphasis on planned admissions and reduced budgets. Unfortunately, it's not always possible to plan admissions: people's lives just don't work like that. Crisis intervention is a vital part of the treatment spectrum. Some argue that outcomes for unplanned admission are poor; at City Roads, we are working on improving our monitoring to demonstrate the positive outcomes and lasting public health benefit of our work.

I feel that the funding for this client group should be grant-based. Demonstrating the need and the effectiveness of the crisis model to the powers that be will be a major focus for 2012. Looking back at how and why City Roads came into existence, I sometimes think we have come full circle.