

218 Time Out Offender Accommodation Service

218 Bath Street
Glasgow
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Telephone: 01413 316 200

Type of inspection:
Unannounced

Completed on:
23 March 2022

Service provided by:
Turning Point Scotland

Service provider number:
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Service no:
CS2005087482

About the service

218 Time Out is an integrated health and social care residential service for up to 12 women involved in the justice system, provided by Turning Point Scotland. The programme includes pre admission support, followed by a 16 week residential programme with groupwork. Aftercare support is also included, working in partnership with community based services.

Based in Glasgow city centre, close to all amenities and public transport links, the service provides accommodation over four floors, with each woman having their own en-suite bedroom. There are also communal seating areas and a number of meetings rooms.

The service has recently introduced two bail beds where women will be referred directly from Court. We look forward to this part of the service progressing.

It should be noted that this inspection took place during the Covid-19 pandemic restrictions and therefore followed revised methodology for conducting inspections in these circumstances.

What people told us

We spoke to six women staying at 218 Time Out who were at various stages of the programme. We were also able to gain the views of external professionals. Overall, people were positive about the support and intervention provided by the service.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

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| How well do we support people's wellbeing? | 5 - Very Good |
| How good is our staff team? | 5 - Very Good |
| How well is our care and support planned? | 5 - Very Good |

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

We found major strengths in supporting positive outcomes for people, therefore we evaluated this key question as very good.

Women at 218 Time Out felt in the main, their relationships with staff were positive, warm and encouraging. They felt safe, having confidence that staff would deal with issues promptly. This enabled them to approach staff for support to work towards their individual outcomes. Women commented that there was always someone available for them, day or night. Staff spoke about women respectfully, had a good understanding of those they supported, and we saw some positive interactions between staff and women.

Women's wishes and preferences were taken into account throughout their time with the service. This included gathering information directly when they first became involved with the service and obtaining consent where necessary. Additional processes were embedded by the service to gather views via residents' meetings, monthly women and coordinator sessions and daily 1:1 key worker meetings. These evidenced staff and women working towards individual outcomes.

Each woman had their own bedroom which they could individualise, and the service had several communal areas for socialising and eating with others to avoid isolation and encourage feelings of belonging. Women had built up strong relationships with some staff and there was evidence of the women being comfortable in each other's company. Women were encouraged to maintain connections with services in their local communities, assessments were multidisciplinary, and the periods of reintegration encouraged women's involvement with key agencies such as recovery groups.

Due to the nature of the programme offered by 218 Time Out, independence and choice was limited at times. This was discussed prior to moving to the service and throughout their stay, with women being provided with alternative accommodation options should they feel unable to commit to certain restrictions. Staff demonstrated a clear understanding of balancing women's requests with any individual legal or procedural restrictions that were in place, and they were also aware of their public protection role and responsibilities should women choose to move on in an unplanned way. The service carried out searches on belongings where required, however this did not include personal searches, thus maintaining dignity.

Although staff were clearly advocating on behalf of the women, there was no dedicated link with a local independent advocacy service. 218 Time Out could consider having visiting advocacy support to further promote women's voices.

We found staff were responsive and had a clear understanding of the women, with their needs being continually assessed, relevant paperwork updated and personal plans being actively used to enhance support. There was recognition when 218 Time Out was not the most appropriate service, and steps were taken on a multi agency basis to source alternative supports to ensure individual outcomes were met. The available support to women varied in intensity dependent on each person's stage of the journey and could be adapted to changing needs. This ensured the appropriate support was available at the right time.

The service had adult and child protection procedures in place and staff were able to demonstrate their responsibilities towards keeping women safe in a variety of ways including recognising concerns relating to mental health and substance misuse and putting additional supports in place to meet these needs.

218 Time Out is an integrated health and social care service. This enables access to comprehensive information regarding the physical and emotional health of women using the service, in addition to recognising people's interests, culture and past life. This ensured they were effectively supporting women with all aspects of their wellbeing.

The service had an inhouse groupwork and CBT programme. This included core groups such as offending, substances and emotions. The women were particularly enthusiastic about these programmes as it increased confidence and provided daily structure and tools and strategies to support them in the community. The groupwork could be adapted to meet learning needs, providing women with the opportunity to address matters in a safe environment. One social worker commented that their service users insight into their offending behaviour had significantly increased due to being at 218 Time Out.

218 Time Out had a link with a local college, so women were able to consider educational options. Women could also access a gym within the accommodation and community. There were restrictions on the women's access to the community, especially initially, however some women and staff did consider that access to activities were limited, especially during weekends. It is recognised that Covid-19 had an impact, but a more creative approach to enable women to have alternative leisure and learning experiences would be beneficial to ensure they get the most out of life (see area for improvement 1).

Family time was supported and encouraged by 218 Time Out where possible and safe, both within the accommodation and local community. We saw examples of women benefitting from increased contact with children and family due to the progress that they had made whilst at 218 Time Out.

There was a comprehensive and holistic health focus for all women. Assessments relating to physical and mental health were carried out on an ongoing basis, with the service demonstrating that interventions had led to improvements in health.

Service users had daily access to health care workers including general nursing staff and mental health nurses. 218 Time Out supported an onsite detox programme with regular input from specialist doctors, psychiatry, and psychology. Women continued to link in with many external health providers of their choice such as dentists, opticians and sexual health clinics. Transition planning was in place for women to access the required services after their time at 218 Time Out as staff were knowledgeable regarding local resources. The service had undertaken staff training in emergency medication relating to seizures and opioid overdose to enable staff to respond quickly and appropriately as required. The 218 Time Out model enables the women in the service to get the right support from the right people with impressive coordination to achieve health outcomes and goals. There was also strong integration between health and residential staff, ensuring whole person support.

Women benefitted from the range of health and wellbeing groups that the service runs which included input regarding cancer screening and drug safety, and good sleep routines were encouraged to support daily routines.

The inspection process considered the medication system at 218 Time Out. A clear process was in place whereby nursing staff were always involved in the administration of medication in accordance with care plans. Quality assurance was undertaken and a discussion took place during the inspection regarding strengthening this. Medication errors had been investigated and reflected upon appropriately.

The service had a dedicated chef, and a dietician has been involved with the meal planning to promote healthy eating. Women were also able to make suggestions and they were really enthusiastic about the food at 218 Time Out, sitting together to eat and socialise.

Areas for improvement

1. To further expand women's health and wellbeing and help them get the most out of life, the service should consider increasing the leisure activities and pastimes available to women taking place within and outwith the service.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors (HSCS 1.25).

How good is our staff team?

5 - Very Good

We evaluated this key question as very good as the service demonstrated major strengths in supporting positive outcomes for people.

It is recognised that since the last inspection, the service has undergone some changes to their structure. Staffing has understandably been impacted by the Covid-19 pandemic, however despite this challenge 218 Time Out has continued to provide a very good service, supporting positive outcomes for women.

218 Time Out had appropriate staffing levels in place and benefitted from teams which included nursing staff and groupworkers. Women generally felt that staff were available for them.

The service was aware that the system being used to record training and identify key learning gaps for staff requires attention. Improving this process will ensure staff are completing the appropriate training for their role in a timely manner, and enhancing skills and knowledge to more confidently and safely meet the needs of the women (see area for improvement 1). An area of ongoing development for the service relates to staff being more trauma skilled. Staff felt their practice could benefit from this, and consideration to incorporating this into the core training modules could be given.

Staff advised that they were supported by an approachable management team and were clear about their role in building relationships with external professionals to ensure successful transitions. There was a core group of knowledgeable staff, including a staff member with lived experience, which enabled the women to build key trusting relationships.

Given the structure of the separate shift patterns, there were few opportunities for all staff members to come together to discuss practice and ensure consistency. Managers had a good insight into this, along with team and staffing dynamics and were proactively putting additional processes in place to address this. This included regular workshops for staff, who were provided with an opportunity to shape the fortnightly topics. Staff were enthusiastic about this development, and we look forward to seeing these progress.

Staff could gain support via both formal and informal supervision, and generally spoke positively about this. Supervision was undertaken regularly and was flexible to accommodate the experience and skills of staff. The support process could be further enhanced with staff debriefing taking place after particular incidents. This would give staff the opportunity to continue to develop their professional skills, reflect and explore practice issues to continue to achieve positive outcomes for women (see area for improvement 2)

Areas for improvement

1. To support the service to ensure women's needs are fully met by a staff group with the appropriate skill mix, the service should ensure that they have a system in place that can effectively identify individual training needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes (HSCS 3.14).

2. To support improved outcomes for women, and enable staff to reflect on practice, the service should consider a more formal debriefing process following particular incidents.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes (HSCS 3.14).

How well is our care and support planned?

5 - Very Good

The service demonstrated major strengths in supporting positive outcomes for people, therefore we evaluated this key question as very good.

Prior to moving to 218 Time Out, women visited the service and staff were able to begin gathering background information from a variety of professionals. This enabled a pre admission assessment which included physical and mental wellbeing needs and risk assessments. Covid-19 had an impact on referral numbers to the service, which resulted in a number of women being offered a bed within a relatively short period of time. A return to a more lengthy pre admission process will enable more indepth assessments to be carried out, greater access to information prior to admission and women can begin to build up relationships with staff in advance. This will support improved planning and matching processes.

The service had clear, comprehensive support plans in place which were of a high standard. They were holistic, with women being involved in developing and shaping the plans and goals. Service users were aware of the plans, attended monthly reviews, and progress, support and advice was also offered through key worker sessions and coordinator catch ups. Groupworkers and health staff contributed to the support plans and the weekly psychological professionals group ensured that women's mental health was considered on an ongoing basis. As a result, personal plans were dynamic, relevant and flexible to meet presenting needs.

Staff had a good understanding of their role within the planning process and the goals that women were working towards. The user friendly grading and scoring system in place for reviews was particularly helpful and provided a visual aid for women to chart their progress towards goals and outcomes.

Risk assessments were individualised, reviewed on an ongoing basis and immediate action was taken when required. The documentation was also clear regarding any restrictions that were in place for the women and reasons for this.

At the reintegration stage, paperwork demonstrated detailed and specific plans which the women were involved in developing and these were reviewed after each period in the community, with debriefs taking place with the service users. This ensured the plan was flexible and meeting the needs of individual women. We found similar positive planning in place for supporting women leaving the service, with liaison with key agencies. This ensured that appropriate community supports and aftercare were put in place for a successful transition.

Complaints

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

Detailed evaluations

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| How well do we support people's wellbeing? | 5 - Very Good |
| 1.1 People experience compassion, dignity and respect | 5 - Very Good |
| 1.2 People get the most out of life | 5 - Very Good |
| 1.3 People's health and wellbeing benefits from their care and support | 5 - Very Good |

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| How good is our staff team? | 5 - Very Good |
| 3.3 Staffing arrangements are right and staff work well together | 5 - Very Good |

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| How well is our care and support planned? | 5 - Very Good |
| 5.1 Assessment and personal planning reflects people's outcomes and wishes | 5 - Very Good |

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