

# Turning Point Scotland – Glasgow Alcohol & Drug Crisis Service Housing Support Service

Turning Point Scotland  
Glasgow Alcohol & Drug Crisis Service  
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**Type of inspection:**  
Unannounced

**Completed on:**  
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**Service provided by:**  
Turning Point Scotland

**Service provider number:**  
SP2003002813

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CS2004077543

## About the service

Turning Point Scotland – Glasgow Alcohol and Drug Crisis Service offers integrated health and social care support to people experiencing a crisis due to alcohol or other drug use, including people who may be experiencing homelessness. The provider is Turning Point Scotland.

The service is registered with the Care Inspectorate to provide a housing support service within a crisis residential unit for up to 20 people. There were 18 residents at the time of this inspection.

Turning Point Scotland Glasgow Alcohol and Drug Crisis Service is registered with both the Care Inspectorate and Healthcare Improvement Scotland. In addition to the residential service, there is 24-hour injecting equipment provision (needle exchange), wound-care provision, harm reduction advice, signposting and naloxone training and provision. These services are not regulated by the Care Inspectorate.

## About the inspection

This was an unannounced inspection which took place on 21 and 22 February 2024. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with eight people using the service
- spoke with eight staff and management and one student
- observed practice and daily life
- reviewed documents
- spoke with two visiting professionals.

## Key messages

- The service provides an environment where people feel safe and secure.
- People experience compassionate support from staff who work in a recovery focused way.
- People benefit from access to a range of health resources.
- Groups provided promote wellbeing and resilience.
- Management systems in place support continuous improvements.

## 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

How well do we support people's wellbeing?	5 - Very Good
How good is our leadership?	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 have evaluated this key question as very good as performance demonstrated major strengths in supporting positive outcomes for people.

People we spoke with said they experienced positive interactions with staff who were described as caring, supportive and respectful. This contributed to people feeling safe and valued. 'Staff are non judgemental' and 'staff go above and beyond' were comments made. People also told us that the manager was accessible and approachable. 'Its like one big family' was a comment made by one individual.

The provider encouraged feedback about the service people received in a number of ways including through the residents forum, suggestion box and exit questionnaires. We saw from the 'you said, we did' information displayed, that improvements resulted from people's suggestions. Examples included access to a hairdresser and that additional activity resources had been purchased. This helped demonstrate that people's views were important and that the provider was responsive to peoples comments about the things important to them. Where requests and suggestions could not be accommodated, an explanation was provided.

People benefitted from a structured day, with groups facilitated by staff designed to promote people's wellbeing, inclusion and peer support. In-house meetings took place in the evenings facilitated by the fellowships, Alcoholics Anonymous, Cocaine Anonymous and Narcotics Anonymous. Representatives from local recovery communities also visited the service. These all provided an opportunity for people to connect to recovery supports and communities and potentially provide valuable support networks for people to engage with on completion of their stay in the residential service. The manager agreed to look at ways to facilitate this support at weekends following a suggestion made by someone we spoke with.

People were encouraged to maintain contact with those important to them, through telephone calls and visits, ensuring that people were able to stay connected and maintain relationships.

People we spoke with commented on the benefits they had experienced since being admitted, including improvements they noticed in their physical and mental wellbeing. People appreciated the quality of meals on offer, many having neglected their diet prior to coming into the service. Overall, people were satisfied with the service they received, some commenting that it had potentially saved their life.

The integrated working arrangements at the service meant that people had access to a visiting medical officer and a pharmacist. This supported safe detoxification and substitute prescribing and helped address any health concerns people presented with. There was also input from sexual health nurses and a specialist nurse supporting people with liver related health issues. These in-house resources provided an opportunity for people, who may not easily engage with universal health services, to access the support they needed, promoting positive health outcomes.

The service monitored people's outcomes using 'The Recovery Outcome Web' tool, a validated monitoring tool developed by the Scottish Government. People scored themselves across a number of areas including physical health and wellbeing, self care and nutrition and substance use, both at the beginning and again at the end of their stay. This enabled people to recognise the progress that they had made during their stay. The positive impact of the service provided was evident in the comparative outcome scores we sampled.

The manager agreed to consider suggestions for improvement that people had highlighted during their conversations with us. This included reinstating meditation sessions and more options for physical activity.

## How good is our leadership?

### 5 - Very Good

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

We sampled a range of systems in place to maintain quality and drive improvements. We saw high levels of satisfaction from feedback questionnaires from people being supported. Although dissatisfaction was minimal, we suggested the provider consider ways to better demonstrate how it responds to this.

We saw that the provider used audits to ensure that expected standards were being met. Improvements identified through quality assurance systems were communicated through action plans. A practice audit was carried out by senior management, providing an additional level of oversight and governance.

A service improvement plan helped the management team to focus on improvement priorities. Self assessment was supported by a practice and quality audit, linked to the quality framework developed by the Care Inspectorate. Where any gaps in evidence had been identified these had corresponding actions. The management team were responsive to our suggestion to reflect the progress of actions, as this could help identify at an early stage if these are effective.

There were robust systems in place to record and follow up on accidents, incidents and complaints, with input from senior management and others key people within the organisation where this was considered necessary.

There were systems in place to monitor staff practice and support staff development. With regular supervision and annual appraisal. Core training, specific to role was identified and records indicated that staff were up-to-date with the training they needed. Staff said that the training they received helped equip them with the skill and knowledge they needed to be able to deliver effective support.

Recruitment was well managed, with appropriate checks completed prior to staff commencing employment, including right to work checks and systems in place to monitor staff registration with the relevant professional bodies.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

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

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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