

Sacro National Intensive Support Package Offender Accommodation Service

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Unannounced

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Service provided by:
Sacro

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About the service

SACRO National Intensive Support Package (NISP) is part of the national provider group SACRO.

The service provides close monitoring and intensive support to those at high risk of offending and the service is delivered across Scotland. SACRO NISP is registered to support and monitor up to 10 individuals at any one time. At the time of our inspection visit the service were supporting and monitoring four individuals.

SACRO NISP's aims are to enhance public protection and community safety. The service's objectives are to:

- Increase personal strengths and resilience
- Rehabilitate individuals back into the community
- Continually evaluate, develop and improve the service.

An intensive support package can vary from the provision of a few hours weekly support to the provision of a 24/7, double staffed support and monitoring arrangement. Some individuals referred are subject to statutory supervision via criminal justice social work, others are referred from forensic mental health teams and, more recently, the service has also supported young adults with complex needs who have been referred via social work. The service can support individuals on a voluntary basis who may not be subject to any statutory measures.

The level of intensity and nature of support/monitoring is tailored, in consultation with relevant agencies, to match the assessed needs and risks of each individual. The staff team work closely with other responsible agencies in relation to on-going risk assessment and risk management, with public protection being given key consideration.

About the inspection

This was an unannounced inspection which took place between the 12 and 15 March 2024. The inspection was carried out by two inspectors 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.

To inform our evaluations of the service we:

- spoke to three people being supported
- spoke with staff and management
- reviewed documents
- spoke to external professionals

Key messages

- People were supported to an excellent standard in providing positive experiences and outcomes.
- The service provided supports that contributed significantly to public protection.
- People were supported by a very high quality staff and management team.
- There was very good collaborative working across agencies.
- There were some very minor improvements that could be made with regard to care planning, medication support and service monitoring.

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?	6 - Excellent
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?

6 - Excellent

We found significant strengths and excellent aspects in the quality of the care provided and how these supported very positive outcomes for people and the public, therefore we evaluated this key question as excellent.

We spoke to people who were supported within the service. These people were living in their own tenancies after release from custody supported by a staff team on a 24-hour basis or sporadically at planned times throughout the week. They told us that the service supported them to a very high standard and that the staff were excellent in their friendly and supportive approach. People were treated with dignity, understanding and respect. Where necessary people were supported to attend activities they enjoyed doing within the boundaries of any licence conditions placed on them by the courts. This view of high quality practice was generally supported by outside social care professionals we spoke to as part of our inspection.

For people transitioning from the prison setting to community living, these engagements ensured public protection through effective monitoring of licence conditions and restrictions placed on them by the courts. It also provided assurance to the public by adhering to and providing supports in line with Multi-Agency Public Protection Panels (MAPPP) strategies and planning to reduce the risk to the public and promote a rehabilitation agenda in the community integration of people in our justice system.

The service promoted people's independence and increased their confidence with all aspects of independent living. Staff appeared to have excellent relationships with people and were committed to helping them progress. The rate of 'recalls' - or people returning to prison due to breaching their sentence licence and supervision conditions, such as committing further offences - for those who engaged with the service was low but on occasion could be seen as a success of the service in ensuring public protection. This was a testament to the service's successes in effectively supporting people to get the most out of life and keeping the public safe.

People were familiar with the staff that supported them and were provided with their supports when and as they needed them. This meant people spent their time doing things with the service that promoted their wellbeing and independence in a safe and friendly environment. Comments made to us by people supported and other professionals involved with their care during inspection demonstrated some excellent aspects of support people received. Some comments included how responsive and involved the service was in supporting people and the partner agencies it engaged with as part of the risk management process. It was commented that the service had a competent understanding of risk and maintaining person-centred values to promote people's wellbeing.

The service clearly had a very good knowledge of people's needs and was proactive in linking people with activities and one-to-one support they needed. Examples shared by the service included engaging people supported with purposeful activity with the support of statutory and third sector partner agencies. These activities included engaging with woodworking and gardening projects. People supported in these activities could see tangible results of their engagement and experience a feeling of reward. This support promoted positive outcomes, personal wellbeing and helped people to develop a sense of community which goes some considerable way to reducing risk and engaging people actively and productively in their communities.

The service generally worked with people for a few months and if necessary for an extended period, moving

people on to less intensive supports as needs dictated. This meant that the management of risk was proportionate to how well people engaged with the service and their return to the community.

How good is our leadership?

5 - Very Good

We found strengths in the management processes which led to high quality, positive outcomes for people, therefore we evaluated this key question as very good.

The service senior staff monitored service provision through daily monitoring notes and interactions, staff support meetings and wider team meetings to ensure service effectiveness. We sampled some associated records and could see these processes had been carried out to a very good standard and fed directly into the service's improvement plan. This process of monitoring assessed, ongoing, the suitability and level of engagement in people's supported activity and promoted learning for the service from aspects of staff experience whilst providing complex care and support in a community setting.

Oversight and quality assurance was managed to a very good standard. This took the form of informal visits to services by senior staff either in a managerial role or when covering shifts, supervision meetings, office meetings of contracted staff and wider team meetings including sessional staff. The service had effective processes in place to ensure auditing of service spends and ensure medication supports were provided effectively. We did discuss the need to be clear as to what degree someone needs help with medication supports as the service assessment in one case could have been better aligned to available guidance which was shared with the service at inspection.

It was also agreed with management that the very good oversight of service effectiveness could be further improved. This improvement would involve senior staff carrying out unannounced, formally recorded visits to services. At these unannounced, random visits senior staff would assess staff behaviour and performance in relation to shift patterns and practice. The focus would be on ensuring staff are following protocols and performing functions related to management of risk and promotion of people's rights/wellbeing and the person supported experience of support. This would assure management to what level the service staff team had an effective engagement with the agreed operational plan, the person supported, and could reflect service excellence or need to improve in these areas.

Support needs and outcomes for people were clearly identified on admission to the service and were reviewed regularly by the service and by regular Multi-Agency Public Protection Arrangements (MAPPA) meetings. These meetings included statutory agencies, such as police and social work working with the people supported and Sacro staff. This ensured the operational plan's effectiveness and support strategies were adapted as and when necessary, in line with people's risk profile, preferences, needs and wishes. Although it was noted that information regarding people's interests and preferences was often not as prominent in care documentation as the associated risk management plan detail. It was suggested to the service management team this increased prominence could be a relatively minor but nonetheless effective improvement that could be made to their care planning processes to ensure people's needs and preferences were a priority.

Staff we spoke to told us how well they were supported by an approachable, supportive and knowledgeable management team. Staff did feel well supported and that is important in providing a high quality, safe environment for the people the service supports. A well supported staff team is also important in providing high quality care and achieving positive outcomes for the people the service supports. The excellent management of risk and the service successful track record was evidence of this.

Lessons learnt from all involved with the service were taken on board to assist in supporting people more effectively and improving services. This was particularly noteworthy in the service's accident and incident management. Incidents were fully logged and notified appropriately to the Care Inspectorate. Actions in reducing risk were discussed at service level and relevant updates provided to staff in plan updates. Development and improvement of services was also taken forward at a higher corporate level. Sacro the wider organisation took learning forward from their experience in the management of people with complex, and sometimes challenging needs.

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

How well do we support people's wellbeing?	6 - Excellent
1.1 People experience compassion, dignity and respect	6 - Excellent
1.2 People get the most out of life	6 - Excellent
1.3 People's health and wellbeing benefits from their care and support	6 - Excellent

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good
2.4 Staff are led well	6 - Excellent

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