SCOTTISH RECOVERY CONSORTIUM

RECOVERY & RESIDENTIAL PROVIDERS GROUP

Residential Rehabilitation Providers Brochure

Table of contents

Introduction 1

Table of approaches 5

Service Listings 6

1. Abbeycare 6
2. Alternatives/Safe as Houses 8
3. Calderglen 10
4. Castle Craig 11
5. Crossreach Residential Recovery 14
6. Crossreach: Beechwood House 17
7. Haven 19
8. Hebrides Alpha 22
9. Jericho Dundee 24
10. Jericho Houses - Greenock 26
11. Leap 28
12. Phoenix Futures Residential Service 30
13. Harper House (Phoenix Futures Specialist Family Service) 32
14. River Garden Auchencruive 34
15. Turning Point Scotland 36
16. Turning Point Crisis Service 37
17. Turning Point Stabilisation Service 38
18. Turning Point (Turnaround) 39
19. Turning Point (218) 40
20. Turning Point (Moving On) 41

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Introduction

The Residential Rehabilitation Providers Group (RRPG) was convened by the Scottish Recovery Consortium who recognised the key role of residential rehabilitation within an integrated approach to services for people affected by drugs and alcohol.

This followed on from the *National Policy Rights, Respect and Recovery*, which outlined the expectations to ensure that:

Scotland is a country where “we live long, healthy and active lives regardless of where we come from” and where individuals, families, and communities:

- have the right to health and life - free from the harms of alcohol and drugs
- are treated with dignity and respect
- are fully supported within communities to find their own type of recovery

The RRPG is open to all providers in Scotland and has managed to bring a wider understanding across the sector of the range of services provided and the complex structures which support these services.

The Scottish Government (Residential Rehabilitation – service mapping report-2019 to2020) has produced some initial analysis of the sector and identified the different financial structures, the combination of charitable non-profit organisations alongside profit making businesses and the range and depth of service provision. Characteristic too of the sector is the diversity of philosophical and theoretical underpinnings and how these are applied in practice.

The recent funding uplift has led to an increased demand for residential rehabilitation. It has however become apparent that the residential rehabilitation providers have a responsibility to better inform individuals, families and commissioners about the scope and depth of the provision in Scotland.
There have been earlier initiatives within the RRPG to provide some information through the Prison to Rehabilitation Protocol and the Guide to Best Practice in Residential Rehabilitation. These papers attempt to provide information on the specific services, including intervention models and treatment approaches, within a number of residential rehabilitation services.

It is important to recognise the complex nature of residential provision in Scotland and note that this paper has been the product of high levels of cooperation and mutual support across all the contributing providers. Similarly, the value of people in recovery and the contribution they make to residential rehabilitation services cannot be underestimated.

As a collective group of residential rehabilitation providers in Scotland, the RRPG is clear that while residential rehabilitation is a key feature in enabling individuals to manage their recovery, it is one component part of a continuum of recovery services across Scotland. Residential rehabilitation is an appropriate response for a relatively small number of people and is an important intervention within their recovery pathway and the wider recovery services. In addition, there is a recognition that the level of change for individuals in moving to live within a residential rehabilitation setting is significant.

There is a developing awareness of the requirement to focus on the process of preparation prior to admission, for ongoing continuity and support during the residential period and subsequent preparation for return to the community. Within the policy context residential rehabilitation plays an important role in supporting the National Mission and the Medically Assisted Treatment (MAT) Standards.

The increased emphasis on informed choice and the range of models of care should be incorporated within the process of preparation for admission within residential rehabilitation. This should be accompanied by open access to independent advocacy at every stage of an individual's journey. The development of joint working with community-based services offers the opportunity to improve the standard of care for individuals and further embed the MAT Standards across all services.

Individuals affected by problematic substance use are complex and can present with a range of issues including mental ill health, physical health, domestic violence and adverse childhood or adult experiences. Individuals may be engaged with several different structures and systems to support their range of complex issues. Care and support systems are a protective factor, as identified within the Hard Edges report[1], and can reduce the risk of harm associated with problematic substance use
The Recovery and Residential Providers Group collectively recognise and support the approach of ensuring a coordinated and consistent delivery of psycho-social and psychological interventions across the drug and alcohol sector in Scotland. We welcome the LPASS practice matrix and LPASS 2018[2] paper on interventions and support their consistent application across Scotland.

Residential providers in Scotland deliver a range of both medical and non-medical approaches and have a long history of providing effective psycho-social interventions. Common to most residential rehabilitation is the opportunity to benefit from a community setting with the opportunity to provide communal peer support as well as more specialist one to one interventions as required for individual residents. The long-standing efficacy of this approach and the expertise of staff in delivering it are at the very heart of how residential establishments offer a pathway towards wellness and recovery.

There is a clear recognition of the primacy of a Human Rights approach within residential rehabilitation. This has been reiterated repeatedly within the policy statements and forms a fundamental cornerstone of Rights, Respect and Recovery. Residential rehabilitation providers are aware of the limited time they have to care for and support individuals. This can involve learning skills which others take for granted and which their fractured development has left behind. Examples of this would include budgeting and manging finances, maintaining a home and personal care. Learning these skills is necessary to support the individual in meeting their most basic needs required for living safely in the community. The primary purpose of residential rehabilitation involves supporting and enabling the individual to manage the transition to living drug free in the community. This will involve supporting individuals to develop a range of skills which can be used to maintain an abstinent lifestyle when they leave.

Residential rehabilitation providers have a clear a focus on helping individuals prepare for returning to the community. This will involve close liaison and planning with community- based services and recovery networks.

Increasingly however residential providers are developing post-discharge services for individuals who recognise the value of the support and care they have received. This can include the provision of individual support as well as mutual aid groups run within a residential location.

The central focus however is in building resilience and sustainability in order to maintain a substance free lifestyle beyond the period of the residential stay. This can incorporate a range of approaches defined within the heading of Psycho-Social support. This paper provides information on the range and models adopted by each residential rehabilitation service identified.

[1] https://www.therobertsontrust.org.uk/our-projects/hard-edges-scotland/
[2] https://www.nes.scot.nhs.uk/media/ji2jkjxp/lpass-report-june-2018.pdf

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It should be noted that while most organisations are available to men and women the provision of specific residential rehabilitation services for women are limited.

Governance

The Care Inspectorate are the primary body responsible for the inspection of residential rehabilitation services. This provides a welcome level of oversight however it should be noted that not all of the providers within Scotland come within the jurisdiction of the Care Inspectorate.

Staff Development

Any delivery framework is dependent on the skills, experience, and knowledge of the workforce. Staff within residential establishments bring a high level of skills and expertise to this area. Many staff have lived experience and the level of insight which this brings is important in developing a genuine empathetic approach. There is however limited opportunity for the development of staff in a way which emphasises the unique nature and the skills required to work in a residential rehabilitation specific setting. In order to develop consistency of practice, common standards and clear expectations, workforce development is crucial in improving the whole system, locality service provision, and improved outcomes for communities in Scotland. There is further scope for the development of leadership and management frameworks that are critical to ensure the creation of skilled and experience leaders to drive forward the National Mission.

Table of approaches

The following information illustrates the approaches and programmes provided by each residential rehabilitation service:

	Detox	12 Step	TI	TC	CBT	Family Programme	One to one sessions	Counselling	LPASS 1-4	TIC	Female
Abbeycare	✓	✓	✓		✓✓	✓	✓	✓	1,2,3	✓	✓
Alternatives/Safe as Houses			✓		✓	*	✓			✓	✓
Calderglen		✓	✓		✓✓	✓	✓	✓	1,2,3	✓	✓
Castle Craig Hospital	✓	✓	✓		✓	✓	✓	✓	1,2,3,4	✓	✓
Crossreach	✓	✓	✓		✓	✓	✓	✓	1,2,3	✓	✓
Haven	✓		✓				✓	✓	1,2	✓	
Hebrides Alpha	✓	✓	✓		✓		✓			✓	✓
Jericho Dundee		✓			✓	✓	✓	✓	1,2,3,4	✓	✓
Jericho Greenock		✓			✓	✓	✓	✓	1,2,3,4	✓	✓
LEAP	✓	✓	✓	✓	✓✓	✓	✓	✓		✓	✓
Phoenix Futures	✓		✓	✓	✓✓	✓	✓	✓	1,2,3	✓	✓
Harper House (PF)	✓		✓	✓	✓✓	✓	✓	✓	1,2,3	✓	✓
River Garden Auchencruive					✓	✓				✓	✓
Turning Point Crisis Service	✓		✓		✓		✓			✓	✓
Turning Point Stabilisation Unit	✓		✓		✓		✓			✓	✓

Table Glossary

***** This provider does not provide on-site detox at this time, however there may be arrangements in place for residents to receive detox in a local NHS facility or in partnership with other Residential Rehabilitation providers

****** This service is not provided.

12 Step - this may in some instances signify a programme focussed on the 12 step model, alternatively the 12 step programme is referred to as part of the recovery timetable.

TI Therapeutic Interventions

TC - Therapeutic community

CBT (✓) - Cognitive Behavioural Therapy. This refers to the application of techniques associated with CBT delivered by practitioners with an accredited CBT qualification.

CBT (✓✓) - The provision of CBT delivered by professionally trained and accredited practitioners, or those working towards accreditation, within and supported by a framework of clinical governance. This is generally delivered at the levels of tier 3 and 4.

Family Programme - Certain providers employ qualified therapeutic staff to run family specific programmes. Some providers will run family information sessions or other forms of activity to include family. All family programmes are open to close friends and loved ones not necessarily classed as family.

One to one sessions - All providers provide at least 2 one to one sessions per week. These sessions may be used to discuss practical matters pertaining to housing, benefits, treatment plan progress among other topics.

Counselling - these sessions refer to sessions with qualified counsellors, therapists, psychologists, or psychiatrists.

LPASS - this refers to each provider's self-reported capacity to deliver Tier 1-4 complexity of psychological interventions.

TIC - Trauma Informed Care, this refers to the providers approach to service delivery, and staff training. Providers reported during interview whether or not their staff complete Trauma Informed Training as part of their mandatory annual training.

1. Abbeycare

Abbeycare Scotland provide a specialist residential abstinence-based detoxification and rehabilitation service based in Erskine, Renfrewshire. The Abbeycare purpose-built care complex has 34 modern en-suite rooms with a private courtyard, garden and modern facilities.

Pre-Rehab

- Preadmission onsite service introduction visits are available and encouraged where possible
- Virtual introductions can also be facilitated
- The service delivers an 8-week virtual structured pre rehab programme which clients and their support staff can access.
- SPS prison assessments can be facilitated.

Detoxification

- Abbeycare provides clinical assessment and develop clinical management plans for each resident.
- Abbeycare provides medically supervised detoxification and observation within a specialist detox suite.
- The service delivers harm reduction interventions.

Therapeutic Programme/Interventions

The main programme has a therapeutic element based on principles of Cognitive Behaviour Therapy (CBT) and the 12 Step programme. It further utilises therapeutic interventions such as motivational interviewing, DBT, relapse prevention and mindfulness. The structured recovery community programme includes access to one-to-one counselling and group therapy, access to community mutual aid, drama therapy, family support, personal development, access to gym, swimming, and spa.

Supported Provision for Trauma and ACES

- Our therapeutic team prioritises safety and stabilisation across staff who are trained in trauma-informed approaches.
- We also work with residents using DBT skills to enable self-regulation, emotional management and creating safe and stable connection with others.
- Our therapists work within the perspective of Adverse Childhood Experiences, (ACES) which underpins the psychotherapeutic groupwork. Residents are
- encouraged to integrate an understanding of their past developmental experiences through a variety of activities.
- We focus on connection and belonging work grounded in Attachment Theory integrated with Polyvagal Theory – explaining how childhood unmet needs and attachment patterns prevail into adult relational patterns and continued attempts to meet unmet needs.

1. Abbeycare

- We educate, inform, explore, and develop residents understanding and experience of Self, Others, and the World from this perspective, providing them with alternative opportunities to safely connect and revise some of their painful past learning in relation to adverse childhood experiences.
- Therapists have specialized trauma training and qualifications and are able to recognise and respond appropriately to clients' presentations of trauma
- responses.
- Our Recovery Practitioners are trained in the Trauma – Seeking Safety Model.

Recovery Care Planning / Key Support

- Our initial care and support needs assessment focus on recovery capital such as, family, social, housing, legal, employment, education, training and utilises the recovery outcome web.
- Each resident engages in weekly keywork sessions to facilitate recovery care planning, goal setting and to develop recovery capital.
- Multidisciplinary reviews are held regularly to monitor progress.
- Abbeycare collates data from service feedback surveys. Residents rate Abbeycare against Care inspectorate gradings and over specific service performance indicators.
- Abbeycare utilises the Recovery Outcome Star to record resident progress at point of admission, after primary 4 weeks, 12 weeks, 6 months and 12 month follow up.

Multi-Disciplinary Team

Abbeycare has a structured staff team comprising of the following:ycare

- Clinical Lead – Specialist Addictions GP
- Consultant Psychiatrist
- NMP – Prescribers
- Staff Nurses
- Registered Manager – SVQ 4 Leadership and Management/ SVQ 3 Advocacy
- 4 Therapists – all accredited by professional bodies with a further 2 trainee therapists
- Senior Recovery Practitioners SVQ level 4
- Recovery Practitioner Team SVQ level 3
- Outreach Team SVQ level 3
- Admissions Team SVQ level 3 & 4
- Hospitality Team – Catering / Housekeeping
- All staff receive supervision every 4 - 6 weeks and annual appraisal. Supervision and appraisal process and internal auditing tracks staff CPD and compliance with training requirements.
- Abbeycare has a three-tiered structure for training mandatory training, specialist addictions / recovery and vocational qualifications.

- The team facilitate daily and weekly MDT meetings assessing clients progress and engagement and clinical services are delivered under a clinical governance framework.

Aftercare/Outreach

- Residents are supported by their keyworker collaboratively to develop an aftercare plan using our structured aftercare tool.
- Each resident must present their aftercare plan to their keyworker and the community
- Our aftercare Outreach team provide a programme of 3 weekly aftercare meetings and 2 recovery support groups, structured telephone follow up and scheduled outcome monitoring post discharge utilising the Recovery Outcome Star. Our vibrant aftercare groups engage in regular recovery activities and events.

01603 513091
admissions@abbeycare.co.uk

2. Alternatives/Safe as Houses

Our therapeutic programme content has been developed with advice and content support from external experts using the Therapeutic Community model. This model recognises the complexity of the human experience and the limitations of pinpointing one causal factor. It allows us to consider developments in the biological, medical, and genetic fields.

We use evidence based behavioural treatments taking into account personality differences and the emotional functioning of individuals. These are framed within socio-cultural theories of behaviour.

There are three determinants: drug; set; and setting: “Drug (the pharmacological action of the substance itself), set (the attitude of the person at the time of use, including his personality structure), and setting (the influence of the physical and social setting within which the use occurs. Zinberg, 1984)

The underlying philosophy of the programme is based on Baumrind’s Authoritative parenting style. The programme teaches personal responsibility through groupwork and community living utilising the strengths of Peer champions. Residents are treated with compassion, care and respect, encouraging development of personal and group responsibility.
The model incorporates a full continuum of care – a programme from chaos to sustainability – a further developing programme from stability to abstinence – and a final programme maintaining recovery.

2. Alternatives/Safe as Houses

The main house has capacity for 16 people, 8 spaces for stabilisation and a further 8 for abstinence. This is further enhanced by 8 scatter flats providing accommodation for a further 16 people, facilitating a peer led recovery and citizenship programme utilising our social enterprise initiatives and leading to the establishment of Lived Experience Recovery Organisations. This model empowers the individual to take personal responsibility and follows a rights based approach to delivery of services.

We support both males and females seeking this support. Residents each have a caseworker and weekly 1 to 1 sessions. Assessment and keywork based around the 10 Recovery Outcome Measures[1], Citizenship and meaningful activity alongside holistic and alternative therapies such as acupuncture and aromatherapy.

There is an ongoing emphasis put on learning personal responsibilities through peer led activities and peer led groupwork. Residents progress through structured incremental progression from Foundation to Intermediate to Senior peer. Residents progress through the stages based on their ability to demonstrate healthy engagement with the programme, their willingness to support others, their level of personal responsibility and proactive role in group responsibility.

Several external activities are incorporated into the weekly programme such as visits to local recovery cafes, mutual aid 12 step fellowship meetings, hill walking and cycling. Alternatives hold 15 acres of greenfield site allowing residents to experience recovery through nature. Alternatives also mentor a Heritage Community based project Skylark IX Recovery Trust (Dunkirk Little Ship conservation programme) which supports “recovery through recovery” via a skill based boat- building project.

Further social enterprises include a community café and upcycling projects
All residents attend outside mutual aid meetings (12 step and SMART recovery) as part of the weekly timetable.

- Residents progress through 3 stage programme – Foundation, Intermediate, Senior
- Outcomes are recorded at 3 stages through programme to chart progress.
- All staff have minimum Health and Social Care SVQ 3 and Managers have SVQ 4 Leadership and Management
- All staff receive mandatory trauma informed training and Motivational Interviewing training.

01389 734500
referral@alternativeswd.org

3. Calderglen

We are an abstinence based treatment centre with accommodation for 24 residents. Calderglen is set in ten acres of private woodland with the river Calder running through its gardens. The house dates from 1795 and has been developed to offer a peaceful setting perfectly suited to aid recovery.

Calderglen has a multimodal approach utilising a multi-disciplinary team of therapists including Cognitive Behavioural Therapy, Person Centred Therapy, Occupational Health, Music Therapy, Twelve Step Facilitation Therapy, key workers, peer support workers (lived experience), and mental health nurses. We focus on the individual needs of each resident and offer our wide range of activities and experiences designed to encourage sustainable recovery.

Our daily programme is formed of Twelve Step Recovery, psychoeducational CBT group work, OT groups and one to one sessions with goal directed rewarding activities. Also included is one to one therapy, key working sessions and third wave approaches which include yoga, mindfulness and meditation. Our Twelve Step Facilitation Therapy is based on the behavioural, spiritual, and cognitive principles of 12-step fellowships such as Alcoholics Anonymous (AA) and Narcotics Anonymous (NA). & Cocaine Anonymous (CA).

Residents receive an introduction to CBT and groupwork sessions using this model. One to one therapy is conducted at Calderglen, firstly assessing individuals with a CORE 34 in session, as well as conducting a clinical assessment on residents history and current presenting needs.

An eight-week self-esteem group based on Melanie Fennels model of low self-esteem (Fennell, 1999) is incorporated within our programme.
Residents are introduced to activity scheduling and the importance of these for recovery and relapse prevention

Decider skills are taught on a weekly basis in a group setting, two skills are taught or practiced per session. Decider Skills were developed by Michelle Ayres and Carol Vivyan. They are based on 32 Cognitive Behavioural Therapy (CBT) and Dialectical Behavioural Therapy (DBT) informed skills under four core skill sets of distress tolerance, mindfulness, emotional regulation and interpersonal effectiveness.

All staff and individuals at Calderglen attend in house training on a trauma informed approach.

3. Calderglen

We are fortunate in being able to provide a wide range of activities within our grounds and we have a newly built gymnasium with structured fitness and yoga sessions scheduled as part of our weekly programme. Our extensive private grounds offers opportunities in animal husbandry and gardening and horticulture, either in rekindling a past interest or developing a new skill. In addition there is the opportunity for walks in the woodland and fishing in the river Calder which runs past our front door.

We have an equipped woodwork room where we run woodcraft classes.
Residents are encouraged to work within the extensive kitchen and we have a community weekly Sunday Roast for residents and staff.
Residents attend external mutual aid at the local Recovery Hub. After 4 weeks of stay residents can have supervised off-site visits and family contact is encouraged.

Calderglen hosts an in-house mutual aid meeting every Thursday
All staff are qualified to appropriate diploma/degree/masters level relative to their role and responsibilities.

info@calderglenhouse.co.uk
Tel: 01698 823624

4. Castle Craig

Castle Craig Hospital, founded in 1988, is an established drug and alcohol rehab clinic, providing inpatient detox and treatment for people with addiction. Castle Craig is set amongst 50 acres of parkland allowing for extra privacy.

Treatment Model
Our model is abstinence-based, detox is medically managed, and our therapy programme is based on the 12-Step approach with Cognitive Behavioural Therapy and other evidence-based therapies. Treatment lasts from 6 – 12 weeks and longer in some cases.

Assessments
On admission, patients undergo a thorough biopsychosocial assessment.

Detoxification

- Castle Craig has a specialist detoxification unit, with a 24/7 medical centre and medical examination rooms. The bedrooms are private and ensuite to provide maximum comfort and privacy.
- Consultant Psychiatrist-led care
- Medically managed detoxification
- 24/7 medical team
- Rapid assessment and admission
- Medical assessments and blood tests
- Psychiatrist case reviews

Team

Our multi-disciplinary team consists of Consultant Psychiatrists, 24/7 doctors, a 24/7 nursing team, psychotherapists, recovery advocates and healthcare assistants. The team hold daily and weekly meetings managed within a clinical governance framework.

Psychiatrist-led Care

Our Consultant Psychiatrists are highly specialised in addiction treatment and complex dual diagnosis. Our Medical Directors supervise and review the medical and clinical care of patients and prescribe medications.

Psychotherapy

Our therapy programme is delivered by experienced, qualified therapists. Therapy addresses the underlying causes and contributing factors to the addiction. Patients receive daily psychoeducational lectures and workshops on the disease of addiction.

Each patient is assigned a focal therapist who conducts twice-weekly individual psychotherapy sessions. Group therapy is based on the 12 Step model and enhances self-awareness through the sharing of experiences with other group members. Patients are given assignments in line with 12-Step principles and CBT goal-orientated awareness.
DBT groups focus on emotional regulation and self-awareness techniques.

Trauma

Our addiction programme is trauma-informed and we provide a strategic combination of therapies including 1:1, group, DBT and EMDR to provide the best possible treatment for our patients.

4. Castle Craig

Family Therapy
We provide individual family therapy and a weekend-long Family Workshop.

Complementary Therapies
- Art Therapy
- Aromatherapy massage
- Equine (horse) therapy
- Mindfulness meditation
- Music and drumming therapy
- Hyperbaric oxygen therapy
- Creative writing therapy

Fitness
- Personal trainers
- Onsite gym
- Classes in pilates, aerobics, yoga and weights.
- Castle Craig has beautiful private 50-acre estate for jogging, guided hill-walking, football, rounders and volleyball.

Continuing Care
Our continuing care programme provides the following:
- Personalised aftercare plan
- 24 weeks of continuing care therapy online
- A Recovery chatbot app
- Alumni support group
- Family support group
- Case manager support
- Annual reunion at Castle Craig.

Governance
We are regulated by Healthcare Improvement Scotland and hold an international accreditation from ISO 9001. We place a strong emphasis on anonymity and confidentiality, including data protection. All of our patient records are stored electronically on a HIPAA- compliant system.

01721 722763
Info@castlehealth.eu
www.castlecraig.co.uk

5. Crossreach Residential Recovery Service

(formerly Rainbow House Glasgow)

CrossReach offer:

- Cognitive Behavioural Therapy (CBT)
- 12 step informed abstinence-based programme.
- Medically supervised detox when required.

Minimum of 12 weeks stay and can develop personalised programme length and content.

Crossreach runs structured CBT Groups focus on understand thoughts, feelings and behaviours to make life changes. Learning from groups is applied in key working sessions to develop a consistent approach. Groups will provide educational input, promote reflection and guide change. Person Centred groups focus on topics relevant to wellbeing and behaviour changes. One to one therapeutic sessions use motivational interviewing techniques.

People benefit from shared living and Peer to Peer Support from Peer Mentors who have been through the service, can share their experience and act as role models for residents. Therapeutic duties are tasks which allow everyone to take responsibility for the environment we are living in, this includes domestic duties, serving/preparing shared food and cleaning.

Our programme is delivered within two stages, with the final few weeks referred to as independent living where people can cook for themselves, prepare for leaving and take on a Head of House role within the service.

Residents have a minimum of 2 sessions with their keyworker per week and a review is held on a four weekly basis involving the people most important to you. At week eight the Aftercare and MoveOn plan is prioritised.
We run gender specific groups twice weekly.

Crossreach have a range of health and wellbeing activities include the inhouse gym, Bike for Good programme, Recovery Voices Creative expression, Creative Writing, Art and yoga sessions. The Yoga session include diaphragmatic and belly breathing through the session. Fortnightly Pranayama Breathing sessions focus on taming the nervous system which in turn helps reduce detached feelings and out of body anxiety experiences caused by trauma. These sessions are to give people a takeaway tool with to deal with anxiety and trauma. The benefits include reduced heart rate, feeling calmer quickly, having less confusion and being clearer and happier in mood and thoughts.

5. Crossreach Residential Recovery Service

(formerly Rainbow House Glasgow)

The National Trauma Training Programme is mandatory for all staff and volunteers. In house Trauma Skilled workshops consolidate and implement our learning and allow staff to develop action plans to improve our practice in relation to Trauma skills.

We run a support group based on CRAFT (Community Reinforcement Approach to Family Training). Three Recovery Workers are trained in this method. We prioritise family contact for people, in particular those who have children or care for others. We work with Social Work, Justice and Family Support services to enable residents to connect with people that are important to them as part of their recovery plans. Our support is informed by Families Affected by Drug and Alcohol Use in Scotland: "A Framework for Holistic Whole Family Approaches and Family Inclusive Practice."

- Mutual Aid meetings
- Stage A residents are escorted three times a week, Stage B residents can travel independently
- Use Drug and Alcohol Recovery Star Outcomes to measure and monitor progress and set goals
- In-house programme of CPD which includes mandatory courses on safeguarding, de-escalation, medication, Trauma and Health and Safety
- Senior Team are required to complete Management Modules that include leadership skills, finance, people development and recruitment
- Recovery Workers are trained to SVQ Level 3 or alternative CBT/Psychology/addiction studies qualification.
- Managers and Senior Recovery Workers have a minimum of SVQ 4 in Care Management.
- Weekly sessions with Psychologists available.

Our employee development officer ensures staff are qualified for registration purposes and volunteers are safe practitioners. They also support us to access qualifications and essential training, delivering some in house and outsourcing others.

Crossreach runs a pre admission preparation group delivered jointly with WeAreWithYou and our peer mentors. Across the country, we work jointly with local ADRS Teams and community services in preparing people for our residential programme.

5. Crossreach Residential Recovery Service

(formerly Rainbow House Glasgow)

We also have weekly aftercare groups co facilitated with WeAreWithYou and Crossreach offer volunteer training for people who have been through the programme. This is run through a ten week course and a relevant placement. We also link people into employability and training opportunities via Elevate and other partners.

We provide a Residential Week in the Scottish Highlands in Spring and Autumn. It's a week of fresh air, structured activity, peace. An opportunity for people to continue their recovery through nature.

0141 950 1772
crossreach.org.uk

6. Crossreach: Beechwood House Inverness

Cognitive Behavioural Therapy and 12 step informed abstinence-based programme. Choice of a 2 week and up to a 14 week programme is available.

- Structured Groups focus on understanding thoughts, feelings and behaviours and to make changes.
- Learning from groups is applied in key working sessions to develop a consistent approach.
- Groups will provide educational input, promote reflection and guide change. Person Centred groups focus on topics relevant to wellbeing and behaviour changes.
- One to one therapeutic sessions use motivational interviewing techniques.
- Therapeutic duties allow everyone to take responsibility for the environment we are living in, House skills includes domestic duties, sharing food and cleaning.
- Key working is 3 sessions per week on the longer programme. Reviews are planned for 4 weeks, 8 weeks and 13 weeks. The referrer, professionals involved in your care and family members can be invited to the reviews. An Exit Plan starts at week 11 of the 14 week programme.
- Use Drug and Alcohol Recovery Outcomes Star* to measure and monitor progress/regression plus to set goals for actions in chosen areas. Individual Recovery Plans are developed with the Service User. 3 STARs are completed while on the programme and are recorded on a database. The STAR can travel with you if accessing aftercare or CrossReach Supported Accommodation.
- Appointments with a Counsellor are available.
- After care for 12 weeks following demission from the service is available.
- Staff complete NHS Trauma Training mandatory and in house workshops to consolidate and implement learning.
- Residents encouraged to attend mutual aid meetings.
- Service Users can engage in social activities within the service, quiz nights, movies nights, which can focus on recovery.
- Engagement with partner agencies regarding employment opportunities- Apex Scotland and volunteering opportunities- Newstart Highland, Blythswood Care.
- CrossReach has in-house programme of Continuous Professional Development, which includes mandatory courses on Safeguarding, De-escalation, Medication, Trauma and Health and Safety. Senior Team are required to do Management Modules that include Leadership skills, Finance, People Development and Recruitment. External training is sourced from the Scottish Drug Forum and Highland Alcohol and Drug Partnership.

6. Crossreach: Beechwood House Inverness

- Employee Development Officer works alongside the service to ensure staff are qualified for registration purposes and volunteers are safe practitioners. They also support us to access qualifications and essential training, delivering some in house and outsourcing others.
- Support staff who facilitate key working sessions have, or work towards a SVQ 3 in Social Care.
- Senior Recovery Worker/Service Leader/Managing Co-ordinator hold or work towards a SVQ in Leadership and Management.
- Managing Co-ordinator & Service Leader hold Nursing qualification, SVQ4 Care Management and or SVQ in Leadership and Management.
- *Outcome Star measures Drug use, Alcohol use, Physical health, Meaningful use of time, Community, Emotional health, Accommodation, Money, Offending, Family and relationships. The Drug and Alcohol Star is underpinned by the Outcomes Star five-stage Journey of Change, which is closely linked to the Cycle of Change: Stuck, Accepting help, Believing, Learning, Self-reliance

01463 711335
crossreach.org.uk

7. Haven

The Haven Kilmacolm is a registered charity and housing support service which has been in existence for over 30 years working to provide support and accommodation for men from the age of 17 with drug and alcohol abuse issues to help them become free from their addiction. We are an abstinence programme and are able to accommodate up to 24 men at a time between four different stages. We are Christian faith based organisation and work with the vulnerable and often marginalized men in order to give them an opportunity to have a more positive future. We believe that every individual has value and worth and has the capacity to turn their life around with the right support.

We have a structured programme which lasts for 10 months, after which there is an option to stay on for a further 6 months when we provide further support in integrating back into society with options including further training, study or work experience.

Aims and objectives

- To provide a person-centered approach to supporting individuals who have, or have
- had, a drug and/or alcohol problem with a view to enabling that individual to occupy
- residential accommodation as a sole or main residence.
- To enable individuals who have, or have had, a drug and/or alcohol problem, to live a
- drug free, healthy and socially rewarding lifestyle in accordance with Christian
- principles.
- To alleviate the suffering and distress and advance the education of individuals.
- To promote the prevention of drug and/or alcohol related problems.
- By providing a holistic, needs-led support to our service users that is tailored to the
- individual, we provide help and support to ensure that each of our SU have the tools needed to overcome their addiction and its related issues, so they can fulfil their potential and live positive futures.

As a faith-based organisiation we believe that there is a spiritual element to recovery and believe that successful recovery must address this as well as the physical, psychological and social needs of each individual.

7. Haven

The programme
The Haven Kilmacolm believes it's more than just becoming drug free and takes a holistic approach to wellbeing – physical, spiritual and psychological. There is an initial induction period of one month for new service users during which time they are cared for and assisted through their detox if required. Following a successful induction, service users commence

Phase 1 of the programme
Progress from one phase to the next is based on an assessment of an individual's progress as measured against their agreed personal development plan (PDP). The PDP is used in support sessions with their Support Worker to plan their progress, providing a tool for discussion throughout the programme. During the programme our service users will work through group studies that teach biblical principles and practical applications for daily living and drug prevention. As well as the spiritual and the psychological support we have a fully kitted out Gym and a 4G 5 a'side pitch to help support and encourage our SUs to look after their physical wellbeing.

Team
- We have a fully trained staff team comprising of:
- Registered Manager – SVQ 4 Health and Social Care
- Management Team comprising of: 2 x Senior Recovery Practitioners SVQ level 4.
- 6 x Support Worker/Recovery Practitioners SVQ level 3
- Life Skills x 2 (IOSH trained and certified)
- Catering / Housekeeping x 2 (IOSH trained and certified)
- Finance/ Admin x 3
- Health and Safety/ Maintenance x 2
- All staff are trauma informed.

Six of our Support team have 'lived experience of Addiction and Recovery' with some also having Rehabilitated and come through the Haven program. Staff are taken through a full range of additional appropriate training including, Trauma Informed Care, CBT, Adult Protection, Working with Vulnerable Adults, ROSC, ACES and work with a person centred approach in supporting our service users. We have established an excellent reputation in that we address the needs of vulnerable young men who have quite literally nowhere else to turn having tried many other options to address their addictions. As a housing support service we are registered and governed by The Care Inspectorate.

7. Haven

Benefits of the programme include:

• Improvement of personal development while encouraging and promoting independence
• Development of life and employability skills as well as opportunity to retrain or gain new qualifications
• Service users are drug and alcohol free and increase their life expectancy
• Increased self-esteem, self-confidence and self-worth
• Restored family relationships – Families have son, husband, father back and relationships are stable
• Enhanced social development
• Supported physical, emotional and spiritual development
• Reduced likelihood of reoffending/relapsing

bryan@thehavenkilmacolm.com
Tel: 01505 872099

8. Hebrides Alpha

The Hebrides Alpha Project provides the only residential recovery facility in the Western Isles of Scotland. Serving a community of approximately 27k people from The Butt of Lewis to the small island of Vatersay. We have a six-bed unit which has four spaces for men and two for women. This facility is staffed by five full time support workers, and four relief staff.
The aim of the project is to provide a service for persons aged 18+, seeking to recover from alcohol, drug, related problems and to assist them to become confident, responsible, and valued members of the local community.

Hebrides Alpha Project is an abstinence based supported accommodation service. We run a program which has both in-house and external recovery meetings. Our residents are regularly signposted to whatever groups may be of benefit to them in their own circumstances. We aim to get all residents into some form of employment or volunteering while in the project and if this is not possible for whatever reason we have a Polycrub adjacent to the buildings which offers a space for growing and for taking part in various art projects.

Our aim is that we support people to grow in multiple life skills through recovery, so that they are ready to go to their own tenancy and have options for work.
Residents are encouraged to stay for six months and have the option of up to twelve months. It is in those timescales where we see a far higher percentage of people remaining abstinent. The program is then followed up with six months of aftercare for those who have completed the program. It is possible for detox to take place within the project under the supervision of the local drug and alcohol nurses.
The project has a strong working relationship with other services such as GPs, CPN's, homeless services, housing services, pharmacies to name but a few.
Currently all staff within the project have lived experience and are trained to SVQ3 for support workers and SVQ4 in leadership and management for the managers. All staff are trauma informed.

The Hebrides Alpha Project is faith based, and we recognise that some persons seeking recovery may not wish to consider this aspect of becoming well as being important or relevant to their own lives. They may even have alternative ideas in terms of faith. This to us is no barrier to anyone coming into the project. All are welcome regardless of personal persuasion.
We use several approaches as part of our therapeutic recovery program. Residents who are not in some form of employment or volunteering would receive three 1-1 sessions per week, following methods based on the principles of CBT and motivational interviewing. We also use 12 step, and the Life Recovery Bible.

8. Hebrides Alpha

Those who are working, or volunteering would have two of these sessions per week. There are two in-house group meetings every week which are compulsory, and also a range of external meetings in community which residents attend.
We recognise that there is not a one cap fits all solution to recovery, and that everyone is on their own journey. We therefore try to work with each resident based on their own strengths and particular needs.

01851 820830
manager@hebridesalpha.co.uk

9. Jericho House, Dundee (hereafter Jericho Dundee)

The Jericho Society offer a range of services across the UK to anyone who find themselves left vulnerable due to addiction, domestic violence or homelessness. Jericho Dundee is the Society's residential rehabilitation centre for the treatment of alcoholism and offers 12 self-contained studio flats for those wishing to undergo treatment for their addiction.

We offer Twelve Step Facilitation based on holistic, person-centred principles around the fundamental philosophy of the 12-step model of recovery as well as a range of therapeutic inputs, including CBT and Trauma counselling via weekly sessions.

Each individual is assessed in a needs-focused way and a holistic support plan is formulated to meet those needs, which are often complex. Each support plan is developed to address the causes and conditions of a resident's maladaptive behaviours including Trauma and Adverse Childhood Experiences, with a view to help develop new, healthy ways of managing thinking and feelings.

There are 9 members of staff including volunteers and our weekly programme consists of morning orientation meetings, AA attendance and integration, 3 key worker one-to-one sessions per week, gratitude tasks, sports activities, walking groups and events calendar. We have a drama therapy group facilitated by Dundee Repertory Theatre that culminates in a live show performed by the residents annually.

We have an education programme that focuses on literacy and numeracy, basic food and hygiene skills run by the HSCP / Local Authority learning needs organisation; a Family Programme based around a weekly meeting on a Tuesday evening; we facilitate counselling at the level appropriate to an individual's needs and readiness, have two certificate level counsellors on-site each week as well as a weekly clinic with a registered CPN for specialist support. All residents must be registered with Jericho's neighbouring medical practice.

We do not currently run an in-house detox programme but partner with Abbeycare for the provision of such services prior to the individual transferring to Dundee.

Jericho Dundee works in partnership with Substance Misuse Managers (bi-monthly), ADP's (across staff teams), MHSU group pathway development, HIS pathways, Street Soccer and local authorities.

9. Jericho Dundee

Our staff team incorporate Lived Experience of Addiction and Recovery with the majority also having rehabilitated in Jericho Houses. Staff are trained to minimum SVQ 3 level and go through mandatory ‘Seeking Safety’ model of addressing Trauma within addiction, they are trained in counselling skills with COSCA, BACP and practice CBT at L1 in Transactional Analysis, Person Centred Counselling, CBT (Ellis and Beck), Naloxone trained. Most support staff have trained in Suicide Prevention – ASIST and Administration of Medication - L2

Senior staff have SVQ4s in ‘Leadership and Management’ and ‘Health and Social Care’ and a range of additional therapeutic inputs including Motivational Interviewing, Child Protection, Working with Vulnerable Adults, ROSC, Co-dependency, Transactional Analysis and Person Centred Counselling.

All staff are PVG registered and there is annual training and review of safeguarding policies and procedures.

01382 223627
martin.jerichodundee@gmail.com

10. Jericho Houses – Greenock

The Jericho Society has two separate residential rehabilitation Houses in Greenock, an 18 bed Unit for men and a 10 bed unit for women.

The Jericho House programme has evolved over a period of over 30 years. This evolution has involved discernment, by staff, of what has been beneficial to service users and also what has not worked in previous abstinence based rehabilitation centers they have worked in. All staff are trained in accordance with Recovery Oriented Systems of Care and we are fully accountable to the ROSC framework. Assessments, Care Plans and Reviews encompass all 10 ROSC elements. Regulation is by The Care Inspectorate (CS2009198981)

Each individual is assessed in a needs focused way and a holistic support plan is formulated to meet their needs which are often complex. Each support plan has a common need to be met which is to address the causes and conditions of their addiction including Trauma and Adverse Childhood Experiences, with a view to adopting new healthy ways of managing thinking and feelings without resorting to drug use. In summary, through key-working and group work we assist in service users maturation process.

Activity plans incorporate a minimum of 6 hours per week of staff-facilitated groups and 2 hours of senior peer-facilitated groups. Initially on entry we encourage dependence on staff with a view to shifting through inter-dependence to independence prior to mutually planning their resettlement back into the community. Everyone is accountable for building an extensive abstinence based network of support in the community during their stay, accessed through mutual aid fellowships.

Minimum stay is for six months, extendable according to need. Average stay for successful Rehabilitation is between 7 and 11 months.
Although not affiliated with Narcotics Anonymous, service users are encouraged to attend meetings and also adopt the altruistic way of life available there, by working through a 12 Step Programme. Our abstinence based House programme has an emphasis on personal responsibility. The group work has a structured process encompassing ‘Problem – Solution – Action’.

Conflict resolution has priority as we believe that personal recovery is dependent on House unity. We also facilitate a weekly Family Support Group in Port Glasgow Town Hall, where our residents from both Houses, their families and any family members from the surrounding communities, attend together for support and to address any co-dependency issues.

10. Jericho Houses – Greenock

Jericho Society does not provide detox, however we have a partnership with Abbeycare, where individuals can go through detox at Abbeycare and transfer to Jericho for the remainder of treatment.

Both staff teams incorporate Lived Experience of Addiction and Recovery, with the majority also having Rehabilitated in Jericho Houses. Staff are trained to minimum SVQ 3 level and go through mandatory 'Seeking Safety' model of addressing Trauma, within addiction. Senior staff have SVQ4s in 'Leadership and Management' and 'Health and Social Care' Staff also have a full range of additional appropriate training including Motivational Interviewing, CBT, Child Protection, Working with Vulnerable Adults, ROSC, Co-dependency, Transactional Analysis and Person Centred Counselling.

In addition to the Core Staff teams, there is an EMDR Trauma specialist and CBT diploma level students run a 12 week CBT-informed course using evidence based techniques. They have an ongoing relationship with the Centre of Therapy in Glasgow to accept student placements.

All residents are assessed for numeracy, literacy and IT skills at the beginning of their stay and are expected to participate in a two hour weekly group to improve their respective skills if this is required, with SQA certificated courses.

Each resident's care plan is created collaboratively and in a person-centred way with flexibility to accommodate differing levels of literacy.

Jericho collects data around the 10 Recovery Outcome Measures[1]
Jericho has NO religious affiliation or programme content.
Rebuilding of Family Relationships is also a Core element of our programme.

Mens contact: 01475 741950
Womens contact: 01475 742383

[1] Alcohol and Drugs, Self-Care and Nutrition, Relationships, Physical Health and Wellbeing, Mental Health and Wellbeing, Occupying Time and Fulfilling Goals, Housing and Independent Living, Offending, Money Matters, Children

11. LEAP (Lothian & Edinburgh Abstinence Programme)

LEAP operates a therapeutic community model of treatment with the addition of other elements including cognitive behavioural therapy (CBT), 12-step facilitation, drama therapy and family therapy.

The programme, which is open to Lothian residents, has a highly-structured format where individuals who seek abstinence live together in an organised, supportive fashion which promotes change and increases the chance of long term recovery. There is a timetabled daily routine with individuals participating in group therapy, sharing meals, undertaking therapeutic tasks and offering support to fellow peers.

Patients have access to a broad range of practitioners in the multidisciplinary team, including specialist GPs, a psychiatrist, a psychologist, a pharmacist, mental health and general nurses, therapists, and an occupational therapist. There is a high level of lived experience in the team and the service employs six lived-experience peer workers as well as supporting 20 volunteer peer supporters who offer help/support to patients going through treatment. LEAP works in partnership with housing officers, housing support staff and education, training and employability specialist staff whom patients have access to/support from.

LEAP offers detox from alcohol, opioids, benzodiazepines, prescription medication and supports patients through cocaine and cannabis withdrawal. Complex detoxes are managed through the Ritson Inpatient Detoxification Unit where there are four beds dedicated for LEAP patients. Therapeutic and medical care plans are developed for each patient. A full medical assessment takes place on admission and a pharmacist reviews current prescribed medication. Functional assessments are conducted by a specialist occupational therapist.

The service sits within an integrated system of care which allows referrals to specialist health services to address unmet health needs including contraception, sexual health screening, dental care and blood borne virus and liver disease treatment. Naloxone distribution, overdose prevention and BBV testing are offered/delivered. There are five prescribers in the LEAP team.

LEAP is funded on NHS principles – free at point of delivery, so patients do not have to seek funding for rehab. Referrals can be made by any professional to the service. Patients attend information sessions prior to admission and once engaged in assessment will attend a three month rolling programme of preparation for rehab.

11. LEAP (Lothian & Edinburgh Abstinence Programme)

LEAP takes a 'whole family approach' offering group and individual support to family members. The service links patients into recovery community supports like lived experience recovery organisations and mutual aid in order to build recovery capital before, during and after treatment.

Complimentary practitioners deliver art therapy, massage, Tai Chi, and storytelling interventions. A drama session takes place once a week. LEAP have four staff certified (and supervised) to deliver CBT to current and aftercare patients and interventions focussed on stabilisation of trauma symptoms.

Two years of aftercare are offered. This includes several groups across the week including special groups for women and for those who have lapsed or relapsed. LEAP also offers CBT therapy for aftercare patients where appropriate. The service supports a recovery house for homeless men following treatment in partnership with City of Edinburgh council.
Most patients who complete treatment go onto engage with Encompass (Access to Industry) which provides pathways into training, education and employment.

Individual therapeutic work supports understanding of lasting impact of trauma and development of adaptive behaviours (phase 2 & 3). Psychology and psychiatry reviews are available and planning can be done to ensure ongoing support/therapy for trauma. All staff are participate in trauma training led by NHS Lothian specialist psychologists meeting the criteria for 'trauma skilled' practice.

The service follows the matched care model outlined by LPASS: Supporting documents - Substance misuse services: delivery of psychological interventions - gov.scot (www.gov.scot). Patients generally access tiers 1-2/3 during the treatment programme and tier 4 interventions are accessed during aftercare to ensure safety and stability is established. Tier 4 interventions are only provided by the clinical psychologist and specialist CBT therapists.

Abstinence is one of the goals set by LEAP patients, but improved quality of life, better mental health, stronger community connections, healthier relationships and robust physical health are also important goals. The service has had its patients one year outcomes published in a peer reviewed scientific journal evidencing the significant benefits associated with residential rehab and will soon publish four year outcomes.

0131 446 4400
leap.programme@nhslothian.scot.nhs.uk

12. Phoenix Futures Residential Service

Phoenix Futures' Scottish Residential Service offers a drug and alcohol-free environment with structured support for people 18 years of age or over who are looking to address their problematic drug and/or alcohol use and improve their mental health. Individual needs will be assessed on a one-to-one basis to ensure a full programme of support.

Phoenix have been successfully supporting people to achieve long term recovery for more than 25 years in Scotland and for over 50 years across the wider UK. We accept placements which are funded by a variety of means including those funded by the Local Authority and self-funded residential placements. We offer programmes of both 3 and 6 months in length based on the need of the individual. The spacious service provides for 31 residents. They are supported through the evidence-based Therapeutic Community approach to recovery. All of the people who use our residential services are part of the Therapeutic Community and we call them Community Members. The service is based in a modern, newly refurbished centre, with excellent links to the city and a wide range of off-site activities available through our network of partnerships.

All rooms at the Scottish Residential are single occupancy and have ensuite accessible shower wet rooms. The service also provides large social and therapeutic spaces for group therapeutic activities. Downstairs bedrooms and a lift to upstairs rooms ensure that the centre is accessible to people with limited mobility. There is excellent wheelchair access throughout the building.

The Therapeutic Community Model

The service offers a comprehensive treatment programme within a therapeutic community setting, providing a range of health and social care services to suit the individual needs of each Community Member including detoxification. The programme promotes change by developing self-worth and personal responsibility and challenging individual attitudes and behaviours. The therapeutic community is designed to encourage the development of life and social skills through engagement in daily work and activity routines. Additionally, structured group work embraces cognitive behavioural therapy methods as well as behavioural role play therapy. At the heart of the therapeutic community is peer support. Community Members help and nurture each other as they move through the programme. Working together and taking responsibility for the smooth running of the house provides a safe, supportive and structured environment where Community Members are able to look at the underlying reasons for their substance use and develop the skills necessary to move-on to live drug and alcohol-free lives.

12. Phoenix Futures Residential Service

Improving mental health and wellbeing

92% of people in residential treatment with Phoenix Futures have an emotional or mental health need and almost 70% had a diagnosed mental health condition. With this in mind our programme and its interventions have a key focus on improving mental health through specialist support and therapeutic activities. Those who come to Phoenix Futures have significant improvements in their mental health, reporting on average an improvement of 82%. Our support is continuously monitored and tailored to meet individual needs.

At Phoenix Futures we are conscious that both men and women have had an experience with trauma in their lives. All staff are trained in trauma-informed care to understand the widespread impact of these experiences, to recognise the signs of trauma and provide treatment which addresses the multi faceted needs of people working towards recovery. Interventions, policies and procedures are specifically designed to provide a safe, supportive environment for people accessing our services. Focus is also placed upon supporting staff wellbeing when delivering trauma-informed care to help them provide the highest standards of care for people entering treatment.

The highly trained and qualified multidisciplinary staff team ensure responsive support for individual need. The service benefits from a large Therapeutic and Care team offering one-to-one and group support, and experienced management team and on site registered nurse provision.

0141 332 0121
glasgow@phoenixfutures.org.uk

13. Harper House (Phoenix Futures Specialist Family Service)

The Specialist Family Service Scotland offers safe, structured support for the whole family to address their problematic drug and/or alcohol use, improve their mental health and quality of life.

We offer a unique, family-focused programme of interventions which benefit each member of the family and the family unit as a whole. Families stay together at the service meaning that parents remain the carers of their children at the same time as taking part in the programme. Alongside this, Specialist childcare staff provide support to children and the family. We are the only service of our kind across Scotland which welcomes dads as part of the programme as well as mums. In some circumstances we can welcome pregnant women and are able to utilise a wealth of local amenities to ensure they are able to fully engage in their programme whilst maintaining their relationship with community midwifery and health-visiting services. The spacious building, named Harper House is dual registered with the Care Inspectorate and provides for up to 20 families with children up to the age of 10.

Our flexible programmes at the Specialist Family Service Scotland are responsive to families needs, with two options usually lasting between either 12 or 26 weeks. The programme brings together three main elements; therapeutic interventions, parenting and childcare responsive to the individual needs of each family. The parenting element is underpinned by evidence based interventions which enhances the parents ability to manage their child's development. Our staff team are highly skilled and experienced with a passion for helping people create brighter futures for themselves, their families and communities.

The Therapeutic Community Model

The service offers a comprehensive treatment programme within a therapeutic community setting, providing a range of health and social care services to suit the individual needs of each Community Member including detoxification. The programme promotes change by developing self-worth and personal responsibility and challenging individual attitudes and behaviours. The therapeutic community is designed to encourage the development of life and social skills through engagement in daily work and activity routines. Additionally, structured group work embraces cognitive behavioural therapy methods as well as behavioural role play therapy. At the heart of the therapeutic community is peer support. Community Members help and nurture each other as they move through the programme. Working together and taking responsibility for the smooth running of the house provides a safe, supportive and structured environment where Community Members are able to look at the underlying reasons for their substance use and develop the skills necessary to move-on to live drug and alcohol-free lives

13. Harper House (Phoenix Futures Specialist Family Service)

Childcare and Parenting

The Specialist Family Service Scotland provides care based on a comprehensive assessment of child development and well-being, as well as making observations around parenting. Our Community Members benefit from direct access to our highly experienced Childcare team who utilise bespoke specialist techniques developed through our unique experience, alongside
accredited assessment and monitoring tools, in accordance with the Pre-birth to Three documents and Curriculum for Excellence. Our children's day care centre is Care Inspectorate registered. We work in partnership with parents, social workers, speech and language therapists and a range of other specialists. Our childcare centre has a ratio of three babies to one childcare worker under the age of 2, our registration allows us to care for up to 35 children of pre-school age with a maximum of 20 of those children under the age of 2. The setting is stimulating and interesting for the children so that they are able to gain as much as they can from each day. Each child has their own Keyworker who will keep parents fully informed of their children's progress through regular review meetings.

All parents are supported to enhance their parenting skills through PuP (Parents Under Pressure). The developments made by those staying with us are monitored through the use of the Family Star tool, which is designed to set realistic, measurable goals and identify progress in key areas. The PuP Programme allows parents the opportunity to explore and identify areas of improvement in their parenting, establish rules and boundaries and enhance skills in managing children's behaviour. A dedicated health visitor will also visit the site as required, with more regular visits for admissions with new-born babies.

Improving mental health and wellbeing

92% of people in residential treatment with Phoenix Futures have an emotional or mental health need and almost 70% had a diagnosed mental health condition. With this in mind our programme and its interventions have a key focus on improving mental health through specialist support and therapeutic activities. This has meant that those who come to Phoenix Futures have significant improvements in their mental health, reporting on average an improvement of 82%. Our support is continuously monitored and tailored to meet individual needs. This helps us to ensure a placement with Phoenix Futures enables people to improve their well-being and get the support they need.

specialist.family@phoenixfutures.org.uk
01294588761

13. Harper House (Phoenix Futures Specialist Family Service)

At Phoenix Futures we are conscious that both men and women have had an experience with trauma in their lives. All staff are trained in trauma-informed care to understand the widespread impact of these experiences, to recognise the signs of trauma and provide treatment which addresses the multi faceted needs of people working towards recovery. Interventions, policies and procedures are specifically designed to provide a safe, supportive environment for people accessing our services. Focus is also placed upon supporting staff wellbeing when delivering trauma-informed care to help them provide the highest standards of care for people entering treatment.

The highly trained and qualified multidisciplinary staff team ensure responsive support for individual need. The service benefits from a large Therapeutic and Care team offering one-to-one and group support, childcare centre team supporting all families, an experienced management team and on site registered nurse provision.

14. River Garden Auchencruive

- 3 year programme
- Social enterprise
- Stage 1, 0 – 3 months volunteer lives and learns about and contributes to live at RGA
- Stage 2, 3 – 12 months develop work focus, contributions to life in RGA. Actively develop and maintain recovery from addiction.
- Stage 3 12-18 months become ready for full time work and prep for life outside of RGA
- Stage 4 Employee 18 – 36 months integration to wider community
- All times are flexible and dependent on physical and mental wellbeing, capacity and progress of individuals.

RGA does not have a therapeutic programme like many of the other providers. Residents learn to establish healthy relationships with other community members/residents and gradually builds up the level of their contribution to the work programme and running of the community and social enterprise.

14. River Garden Auchencruive

RGA does not have a therapeutic programme like many of the other providers. Residents learn to establish healthy relationships with other community members/residents and gradually builds up the level of their contribution to the work programme and running of the community and social enterprise. The key idea is based on the principles of learning new skills, in a supportive, healthy recovery oriented environment. Therefore there are not psychosocial interventions to link with LPASS matrix. RGA has 1:1 discussions with residents between two and four times per week alongside monthly reviews during the course of the three year programme. We use Recovery Star and WHO assessments.

Stage One goals:

1. The volunteer lives at, learns about and contributes to life at River Garden Auchincruive for 3 months before being fully adopted as a member of the community.
2. The volunteer develops a sustainable support system for their own recovery from addiction.

Stage One values:

- focus on connection, respect, open mindset, hard work, responsibility, willingness to change, non violence, gratitude, acceptance

Stage 2 Goals

- To develop their work focus and specific contribution to River Garden's enterprises.
- To develop their contributions to community life in River Garden
- To actively develop and maintain their recovery from addiction

Stage two values:

- Patience, sustainability, trust, team work, accountability, resilience, honesty, value of 'enough'

Stage 3 Goals:

- To become ready for full time work and making a life for themselves outside of RGA

Stage 3 Values:

- Integrity, empathy, kindness and compassion.

Stage 4 Goals:

- Has made plans for life after the completion of the three year programme (housing
- Start integrating in the wider community
- Develop tools and supports that are sufficient for them personally to maintain their recovery over the long term

01292 521164
enquiries@ifdas.net

15. Turning Point Scotland

(Crisis Unit and Stabilisation Service, Glasgow, Moving On, Turnaround and 218)

Turning Point Scotland currently delivers five residential services which all offer support within a psychologically informed environment. The aim of these services is stabilisation although we can deliver abstinence-focused services and have in the past. All five of the services of provide evidence based psychosocial treatment and interventions based on LPASS guidance. Four of the services provide integrated health and social care models which include detox, stabilisation on MAT (Medically Assisted Treatment), clinical support, and housing support, these services operate in line with the MAT Standards. The fifth service operates a community based housing support model. All five services have staff with lived experience of alcohol and other drugs and three of them have paid Peer Support Practitioners. All services connect service users to local recovery communities and TPS Connects which is led by volunteers with lived experience.

The principles of Citizenship inform all TPS services. Citizenship is founded on the work of Michael Rowe of Yale University, and adapted by TPS to meet the needs of Scotland. It is based on the key themes of identity, a valued social role and a sense of belonging. In particular, this allows us to consider the different identities people take on e.g. within a family or through their recovery journey; the different roles which people play e.g. as someone being supported, a volunteer or a peer worker; and importantly belonging to a community and overcoming the stigma they might encounter.

Turning Point Scotland takes a holistic approach to promoting the recovery, self-determination and inclusion of people accessing services. We do this by focusing on their strengths and the valued contributions they can make to their communities. The approach acknowledges the stigma attached to the reasons that bring people to services for support: citizenship is strengthened by developing a positive identity and through the experience of belonging and value to communities and society. This introduces residents to their rights and responsibilities; it assists them to find meaning and purpose in their lives out with old ‘using’ social networks.

- All services provide CBT, Motivational Interviewing, Mindfulness and Trauma Informed Care.
- TPS collect data on planned and unplanned discharges.
- All staff qualified to a minimum of SVQ3 or are Registered Nurses
- Managers SVQ 4/5 Leadership
- All staff SSSE registered
- TPS has in house training and CPD provision (Step in, step on, step up)

16. Turning Point (Crisis service)

(Crisis Unit and Stabilisation Service, Glasgow, Moving On, Turnaround and 218)

The crisis service offers a person-centred flexible service to some of Glasgow's most vulnerable individual. All of whom present with a high level of risk in terms of their alcohol and drug use and other factors in their life. The vast majority have a history of trauma. It provides a period of up to 3 weeks residential stay to alleviate crisis situations whilst accessing 1-1 key work sessions and evidence based group work programmes.
It also provides a drop-in with 24/7 Injecting Equipment Provision, WAND (wound care, assessment of injecting risk, naloxone and dry spot BBV testing). A mobile IEP service also operates each evening in Glasgow city centre. This is a commissioned service.

- 24/7 support from both social care and nursing staff and regular support from
- medical officer
- 20 beds open to citizens of Glasgow City, accepts self-referrals
- Up to 21-day stay
- Works with over 18 years male, females and couples
- Low threshold, direct access residential stay
- Primary focus to alleviate crisis
- Medication assisted detoxification from alcohol, heroin, benzodiazepines and stimulants
- Optimising Medically Assisted Treatment (MAT)
- Works with individuals whose alcohol and drug use can't be managed in the community
- A comprehensive assessment by Social Care, Nursing and Medical staff, outlining key health and social care interventions needed to address risk and alleviate crisis
- Specialist harm reduction including delivery of WAND
- Supports injecting drug users with detox, woundcare and safer injecting advice
- Educational groupwork program
- Onsite introduction to mutual aid, recovery communities etc
- 86% of discharges are planned, with 20% moving to other residential service such as Stabilisation, Moving On (see below) or an abstinence based service.

0141 420 6969
Email info@turningpointscotland.com

17. Turning Point (Stabilisation Service)

(Crisis Unit and Stabilisation Service, Glasgow, Moving On, Turnaround and 218)

Operational since 2019
The Stabilisation service is for individuals who are not in urgent crisis but who do need residential support for their alcohol and or other drug use. The service is for people presenting with complex needs, including co-morbid physical health problems but who are not currently in mental health crisis, admissions are planned via Care Managers and Multi-disciplinary Teams. This is a commissioned service.

- 24/7 support from both social care and nursing staff and regular support from
- medical officer
- 18 beds open to citizens of Glasgow
- 6-8 week stay
- Works with over 18 years male, and females and couples
- Access via Care Managers
- Primary focus to stabilise alcohol and drug use and promote wellbeing
- Medication assisted detoxification from alcohol, heroin, benzodiazepines and stimulants
- Optimising Medically Assisted Treatment (MAT)
- Works with individuals whose alcohol and drug use can't be managed in the community
- Programme offers structured days with mixture of staff and peer-led groups, daily physical activities
- Support to engage with mutual aid
- Support to engage with and experience recovery communities
- Partnership with recovery hubs
- Partnerships with prehab services
- TPS 'buddy' system (peer support) which encourages progressive increase in responsibility and support for others.
- 91% of discharges are planned.

0141 948 0092
info@turningpointscotland.com

18. Turning Point (Turnaround)

(Crisis Unit and Stabilisation Service, Glasgow, Moving On, Turnaround and 218)

The Turnaround service delivers focussed services that address the complex and interrelated issues of offending behaviour and problematic use of alcohol and other drugs. The service was redesigned in 2018 to include a Throughcare model. Prior to admission to the residential programme, individuals undertake a programme of preparatory work facilitated by the Throughcare team.

Individuals are assessed for immediate risk and immediate need. A comprehensive assessment builds on the issues and needs identified through the referral process and helps staff understand the full nature of challenges affecting an individual's offending behaviour and the support required.

The residential programme is a 6-8 week stay, and is very structured with individuals expected to engage in all aspects of daily activities, groups and one to one sessions. Following the residential programme, the Throughcare team offer additional support within the community for a period of up to 12 weeks to facilitate links with community based support.

- Support from both social care and nursing staff and regular support from
- medical officer
- 10 beds open to 14 local authorities including Angus, Argyll & Bute, Clackmannanshire, Dumfries & Galloway, East Ayrshire, East Dunbartonshire, East Renfrewshire, Fife, Inverclyde, North Ayrshire, Renfrewshire, South Ayrshire, South Lanarkshire and West Dunbartonshire.
- 6-8 week stay
- Works with males over 18 years'
- Funded through a Section 10 grant from SG Justice Division, with additional funding from SG Health
- Medication assisted detoxification from alcohol, heroin, benzodiazepines and stimulants
- Addressing offending behaviour
- Justice referrals
- Programme offers structured days with mixture of staff and peer-led groups, daily physical activities, including 12-step groups
- 80% of discharges are planned.

01505 810 800
Turnaround@turningpointscotland.com

19. Turning Point (218)

(Crisis Unit and Stabilisation Service, Glasgow, Moving On, Turnaround and 218)

The 218 service provides an alternative to custody for women in the justice system to support them. Many of the women who use the service will have a range of complex needs such as problematic alcohol or other drug use, mental health, physical health, trauma, chronic low self-esteem and self-confidence as well as social isolation.

- Support from both social care and nursing staff and regular support from medical officer
- In addition, 218 offers residents the support of a Clinical Psychologist providing 1:1 and group psychological therapy
- 12 beds open to citizens of Glasgow

22 week programme consisting of:

- 2 week preparatory work, although women may also be admitted straight from court when bail is opposed
- 16 residential stay
- 2-4 weeks aftercare, all women are connected with Tomorrows Woman when they leave, this is a seamless process with minimum overlap.
- Works with females over 18 years
- Medication assisted detoxification from alcohol, heroin, benzodiazepines and stimulants
- Addressing offending behaviour
- Programme offers structured days with mixture of staff and peer-led groups, daily physical activities
- Support to engage with mutual aid
- Support to engage with and experience recovery communities
- Partnership with recovery hubs
- TPS 'buddy' system (peer support) which encourages progressive increase in responsibility and support for others.
- Virtually all discharges are planned.

0141 331 6200
218@turningpointscotland.com

20. Turning Point (Moving On)

(Crisis Unit and Stabilisation Service, Glasgow, Moving On, Turnaround and 218)

Operational since 2007
Our Turning Point Scotland Glasgow Housing Support service provides temporary accommodation for individuals who have taken initial steps to address their alcohol and drug use and need housing support. Many individuals come directly from stabilisation service. Some from the Crisis service, or Criminal Justice.

Since 2007, we have proudly partnered with Glasgow Homeless Partnership and Glasgow Addiction Service to ensure that everybody has access to a tenancy. We believe that if any of us have a home it can provide a sense of belonging, increase feelings of self-worth and make a person feel part of their community.

Over the last 13 years, many people have been supported to find something in their life which is meaningful to them. This can be through voluntary work, education or employment. The emphasis is always on what the individual wishes to have in their life, at a time when they are ready for it.

- 24/7 Support from social care staff
- 10 flats open to citizens of Glasgow
- 12 – 24 weeks
- Works with males, females and couples over 18 years
- Commissioned Service
- 60% of discharges are planned.

0141 946 5870
GlasgowHousingSupport@turningpointscotland.com

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