

ARBD Southside Response Housing Support Service

2/2 23 Tormusk Road Glasgow G45 OBH

Telephone: 0141 634 5171

Type of inspection:

Unannounced

Completed on:

12 November 2025

Service provided by:

Scottish Action For Mental Health

Service provider number:

SP2003000180

Service no:

CS2006136878



Inspection report

About the service

ARBD Southside Response provides housing support and care at home for people living with alcohol-related brain damage (ARBD) across the city. The provider is Scottish Action for Mental Health.

The service currently provides structured support to 27 people living with ARBD to help them maintain their tenancies and become more socially included in their communities. Referrals are made through the ARBD Glasgow team and GCC/HSCP commissioning team.

ARBD Southside Response follows a harm reduction approach working towards abstinence. Its stated aims are:

- To provide support within individuals own homes to high quality to enable the individual to remain in their own home.
- To provide support to individuals to develop the necessary practical, social and emotional coping and communication skills in order to sustain and enjoy life.
- To deliver support in a kind, compassionate and respectful way.

About the inspection

This was an unannounced follow up inspection to review progress towards a requirement made at a previous inspection. This inspection took place on 12 November, 2025 and was carried out by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we reviewed documents including personal plans and feedback from people using the service.

We also reviewed training records, and spoke with staff.

Key messages

- Scheduled mentoring and protected time with senior staff had supported staff to develop personal planning skills.
- Personal planning had improved and reflected regular meetings with people to review outcomes and goals they wished to achieve.
- Plans were being routinely audited and effective action plans directed staff to ensure plans were current and of meaning to people.
- A revised person centred planning approach across the organisation was being developed to make plans accessible, meaningful and reflect peoples progress.

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 is our care and support planned?	4 - Good
- 1		

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

How well is our care and support planned?

4 - Good

At the last inspection we made a requirement relating to personal planning.

The provider had reviewed personal planning and implemented a more robust approach to ensuring plans were current and reflected the support delivered and outcomes achieved.

A whole team approach included development discussions and opportunities to reflect on existing practises. Areas for improvement were identified and regular mentoring sessions with senior staff were scheduled to help develop personal planning skills. This ensured a more consistent approach to planning and support delivery. Staff confirmed they felt valued and more invested by being part of this process.

Plans were routinely audited and areas for development were actioned and followed up by senior staff. This ensured plans were current and reflected people's needs, preferences and wishes. The service planned to develop self and peer audits to involve staff and develop their skills and accountability further.

The provider is developing their approach to personal planning and anticipate delivering a more therapeutic and meaningful process which will have people using the service at the centre .

This requirement was met and the evaluation reviewed from adequate to good.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 06 October 2025, the provider must ensure service users' health, safety and social needs are evidenced through effective personal planning.

To do this the provider must at a minimum ensure:

- a) Personal plans are consistently evaluated, reflect risk reduction measures and support people to achieve their personal outcomes in accordance with the organisations recovery framework.
- b) Training and mentoring opportunities are available to support staff to develop personal planning skills. This is to comply with Regulation 5 (1)(b) of Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, SSI 2011/210.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices" (HSCS 1.15) and "Any treatment or intervention that I experience is safe and effective" (HSCS 1.24).

This requirement was made on 10 June 2025.

Action taken on previous requirement

The provider had reviewed personal planning and implemented a more robust approach to ensuring plans were current and reflected the support delivered and outcomes achieved.

A whole team approach included development discussions and opportunities to reflect on existing practises. Areas for improvement were identified and regular mentoring sessions with senior staff were scheduled to help develop personal planning skills. This ensured a more consistent approach to planning and support delivery. Staff confirmed they felt valued and more invested by being part of this process. Plans were routinely audited and areas for development were actioned and followed up by senior staff. This ensured plans were current and reflected people's needs, preferences and wishes. The service planned to develop self and peer audits to involve staff and develop their skills and accountability further. The provider is developing their approach to personal planning and anticipate delivering a more therapeutic and meaningful process which will have people using the service at the centre.

Met - within timescales

Complaints

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

Inspection report

Detailed evaluations

How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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