

## Supported Living Services Glasgow South Care Home Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
14 November 2025

**Service provided by:**  
The Richmond Fellowship Scotland  
Limited

**Service provider number:**  
SP2004006282

**Service no:**  
CS2003000937

## About the service

Supported Living Services Glasgow South is a care home service for people with mental health problems. It is provided by the The Richmond Fellowship Scotland, a charitable organisation that works to support people who experience mental health problems and other forms of social exclusion.

The accommodation consists of 10 self-contained one bedroom flats within a tenement building. The staff office is situated within the same building. The aims of the service include: "We work with people to help them get to where they want to be in life, to where they envisage the happiest and most content they can be. We work to support people to build the skills and knowledge to get there".

Staff support is available 24 hours a day with staff sleepover support during the night. The staff team is comprised of a registered manager, team leader and support practitioners. At the time of inspection there were 10 people living in the home.

## About the inspection

This was an unannounced inspection which took place on 12 and 13 November 2025. The inspection was carried out by one inspector from the Care Inspectorate.

Feedback was provided to the registered manager and team leader on 14 November 2025.

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

In making our evaluations of the service we:

- Spoke with four people using the service.
- Spoke with one family representative.
- Spoke with 10 staff and management.
- Reviewed Care Inspectorate questionnaires returned by 10 residents, 11 staff and five external professionals.
- Reviewed documents.

## Key messages

- People were supported with sensitivity and compassion by staff who knew them very well.
- People were encouraged and supported to engage in a wide range of meaningful social activities within and outwith the service.
- Complex health and social needs were effectively addressed by the service itself or in collaboration with appropriate external resources.
- People said that staff supported them to be as independent as possible.
- Staff and management were highly person-centred, flexible and responsive to people's needs and wishes.
- The cohesive, committed and reflective staff team was led by engaged and supportive management.

## From this inspection we evaluated this service as:

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

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

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

## How well do we support people's wellbeing?

## 5 - Very Good

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

Staff at all levels were compassionate, sensitive to people's needs, responsive and highly person-centred. One staff member said they adopted ten different personalities every day because they interacted with each individual differently, according to their needs and wishes. An external professional said, "The staff team provide a very supportive environment and are able to develop warm and inclusive relationships with service users." It was a highly person-centred service which meant people felt valued.

People were supported to participate in a range of enjoyable activities of their choice within the local community and on daytrips further afield. The service had supported one person to gradually increase the amount of time they spent away from the service, building to a week's holiday. This had had a really positive effect on the person who wished to go on more extended holidays. Staff organised a monthly social event called the hub at a local venue which was open to all Richmond Fellowship service users. This was highly popular and included activities like karaoke, music, arts and crafts and a recent Halloween event attended by 60 people and staff. An external professional said of the staff team, "Each person I have met is striving to improve individual wellbeing and happiness." People were supported to take part in different individual and social activities of benefit to their wellbeing.

People were supported through a process of becoming more independent in activities of daily living such as managing their finances, cooking, food shopping, laundry and maintaining their flat. Staff also gave people a break from cooking in their own flat every Tuesday, when they would prepare a meal for everyone. Having achieved their outcome of greater independence, one person was about to move on to more independent living. All of the residents said that staff helped them to do things for themselves. Staff had an approach of minimising the support they offered to encourage people towards greater independence. They gently challenged and encouraged people to think about the choices they were making, and how appropriate they were for them in the moment and for their future. One person said, "I like everything about my support. Staff try really hard to support me even when I am causing trouble." Staff helped people through difficult experiences to develop their own way of thinking for a future where they may not need the same level of support. This empowered people towards greater independence.

We observed that staff were immediately responsive to individual's expressed needs or wishes, and support was offered flexibly. Health needs were addressed across a range of issues. Management advocated for people with very complex health needs. This included working to secure extended periods of assessment for people to clearly establish their needs and the future support they would require to improve their health and wellbeing. One external professional said, "The team is trauma-informed, compassionate and have successfully helped vulnerable service users access vital health and social supports."

People can expect to have their healthcare needs met by being supported to have the right medication at the right time. Through audit processes management had identified inconsistencies in the recording of reasons for medication being given or not and were working with staff to remedy this. The service should continue to work to improve this element of medication administration recording, in order that people continue to have the right medication at the right time.

People experienced sensitive support which improved their sense of wellbeing. An external professional said, "The service has provided care and stability to a person who is extremely vulnerable. Their wellbeing has been markedly improved by living at the service."

### How good is our staff team?

### 5 - Very Good

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

Every resident said that they felt staff knew them well. One person said, "I love it. The staff are top bananas." People could have trust in their support from staff who knew them well.

Staff spoke about being part of a team that had changed over time and at this point was the best that it had ever been. There was a supportive and collaborative culture within the staff team. One staff member said, "We have very supportive managers here and a very good team." Another said, "It can be intense so we need the good teamwork we have." Staff said that managers encouraged them to take a step back from what could be a 'mentally draining' job and colleagues would step in at those times when they needed to recharge. The service should continue to offer and encourage both formal and more informal supports for the staff team. One professional said, "The staff have a difficult complement of residents, and they ensure individual care needs are met through potentially challenging situations." The team worked in collaboration to ensure the most suitable support was available for people when they needed it.

An external professional said, "The staff are warm, empathetic and knowledgeable practitioners who take a pro-active and co-ordinated approach to support." This approach was clear on observation of a handover meeting. Staff spoke knowledgeably about people and asked clarifying questions of benefit to people's upcoming support.

Staff reported that there had been periods of lower staffing but that for some months now the team was established and working well together. Rotas indicated appropriate staffing levels were in place. This meant people would experience a consistency of support from staff who knew them well.

Team meetings and supervisions took place regularly and staff reported these were helpful and an opportunity for open discussion. Comments from staff included, "Any issues are met by management with constructive feedback and thorough supervision. This is done timely, sensitively and confidentially. I feel very secure and respected by the management team." Supervision notes indicated a supportive and constructive process. They contained forward looking and developmental elements for practice which contributed to improvements in people's experience of support.

Training records indicated high levels of compliance with the organisation's internal and ongoing training programme. Additional workshops and training opportunities had focussed either on getting to know individuals better or on specific health conditions. Staff felt better equipped to support people effectively as a consequence, and would welcome more opportunities for development along these lines. Management should continue to seek opportunities for training and staff development to inform and refine people's support.

Management had a process in place for when someone new wished to move in to the service. This was designed to identify that the person would be able to be supported successfully to achieve the outcomes they wished. Management should consider refining this process to make explicit the interaction between the needs of existing residents, the potential needs of a new person, and staff capacity. This would provide the best possible opportunity for integrating a new person, and their unique needs, within the service's continuing capability to meet the needs of established residents.

## How good is our setting?

## 5 - Very Good

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

The home was located in a Glasgow tenement block with easy access to local shops and transport links. Each resident had their own flat and was able to come and go freely. The communal close area was clean and tidy. Signage in the ground floor entry area displayed information of use to residents and was regularly updated. A blackboard was used to display events or to allow for comments to be made by staff or residents. Staff had put these in place to encourage residents to feel the close area was as much theirs as their individual flat was, promoting a sense of community.

Outside space was available in the back close. However people had their own keys and could leave the building independently or with responsive individual support. This meant that they had ready access to outside spaces at times they wished. This promoted independence and a sense of empowerment.

Individual flats were organised according to people's wishes and were highly personalised. Basic furnishings were provided by the service but individuals could purchase their own furniture according to their own tastes. People had objects of significance to them on display. Family said that any repairs or replacements were organised quickly and efficiently. We saw a person being supported to sign up to new TV package that they had wanted. Staff encouraged people to have ownership over their own space. People felt a sense of belonging.

Residents had their own laundry facilities in their flat. Staff supported people in maintaining their flat and encouraged maximum independence in activities of daily living like cooking and cleaning. PPE was readily available for staff when needed for these tasks. In combination with staff practice, the environment promoted moves towards greater independence.

There was no communal room available of a size to accommodate residents or staff meetings or for the monthly hub social events. The service made use of a local venue for these activities. The service also made use of the communal close area for events like celebrating St Andrews day and the back close for barbecues. Management and staff had worked to overcome the limitations of the environment to offer meaningful communal activities for people.

Certification was in place for regular inspection of utilities including gas and electricity. Environmental checks were regularly undertaken. Fire checks and drills were also undertaken regularly. Residents could feel safe in their own home.

**How well is our care and support planned?****5 - Very Good**

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

Personal plans were highly detailed and person-centred. The comprehensive information included within them gave a rounded picture of a person's strengths, their likes and dislikes, their history and personality. Outcomes a person wished to achieve were clearly laid out and details of how a person preferred to be supported enabled sensitive support towards achieving their goals. An external professional said, "Practitioners are flexible and creative in their care planning, which enables service users to make meaningful progress towards their personal outcomes."

'Hospital passports' provided the necessary and sufficient details about a person so that they could be sensitively supported by individuals in other settings who did not know them well.

Personal plans included informative step by step instructions indicating the minimum support needed to encourage people's involvement and development. They stated ways in which staff could encourage or reassure people. A section on what a person's good days and bad days felt like to them again offered very useful information for staff. It meant that they were able to understand how a person might be feeling and offer support accordingly. Further helpful sections included information on what the person felt were the best times and the not so good times for them to be making decisions. In combination this information provided the resource for staff to support a person sensitively and compassionately to enable good outcomes.

Risk assessments highlighted potential triggers and the interventions most likely to prevent or minimise harm. Detailed histories were included to enable staff to fully appreciate and understand the context for a risk assessment to be in place. A person's capacity to understand risks and the consequences of actions was also present. Considered and thoughtful risk assessments kept people as safe as possible.

Also kept within plans were records of medical and other appointments. Each of these appointment records noted the relevant page of a person's running notes which meant any background and discussion could be easily referenced by staff to support someone's health needs. Running notes themselves evidenced sensitive interactions with people. They recorded reassurances offered and any re-direction. They also noted when staff had sensitively challenged people at the right time and in the right way for them as an individual so that they could persist in working towards their personal goals and outcomes.

Reviews took place regularly with the involvement of the person. All residents agreed that staff helped them plan for their future. Progress towards goals was helpfully categorised from 'Achieved' through 'lots of progress' or 'some progress' to 'no change' so that progress could be easily understood. Reviews were very person-centred with clear goals established to achieve the outcomes people were looking for in their future.

Staff had developed scrapbooks with people to record significant events in their time in the service. These offered opportunities for a person to reflect on their achievements and highlight their successes. Management may wish to consider a parallel process for the team to celebrate the service's achievements in supporting people to achieve the outcomes they wished. Reflecting on what has worked well, and what could have been even better, would offer the opportunity to appreciate and capture the very good practice in the service for the benefit of both existing and future residents.

## Complaints

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

## Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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