

Hoddam ARBD Service Care Home Service

Flat 2/1 47 Hoddam Avenue Castlemilk Glasgow G45 OEY

Telephone: 01416 348 506

Type of inspection: Unannounced

Completed on: 20 February 2025

Service provided by: Scottish Action For Mental Health Service provider number: SP2003000180

Service no: CS2006136881



About the service

Hoddam ARBD Service provides a dispersed care home service for up to eight people living with alcoholrelated brain damage (ARBD). Scottish Action for Mental Health provides the service, and it operates a harm reduction approach, working towards abstinence.

The service aims to promote living skills and coping strategies designed to support people with a range of complex needs to live more independently if possible.

The service consists of eight flats within the Castlemilk area of Glasgow, in close proximity of the office where staff are based.

There were six people living at the service at the time of inspection.

About the inspection

This was an unannounced inspection which took place on 19 and 20 February, 2025. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, 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 and one of their family members
- spoke with four staff and management
- observed practice and daily life
- reviewed documents including support plans, improvement plans and service user forum meeting minutes
- prior to the inspection we issued questionnaires and received four from people using the service.
- we also spoke with two visiting professionals

Key messages

Staff worked closely with health and social care partners to support people's health, wellbeing and recovery.

People benefitted from positive relationships with a motivated staff team.

The service promoted independence and risk enablement.

Plans were in place to review service delivery to be aligned with current ARBD best practice.

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?	4 - Good
How good is our staff team?	4 - Good

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

How well do we support people's wellbeing? 4 - Good

We made an evaluation of good for this key question, as there were important strengths which outweighed areas for improvement.

Quality Indicator 1.3 People's health and wellbeing benefits from their care and support

The service was home to people with alcohol related issues including Alcohol Related Brain Damage (ARBD). The service aimed to help people to live their lives as fully and independently as possible.

People lived in self-contained flats dispersed within the community and were supported to manage their physical and mental health needs by a committed staff team. Staff had a good understanding of each person's day to day needs and preferences which helped ensure people received appropriate support and achieve positive outcomes.

The support available had contributed to people feeling secure and better able to manage daily living. People felt safe in the service, several credited it with saving their lives. We heard positive comments. These included; "It has been life changing for me", "look at me now... I love where I am" and "the staff are priceless".

People told us staff were approachable, and they felt very well supported by the staff team. "Staff are out of this world" said one resident. This ensured they felt comfortable, valued and had confidence in the team.

A family member confirmed that living in the home had been a positive experience for their loved one, commenting; "my dad wouldn't be alive if it wasn't for the service" and "I now have peace of mind as he is safe. Before it was a constant worry".

Support covered aspects of people's daily living including maintaining their accommodation, budgeting, cooking and support to attend appointments or go shopping as well as emotional support.

People confirmed support was flexible and staff would adjust support times to fit in with their plans and appointments. This ensured support planning was person led.

People were supported to remain abstinent from alcohol or to work with staff to reduce the harm of continued drinking. Some also experienced significant health issues, and the service had good links with external health professionals to ensure people received appropriate support to manage this well.

Most people were referred to the service following an assessment by the ARBD team. Regular meetings with an allocated keyworker offered protected time to explore and agree on personal goals.

Personal plans help to direct staff about people's support needs and their choices and wishes. The organisations electronic support planning system had been updated, and training had been delivered to staff to support this. Risk and vulnerability assessments shaped personal planning and staff worked collaboratively with people to determine how best to keep themselves safe/well and achieve identified goals.

However, the service had experienced recent staffing challenges resulting in some inconsistencies within peoples plans and recording. The management team planned to review all personal planning following staffing changes.

The service had a participation champion who led on developing opportunities for people to be involved in social activities, gathering feedback regarding peoples interests and in accessing community resources. Feedback had been gathered from people reviewing their individual personal plan and through questionnaires looking at ways the service could be improved. The management team planned to further develop participation methods to ensure feedback informed service improvement planning.

People who use an ARBD recovery service should expect to receive support based on current best practice and have access to a wide range of creative tools and strategies designed specific to their diagnosis.

A previous area for improvement has been repeated. (See area for improvement)

Areas for improvement

1. To ensure that people can be confident that their personal plan and support is right for them, the manager should ensure;

- that personal plans and ARBD recovery tools used to support people should be aligned to the aims and objectives of the service

- that staff receive further training and learning opportunities to develop specific knowledge/skills to support people living with ARBD in their recovery

This will ensure care and support is consistent with the Health and Social Care Standards 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).

How good is our staff team?

We made an evaluation of good for this key question, as there were important strengths which outweighed areas for improvement.

4 - Good

Quality Indicator 3.3 Staffing arrangements are right and staff work well together

People should have confidence that the people who support them are trained, competent and skilled. Staff were motivated and committed to supporting people to achieve identified outcomes. New staff in post were recruited following best practice guidance. Although there were sufficient staff to meet people's needs, recent staffing challenges meant an increased use of agency and bank staff. Staffing arrangements ensured scheduled support took place and support was adjusted according to people's needs and preferences. This demonstrated a flexible, person-led approach.

Staff confirmed that senior staff were visible and routinely available to support their practice and development. They found their approach supportive and "nurturing". Staff demonstrated sound values and a person-centred approach.

Staff had access to a mixture of on-line and face to face training opportunities. Team meetings and 1:1 performance/development sessions ensured staff had opportunities to identify training needs, reflect on wellbeing and to share ideas. This meant they felt listened to and valued.

The management team planned to evaluate knowledge and practice and specifically how it aligned with ARBD best practice. This will help inform a service training/development plan to ensure staff had the skills and knowledge to meet the current and future needs of people accessing the service. (See area for improvement within key question 1)

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

To ensure that people can be confident that their personal plan and support is right for them, the manager should ensure;

- that personal plans and ARBD recovery tools used to support people should be aligned to the aims and objectives of the service

- that staff receive further training and learning opportunities to develop specific knowledge/skills to support people living with ARBD in their recovery

This will ensure care and support is consistent with the Health and Social Care Standards 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).

This area for improvement was made on 14 July 2022.

Action taken since then

The service planned to review practices and support planning to ensure it aligned with current best practice. This area for improvement has been repeated.

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت در خواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.