

Care service inspection report

GAMH Community Support Services

Support Service Care at Home

St Andrews By The Green
33 Turnbull Street
Glasgow
G1 5PR

Inspected by: Drew Conlon

Type of inspection: Unannounced

Inspection completed on: 4 October 2011



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Service provided by:

Glasgow Association for Mental Health

Service provider number:

SP2003003727

Care service number:

CS2008181251

Contact details for the inspector who inspected this service:

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Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of Care and Support	5	Very Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership		N/A

What the service does well

The service provides flexible support plans and frequently has success in re-engaging service users with their communities.

What the service could do better

The service is looking to improve the way feedback from service users is distributed.

What the service has done since the last inspection

The service has made good use of focus groups.

Conclusion

This is a service highly valued by its service users and delivered by a committed and enthusiastic staff group.

Who did this inspection

Drew Conlon

Lay assessor: N/A.

1 About the service we inspected

Glasgow Association for Mental Health (GAMH) is a voluntary organisation which provides a range of support services to adults affected by mental health problems. In its Community Support Services, support is provided on an outreach basis to adults with, or recovering from, mental health problems. There are programmes of support which can be in an individual's own home or in a community resource setting. Group support opportunities and befriending services are also available. The service operates from a number of bases in the community and at the organisation's head office.

Before 1st April 2001, the service was registered with the Care Commission. On this date the new scrutiny body, Social Care and Social Work Improvement Scotland (SCSWIS) took over the work of the Care Commission, including the registration of services. This means that from 1st April 2011, the service continued its registration under the new body, SCSWIS.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 5 - Very Good

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - N/A

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.scswis.com or by calling us on 0845 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

The evidence for this report was gathered by Drew Conlon, Inspector. He visited the service over two days on Monday 3rd October from 9.30am to 4.00pm and on Tuesday 4th October from 9.30am to 3.45pm. During the visit, he spoke with the operations manager, the equalities manager, a service manager, a senior project worker and two project workers. He also spoke with five service users and three carers. He also looked at a wide range of policies and procedures and other documentation including:

- Support plans
- Annual report
- Participation strategy
- Records of focus groups.
- Appraisal policy and procedure.
- Team meeting minutes
- Training records.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

Every year all care services must complete a self-assessment. We check to make sure that this assessment is accurate. We received a fully completed assessment document from this service provider. We were satisfied with the way they had completed this and the relevant information they had given us for each of the headings that we grade them under.

The service provider identified what they did well, some areas for development and any changes they had planned. The service provider told us how people who used the service had taken part in the self-assessment process.

Taking the views of people using the care service into account

We spoke to five service users and received completed questionnaires from another ten people. The views of service users were favourable. 'The music group has brought a lot of joy and laughter to service users and staff'. 'I am hoping to start night classes soon'. 'This service is a life line to me'.

Taking carers' views into account

We spoke to three carers. The views of carers were favourable. 'Carers have made a DVD to help understanding of their situation'. 'My self-esteem was very low before GAMH came along'. 'All the staff are very easy to speak to'.

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Overall grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

GAMH seeks to involve service users at all levels of the organisation. There is Member's Council that brings staff and service users together in a less formal way than an AGM.

The service has a participation strategy. This relates to GAMH core values. The strategy defines different levels of participation and sets out planned outcomes for the strategy.

The local service centre have forums for service users and carers. The provider has recently appointed a Community Participation Co-ordinator, whose job is to support the participation strategy and the forums.

There was evidence from support plans that service users were involved in the making and the review of these plans.

The service aims for service user and carer involvement to begin at the start of the referral process and be at the heart of their activities. There was confirmation from interviews with staff, service users and carers that this aim is met.

Areas for improvement

The service is going to pilot new assessment methods for carers which will enable them to express more fully and clearly, their support needs.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We ensure that service user's health and wellbeing needs are met.

Service strengths

There was evidence from support plans and discussion with service users that the service links correctly with health and other helping professions.

The service seeks to focus on the recovery rather than the illness and sees this recovery as a very active process. There are a number of initiatives to carry this out and to support recovery and promote health and well being.

With another mental health service provider there is the Walking with Friends initiative. This promotes walks within Glasgow and the surrounding countryside.

The Roots for Recovery initiative gives service users access to gardening facilities in a local authority parks facility.

The Food for Recovery Festival encourages ideas and activities related to food and recovery.

The service has conducted an evaluation over 2010-2011, of how the service has impacted on service users well being. Draft results indicate many service users report very significant improvements in areas such as self-confidence, sense of recovery and development of new skills.

Areas for improvement

The service is going to review its referral and publicity processes to ensure services are fully welcoming to people from diverse backgrounds.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service strengths

The service has been using focus groups as a method for ensuring both participation and feedback. Records of meetings held in August and September were seen. The meetings were attended by both service users and carers.

The service involves service users in staff recruitment processes.

The service has a specific structure at HQ and locally, to support carers and seek their views.

Carers interviewed thought the service very much took their views into account. They said this helped them in their role. Carers have been involved in making a DVD called 'I'm Here Too' to highlight their importance.

Areas for improvement

The service wants to ensure that all its information provision to service users and the wider community is both fully accessible and fully acceptable.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths

The service has a staff appraisal policy and procedure.

There was evidence from team meeting minutes of staff members feeding back to colleagues on training events attended.

Strength Based Practice and Recovery training is compulsory for all staff members.

Staff members were able to describe good motivation coming from feeling appreciated and supported. Service users interviewed were clear that staff had the skills and training to meet service user's needs.

Staff spoke with commitment and enthusiasm about their jobs in the service.

Training records were seen during this inspection and staff spoke positively of the training opportunities they received.

Areas for improvement

The service has training planned for staff in the personalisation agenda.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership - NOT ASSESSED

4 Other information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

N/A.

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in SCSWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Management and Leadership - Not Assessed	

6 Inspection and grading history

Date	Type	Gradings
14 Apr 2010	Announced	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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