

Inspection report

GAMH Community Support Services Support Service

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

Inspected by:
(Care Commission officer)

Drew Conlon

Type of inspection:

Announced

Inspection completed on:

14 April 2010

	Page Number
Summary of this inspection report	3
Section 1: Introduction	
About the Care Commission	5
About the National Care Standards	6
What is inspection?	7
How we decided what to inspect	9
What is grading?	10
About the service we inspected?	11
How we inspected this service	12
Section 2: The inspection	14
Section 3: Other information	
Other Information	21
Summary of Grades	22
Terms we use in our reports and what they mean	23
How you can use this report	25
People who use care services, their relatives and carers	25

Service provided by:
Glasgow Association for Mental Health

Service provider number:
SP2003003727

Care service number:
CS2008181251

Contact details for the Care Commission officer who inspected this service:

Drew Conlon
Telephone 0141 843 4230
Email enquiries@carecommission.com

Easy read summary of this inspection report

There is a six point grading scale. Each of the Quality Themes we inspected, is graded using the following scale:

We can choose from six grades:



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  **5** Very Good

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

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

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 many opportunities for service users involvement could be consolidated into an action plan with outcomes and timescales.

What the service has done since the last inspection

This is the first inspection for this service.

Conclusion

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

Who did this inspection

Lead Care Commission Officer

Drew Conlon

Other Care Commission Officers

n/a

Lay Assessor

n/a

Please read all of this report so that you can understand the full findings of this inspection.

About the Care Commission

We were set up in April 2002 to regulate and improve care services in Scotland.

Regulation involves:

- registering new services
- inspecting services
- investigating complaints
- taking enforcement action, when necessary, to improve care services.

We regulate around 15,000 services each year. Many are childminders, children's daycare services such as nurseries, and care home services. We regulate many other kinds of services, ranging from nurse agencies to independent healthcare such as hospices and private hospitals.

We regulate services for the very young right through to those for the very old. Our work can, therefore, affect the lives of most people in Scotland.

All our work is about improving the quality of care services.

We produce thousands of inspection reports every year; all are published on our website: www.carecommission.com. Reports include any complaints we investigate and improvements that we ask services to make.

The "Care services" area of our website also:

- allows you to search for information, such as reports, about the services we regulate
- has information for the people and organisations who provide care services
- has guidance on looking for and using care services in Scotland.

You can also get in touch with us if you would like more detailed information.

About the National Care Standards

The National Care Standards (NCS) set out the standards that people who use care services in Scotland should expect. The aim is to make sure that you receive the same high quality of service no matter where you live.

Different types of service have different National Care Standards. When we inspect a care service we take into account the National Care Standards that the service should provide.

The Scottish Government publishes copies of the National Care Standards online at: www.scotland.gov.uk

You can get printed copies free from:

Booksource
50 Cambuslang Road
Cambuslang Investment Park
Glasgow
G32 8NB
Tel: 0845 370 0067
Fax: 0845 370 0068
Email: scottishgovernment@booksource.net

What is inspection?

Our inspectors, known as Care Commission Officers (CCOs), check care services regularly to make sure that they are meeting the needs of the people in their care.

One of the ways we check on services is to carry out inspections. We may turn up without telling the service's staff in advance. This is so we can see how good the care is on a normal day. We inspect some types of services more often than others.

When we inspect a service, typically we:

- talk to people who use the service, their carers and families, staff and managers
- talk to individuals and groups
- have a good look around and check what quality of care is being provided
- look at the activities happening on the day
- examine things like records and files, if we need to
- find out if people get choices, such as food, choosing a key worker and controlling their own spending money.

We also use lay assessors during some inspections. These are volunteers who have used care services or have helped to care for someone who has used care services.

We write out an inspection report after gathering the information. The report describes how things are and whether anything needs to change.

Our work must reflect the following laws and guidelines:

- the Regulation of Care (Scotland) Act 2001
- regulations made under this Act
- the National Care Standards, which set out standards of care that people should be able to expect to receive from a care service.

This means that when we register or inspect a service we make sure it meets the requirements of the 2001 Act. We also take into account the National Care Standards that apply to it.

If we find a service is not meeting these standards, the 2001 Act gives us powers that require the service to improve.

Recommendations, requirements and complaints

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a requirement or recommendation.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.
- A requirement is a statement which sets out what is required of a care service to comply with the Act and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Commission.

Complaints: We have a complaints procedure for dealing with any complaint about a registered care service (or about us). Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints. Depending on how complex it is, a complaint may be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

How we decided what to inspect

Why we have different levels of inspection

We target our inspections. This means we spend less time with services we are satisfied are working hard to provide consistently high standards of care. We call these low-intensity inspections. Services where there is more concern receive more intense inspections. We call these medium or high intensity inspections.

How we decide the level of inspection

When planning an inspection, our inspectors, or Care Commission Officers (CCOs) carefully assess how intensively each service needs to be inspected. They do this by considering issues such as:

- complaints
- changes to how the service provides care
- any notifications the service has given us, such as the absence of a manager
- what action the service has taken in response to requirements we have made.

The CCO will also consider how the service responded to situations and issues: for example how it deals with complaints, or notifies us about incidents such as the death of someone using the service.

Our inspections take account of:

- areas of care that we are particularly interested in (these are called Inspection Focus Areas)
- the National Care Standards that the service should be providing
- recommendations and requirements that we made in earlier inspections
- any complaints and other regulatory activity, such as enforcement actions we have taken to improve the service.

What is grading?

We grade each service under Quality Themes which for most services are:

- **Quality of Care and Support:** how the service meets the needs of each individual in its care
- **Quality of Environment:** the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?);
- **Quality of Staffing:** the quality of the care staff, including their qualifications and training
- **Quality of Management and Leadership:** how the service is managed and how it develops to meet the needs of the people it cares for
- **Quality of Information:** this is how the service looks after information and manages record keeping safely.

Each of the Quality Themes has a number of Quality Statements in it, which we grade.

We grade each heading as follows:

6	5	4	3	2	1
excellent	very good	good	adequate	weak	unsatisfactory

We do not give one overall grade.

How grading works.

Services assess themselves using guidance that we given them. Our inspectors take this into account when they inspect and grade the service. We have the final say on grading.

The Quality Themes for this service type are explained in section 2 The Inspection.

About the service we inspected

Glasgow Association for Mental Health (GAMH) is a voluntary service which provides a range of support services to adults who suffer from 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 five bases with one in each of the five Community Health Partnerships. The service was first registered with the Care Commission in March 2009.

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

Quality of Care and Support	5 - Very Good
Quality of Staffing	5 - Very Good
Quality of Management and Leadership	5 - Very Good

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

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

You can use the "Care services" area of our website (www.carecommission.com) to find the most up-to-date grades for this service.

How we inspected this service

What level of inspection did we make this service

In this service we carried out a medium intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

What activities did we undertake during the inspection

The evidence for this report was gathered by Drew Conlon, Care Commission Officer. He visited the service over two days on Monday 12th April from 9:30am to 4:30pm and on Tuesday the 13th April from 9:45am to 5:00pm. Feedback on the results of the inspection was given on the morning of Wednesday 14th April.

During the inspection we spoke with the chief executive of GAMH, the operations manager, the learning and development manager and the equalities manager. We also spoke with two project team leaders, two senior project workers and two project workers. During the course of the inspection, meetings took place in a number of settings with over a dozen service users.

We also looked at a wide range of policies and procedures and other related documentation including:

Support plans
Participation strategy
Training records and plans
Caseload management guidance
Staff induction pack
Consultation records
Adult protection policy and procedure.

Inspection Focus Areas (IFAs)

Each year we identify an area, or areas, we want to focus on during our inspections. We still inspect all the normal areas of a care service; these are extra checks we make for a specific reason.

For 2010/11 we will focus on:

- Quality assurance for care at home and combined care at home and housing support services.

You can find out more about these from our website www.carecommission.com.

Fire safety issues

The Care Commission no longer reports on matters of fire safety as part of its regulatory function. Where significant fire safety issues become apparent, we will alert the relevant

Fire and Rescue service to their existence in order that it may act as it considers appropriate. Care service providers can find more information about their legal responsibilities in this area at: www.infoscotland.com/firelaw

The annual return

We use annual returns (ARs) to:

- make sure we have up-to-date, accurate information about care services; and
- decide how we will inspect services.

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care (Scotland) Act 2001, Section 25(1). These forms must be returned to us between 6 January and 15 February.

Annual Return Received

Yes - Electronic

Comments on Self Assessment

The self-assessment was fully completed.

Taking the views of people using the care service into account

The views of service users were favourable. 'I feel that my life has improved so much'. 'I am very happy with the quality of the support'. 'I would have had a lot more problems without their support'.

Taking carers' views into account

Carers contributed to a group discussion at one of the local offices. They expressed satisfaction with the service.

Quality Theme 1: Quality of Care and Support

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

Support planning takes place in the context of a partnership assessment and review process.

There was evidence of service user's signatures on documents such as service agreements and service plans.

There was evidence from support plans of service user's involvement in reviews.

The service has a Participation Strategy which outlines the approach to involving service users and carers in the different levels of the service.

Twenty three service users attended an event in October 2009 around the Care Commission Quality Themes.

Strength Based Practice and Recovery is a key part of the core skills training for staff. A further key component of core training is Wellness and Recovery Action Planning (WRAP).

Areas for Improvement

The service is planning to review its Participation Strategy.

GAMH has sought to strengthen links between its Board and the wider membership. A Member's Council has recently been established which includes a number of present or previous service users. GAMH wants to consolidate this structure.

Service users and staff spoke in away which reflected a person centred approach to support. This reflects the general management approach to the service. The service would benefit from being more explicit in going beyond workload management and outlining the principles and philosophy behind support provision.

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

The support plans had notes of the names of general practitioners, community psychiatric nurses and other relevant professionals.

During the course of the inspection, the Adult Protection policy and procedure was viewed.

The service has a wide range of well being and activity initiatives , many directed and progressed by service users themselves. These initiatives include 'Branching Out', 'Move More' and 'A Walk in the Park'. These initiatives are regularly discussed by groups of service users at Members Forums.

The intellectual health of service users is promoted by initiatives such as the History Group. This Group explores different aspects of the history of the East End of Glasgow.

There is a Men's Health and Well Being Group. An evaluation meeting was held on the 4th February and noted the success of the group in combating social isolation.

A number of service users had participated ,with support, in Mental Health and Well Being training.

Areas for Improvement

The service aims to continually improve its partnership assessment and review processes.

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

There was evidence from support plans that service users are asked if their support is being carried out by staff in a way that suits service user's preferences.

The service uses a wide range of methods including forums and focus groups to ascertain the views of service users and carers on service quality and direction.

Arrangements are made to ensure that BME perspectives are taken into account.

The service actively involves service users in staff recruitment procedures. There was evidence from staff interview in this inspection, that service users were present on interview panels.

The service has employed an Inclusive Practice Development Worker to promote strategies of engagement and inclusion.

The service supports carers in commenting on government and other strategies aimed at carers.

Areas for Improvement

The service has been asking service users if they would like to be involved in staff training. A launch event was held on 23rd February.

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

GAMH has a Supervision and Appraisal policy. This defines 'appraisal' and outlines different types and formats for supervision.

GAMH has promoted extensive training to assist staff to gain registrable qualifications.

The service has a list of competencies, including their definition, for those who support people with mental health problems.

Over 90% of staff have an SVQ or other suitable qualification. A rolling programme is taking this training forward.

There is a wide range of training available to staff in mental health matters. This includes Cognitive Improvement and Applied Suicide Intervention Skills (ASIST).

Areas for Improvement

The service aims to develop more inclusive training opportunities for staff, service users and carers.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 4: Quality of Management and Leadership

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 management and leadership of the service.

Service Strengths

The service has a Consultation event later this month with service users and carers. This is to allow exploration about the general implications for individuals and the organisation of government plans for self-directed support (SDS).

A service user is attending an international conference in Ireland on Mental Health Leadership.

The system of Members Forums allows service users to comment generally on GAMH services. We attended a Forum during this inspection. This Forum is chaired by a service user on a rotating basis and there was lively discussion about the service and service activities.

Areas for Improvement

There are clearly many avenues for service users to become involved. However, the Participation Strategy would be improved if linked to a series of objectives and a written action plan with timescales. This is the subject of Recommendation 1.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

1

Recommendations

1.

The provider should link the Participation Strategy to a written action plan with objectives and timescales. National Care Standards: Support Services: Care Standard Number 12 - Expressing your views.

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service Strengths

Service users interviewed confirmed that they knew the members of staff who would be providing their support. They also confirmed that staff were aware of the content of care plans. Service users confirmed suitable arrangements were in place to cover staff sickness or annual leave.

Managers confirm support plans are being carried out through staff supervision, support plan reviews and the monitoring of support hours.

The service provides information and training on the Scottish Social Services Council (SSSC), Codes of Practice.

The service regularly seeks to explore improved methods of quality assurance. it is presently exploring the Social Return on Investment (SROI) system.

Areas for Improvement

The service is exploring the possibility of a new post which will promote the growth and sustainability of forums, councils and other participative mechanisms.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Other Information

Complaints

This is the first inspection of this service.

Enforcements

This is the first inspection of this service.

Additional Information

Not applicable.

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 the Care Commission 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).

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 - 5 - Very Good	
Statement 1	5 - Very Good
Statement 4	5 - Very Good

Inspection and Grading History

Terms we use in our report and what they mean

Action Plan - When we inspect a service, or investigate a complaint and the inspection report highlights an area for improvement; either through recommendations or requirements, the action plan sets out the actions the service will take in response.

Best practice statements/guidelines - This describes practices that have been shown to work best and to be achievable in specific areas of care. They are intended to guide practice and promote a consistent and cohesive approach to care.

Care Service - A service that provides care and is registered with us.

Complaints - We have a complaints procedure for dealing with any complaint about a registered care service or about us. Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints which can have more than one outcome. Depending on how complex the complaint is, the outcomes can be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

Enforcement - To protect people who use care services, the Regulation of Care (Scotland) Act 2001 gives the Care Commission powers to enforce the law. This means we can vary or impose new conditions of registration, which may restrict how a service operates. We can also serve an improvement notice on a service provider to make them improve their service within a set timescale. If they do not make these improvements we could issue a cancellation notice and cancel their registration.

Disclosure Scotland- Disclosure Scotland provides an accurate and responsive disclosure service to enhance security, public safety and protect the vulnerable in society. There are three types or levels of disclosure (i.e. criminal record check) available from Disclosure Scotland; basic, standard and enhanced. An enhanced check is required for people whose work regularly involves caring for, training, supervising or being in sole charge of children or adults at risk; or to register for child minding, day care and to act as foster parents or carers.

Participation - This describes processes that allow individuals and groups to develop and agree programmes, policy and procedures.

Personal Plan - This is a plan of how support and care will be provided. The plan is agreed between the person using the service (or their representative, or both of them) and the service provider. It is sometimes called a care plan mostly by local authorities or health boards when they commission care for people.

How you can use this report

Our inspection reports give care services detailed information about what they are doing well and not so well. We want them to use our reports to improve the services they provide if they need to.

Care services should share our inspection reports with the people who use their service, their families and carers. They can do this in many ways, for example by discussing with them what they plan to do next or by making sure our report is easily available.

People who use care services, their relatives and carers

We encourage you to read this report and hope that you find the information helpful when making a decision on whether or not to use the care service we have inspected. If you, or a family member or friend, are already using a care service, it is important that you know we have inspected that service and what we found. You may find it helpful to read previous inspection reports about his service.

The Care Commission

We use the information we gather from all our inspections to report to Scottish Ministers on how well Scotland's care services are performing. This information helps us to influence important changes they may make about how care services are provided.

Reader Information

This inspection report is published by the Care Commission. It is for use by the general public. You can get more copies of this report and others by downloading it from our website www.carecommission.com or by telephoning 0845 603 0890.

Translations and alternative formats

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

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

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

هذه بایتسد یم وونابز رگید روا رولکش رگید رپ شرازگ تعاشا هی

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

ی.ر.خ.أ تاغلبو تاقيسينتت بلطلا دن ع رفاوتم روشنملا اذه.

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.

Telephone: 0845 603 0890

Email: enquiries@carecommission.com

Web: www.carecommission.com

Improving care in Scotland

Inspection report

Glasgow Association for Mental Health Housing Support Service

St. Andrews by The Green
33 Turnbull Street
Glasgow
G1 5PR
0141 552 5592

Inspected by: Paul MacKenzie
(Care Commission officer)

Type of inspection: Announced

Inspection completed on: 8 June 2010

	Page Number
Summary of this inspection report	3
Section 1: Introduction	
About the Care Commission	5
About the National Care Standards	6
What is inspection?	7
How we decided what to inspect	9
What is grading?	10
About the service we inspected?	11
How we inspected this service	12
Section 2: The inspection	15
Section 3: Other information	
Other Information	22
Summary of Grades	23
Terms we use in our reports and what they mean	24
How you can use this report	26
People who use care services, their relatives and carers	26

Service provided by:
Glasgow Association for Mental Health

Service provider number:
SP2003003727

Care service number:
CS2004074647

Contact details for the Care Commission officer who inspected this service:

Paul MacKenzie
Telephone 0141 843 4230
Email enquiries@carecommission.com

Easy read summary of this inspection report

There is a six point grading scale. Each of the Quality Themes we inspected, is graded using the following scale:

We can choose from six grades:



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

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

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

What the service does well

The service does very well in supporting service users in terms of their health and wellbeing. The provider is very strong on service user participation and involves service users at provider level, and service level.

What the service could do better

The service should better evidence the support they provide to individuals, regarding their vocational, educational and social needs.

What the service has done since the last inspection

The service has developed their methods of service user participation even further since the last inspection. The service has continued to build upon the strengths identified at the last inspection.

Conclusion

The service being provided is person centred in nature, and service users are heavily involved in the running of and development of the service and the provider. The service focuses on service users' strengths and what they can achieve in their lives, with the right support.

Who did this inspection

Lead Care Commission Officer

Paul MacKenzie

Other Care Commission Officers

n/a

Lay Assessor

n/a

Please read all of this report so that you can understand the full findings of this inspection.

About the Care Commission

We were set up in April 2002 to regulate and improve care services in Scotland.

Regulation involves:

- registering new services
- inspecting services
- investigating complaints
- taking enforcement action, when necessary, to improve care services.

We regulate around 15,000 services each year. Many are childminders, children's daycare services such as nurseries, and care home services. We regulate many other kinds of services, ranging from nurse agencies to independent healthcare such as hospices and private hospitals.

We regulate services for the very young right through to those for the very old. Our work can, therefore, affect the lives of most people in Scotland.

All our work is about improving the quality of care services.

We produce thousands of inspection reports every year; all are published on our website: www.carecommission.com. Reports include any complaints we investigate and improvements that we ask services to make.

The "Care services" area of our website also:

- allows you to search for information, such as reports, about the services we regulate
- has information for the people and organisations who provide care services
- has guidance on looking for and using care services in Scotland.

You can also get in touch with us if you would like more detailed information.

About the National Care Standards

The National Care Standards (NCS) set out the standards that people who use care services in Scotland should expect. The aim is to make sure that you receive the same high quality of service no matter where you live.

Different types of service have different National Care Standards. When we inspect a care service we take into account the National Care Standards that the service should provide.

The Scottish Government publishes copies of the National Care Standards online at: www.scotland.gov.uk

You can get printed copies free from:

Booksource
50 Cambuslang Road
Cambuslang Investment Park
Glasgow
G32 8NB
Tel: 0845 370 0067
Fax: 0845 370 0068
Email: scottishgovernment@booksource.net

What is inspection?

Our inspectors, known as Care Commission Officers (CCOs), check care services regularly to make sure that they are meeting the needs of the people in their care.

One of the ways we check on services is to carry out inspections. We may turn up without telling the service's staff in advance. This is so we can see how good the care is on a normal day. We inspect some types of services more often than others.

When we inspect a service, typically we:

- talk to people who use the service, their carers and families, staff and managers
- talk to individuals and groups
- have a good look around and check what quality of care is being provided
- look at the activities happening on the day
- examine things like records and files, if we need to
- find out if people get choices, such as food, choosing a key worker and controlling their own spending money.

We also use lay assessors during some inspections. These are volunteers who have used care services or have helped to care for someone who has used care services.

We write out an inspection report after gathering the information. The report describes how things are and whether anything needs to change.

Our work must reflect the following laws and guidelines:

- the Regulation of Care (Scotland) Act 2001
- regulations made under this Act
- the National Care Standards, which set out standards of care that people should be able to expect to receive from a care service.

This means that when we register or inspect a service we make sure it meets the requirements of the 2001 Act. We also take into account the National Care Standards that apply to it.

If we find a service is not meeting these standards, the 2001 Act gives us powers that require the service to improve.

Recommendations, requirements and complaints

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a requirement or recommendation.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.
- A requirement is a statement which sets out what is required of a care service to comply with the Act and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Commission.

Complaints: We have a complaints procedure for dealing with any complaint about a registered care service (or about us). Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints. Depending on how complex it is, a complaint may be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

How we decided what to inspect

Why we have different levels of inspection

We target our inspections. This means we spend less time with services we are satisfied are working hard to provide consistently high standards of care. We call these low-intensity inspections. Services where there is more concern receive more intense inspections. We call these medium or high intensity inspections.

How we decide the level of inspection

When planning an inspection, our inspectors, or Care Commission Officers (CCOs) carefully assess how intensively each service needs to be inspected. They do this by considering issues such as:

- complaints
- changes to how the service provides care
- any notifications the service has given us, such as the absence of a manager
- what action the service has taken in response to requirements we have made.

The CCO will also consider how the service responded to situations and issues: for example how it deals with complaints, or notifies us about incidents such as the death of someone using the service.

Our inspections take account of:

- areas of care that we are particularly interested in (these are called Inspection Focus Areas)
- the National Care Standards that the service should be providing
- recommendations and requirements that we made in earlier inspections
- any complaints and other regulatory activity, such as enforcement actions we have taken to improve the service.

What is grading?

We grade each service under Quality Themes which for most services are:

- **Quality of Care and Support:** how the service meets the needs of each individual in its care
- **Quality of Environment:** the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?);
- **Quality of Staffing:** the quality of the care staff, including their qualifications and training
- **Quality of Management and Leadership:** how the service is managed and how it develops to meet the needs of the people it cares for
- **Quality of Information:** this is how the service looks after information and manages record keeping safely.

Each of the Quality Themes has a number of Quality Statements in it, which we grade.

We grade each heading as follows:

6	5	4	3	2	1
excellent	very good	good	adequate	weak	unsatisfactory

We do not give one overall grade.

How grading works.

Services assess themselves using guidance that we given them. Our inspectors take this into account when they inspect and grade the service. We have the final say on grading.

The Quality Themes for this service type are explained in section 2 The Inspection.

About the service we inspected

Glasgow Association for Mental Health (GAMH) is a voluntary service which provides a range of support services to adults who suffer from mental health problems in the Glasgow area.

The service, which was registered with the Care Commission in September 2004, provides housing support and has service centres in the North, East, West and South of the city. In addition, the Supported Living Service, Resettlement Project and Scotia Outreach Project also form part of this service.

The aim of the service is to provide support to individuals and their families in promoting their ability to maintain independence in the community whilst recognising their abilities and rights to respect, decision making and autonomy.

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

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

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

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

You can use the "Care services" area of our website (www.carecommission.com) to find the most up-to-date grades for this service.

How we inspected this service

What level of inspection did we make this service

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 activities did we undertake during the inspection

This report was written following an announced inspection which was carried out on 7th and 8th June 2010 from 10am until 4pm and 9.30am until 1pm.

In this inspection we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents, including:

Service user support plans
Staff files
Minutes staff team meetings
Record of incidents
Service user participation strategy
Service user involvement in staff training documentation
Minutes service user meetings
Staff supervision calendar
Staff induction process
Minutes of health and well-being initiatives
Evidence of investors in people award

During the inspection we spoke with six service users, one senior project worker, one support worker, one project leader, the registered manager and the chief executive.

Inspection Focus Areas (IFAs)

Each year we identify an area, or areas, we want to focus on during our inspections. We still inspect all the normal areas of a care service; these are extra checks we make for a specific reason.

For 2010/11 we will focus on:

- Quality assurance for care at home and combined care at home and housing support services.

You can find out more about these from our website www.carecommission.com.

Fire safety issues

The Care Commission no longer reports on matters of fire safety as part of its regulatory function. Where significant fire safety issues become apparent, we will alert the relevant

Fire and Rescue service to their existence in order that it may act as it considers appropriate. Care service providers can find more information about their legal responsibilities in this area at: www.infoscotland.com/firelaw

Actions Taken on Recommendations Outstanding

There were no recommendations from the last inspection.

The annual return

We use annual returns (ARs) to:

- make sure we have up-to-date, accurate information about care services; and
- decide how we will inspect services.

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care (Scotland) Act 2001, Section 25(1). These forms must be returned to us between 6 January and 15 February.

Annual Return Received

Yes - Electronic

Comments on Self Assessment

We received a fully completed self assessment document from the service provider. We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each of the headings that we grade them under.

The service provider identified what they thought they did well, some areas for development and any changes they planned.

Taking the views of people using the care service into account

We sent out fifty Care Commission service user questionnaires and received thirty five completed questionnaires, expressing a high degree of satisfaction with the service. We had lunch with eight service users and had an informal discussion in a group setting. We spoke with six service users on a one to one basis on the day of the inspection.

The following comments were made via the one to one meetings, and the questionnaires:

"They take things at your own pace, and respect you as an individual. They are wonderful people"

"It has been a very positive experience, they help you with practical issues, like benefits, they provide you with very good help"

"During the past six months the care and help received from GAMH has been invaluable. I can't praise them highly enough"

"The staff of the service are excellent, and provide good support.

"I have generally been very satisfied with the service GAMH have provided for me through the housing support group. I have had some disagreements in the past, but recently I have found the service to be excellent"

"GAMH is a life line to me. I can talk here where I am not judged. It also helps me to know I am not alone with my problems"

"Just to say that it is very reassuring to have GAMH for back up. They have helped me in many ways, in problems with benefits, and moral support when I was in hospital going through tribunals"

"I find the support offered excellent, and they have assisted me to move forward and I am now starting a part-time job"

"I have been with the service for years and they have always been there for me, so I am happy"

"It has been a very good experience, I am very satisfied, they provide you with good help"

Taking carers' views into account

There were no family carers available for comment on the day of the inspection.

Quality Theme 1: Quality of Care and Support

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

The service provides various methods and opportunities for service users to participate in improving the service. Forums are held regularly which enable service users and staff within the service, good opportunities to engage in discussions about service provision and delivery. This approach provides the service with vital feedback on performance.

The service had involved service users in a focus group to include them in the self assessment and grading process.

Discussions from all meetings with service users were evidenced to be supported by a structured action plan, in terms of making improvements to the service.

Service users are fully involved in their partnership assessment and personal support plan. Service users confirmed that they had been involved in the overall process of their support and stated that the support service was being delivered to a very high standard with meaningful outcomes.

The service has now devised a structured service user participation strategy.

The service held a consultation event called "Hear Me" which provided opportunities for a large audience of service users, to participate in the improvements within the organisation. Service users had raised issues about being able to understand more about managing personal finances, budgeting and being able to support themselves on low incomes. Following the event the organisation developed a financial inclusion awareness training programme for service users.

Since the last inspection, the provider has developed a central service user's council. The purpose of this council is to focus on service user priorities, which in turn, will inform the provider's strategic priorities and objectives.

A very strong culture of service user participation is evident within the service, and the organisation.

Areas for Improvement

The service should continue to build upon their strengths, and develop and implement other methods in respect of this statement.

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

The support plans sampled revealed that the service supports service users with their welfare rights issues, budgeting skills and housing issues. They do this to a high standard.

The support plans contain a needs assessment. This assessment is based on the service and the service user, working in partnership to identify service user strengths and areas of support.

We found evidence to suggest that the service being provided; supports service users with their educational, recreational and employment needs.

Regular reviews of support plans take place within the service. The record of these reviews indicated that issues relating to health and well-being, such as maintaining a tenancy and minimising social isolation, had been discussed with service users. The reviews were up to date.

There was strong evidence of the service liaising closely with health care and social care professionals, including highlighting adult support and protection issues.

We also found evidence to suggest that the service supports service users to look after their physical health needs, such as management of diabetes and weight loss and gain.

Service users commented via the Care Commission questionnaires about the level of support received, and the positive impact this had on their well-being. The service users quoted the following:

"GAMH have helped me through all sorts of social and personal traumas. I sometimes isolate myself, but my support worker gets me back out again"

"I have found the service very helpful in supporting me with housing issues and my benefits"

"If it wasn't for the help of GAMH I would still be homeless, skint, on the streets with no future"

"I was living in conditions unfit for a human being, until GAMH stepped in and helped me"

"Without GAMH I would isolate myself, and have to deal with my problems alone. The staff are always approachable and make themselves available and offer constructive advice and listen to my problems"

"They help you get the big black clouds out of the way, such as debt and housing problems, so that you can concentrate on getting better and improving your life"

The service had set up a health and well-being initiative as an additional aide to mental health recovery, which service users can participate in. This is called the "Branching Out" initiative. The service entered into partnership with the forestry commission, to set up a well-being activities programme, including tai chi, country walks etc.

We spoke with one service user who said that he had been supported by GAMH to help other service users to participate in healthy activities, such as going to the gym and hill walking.

There are various service user forums taking place, which have been initiated by GAMH. These forums focus on many issues, such as dealing with financial issues such as council tax, welfare rights and general well-being issues. We found evidence to indicate that other agencies had been invited to the forums, for example, a fire officer talking about fire safety in the home.

A very strong culture of working with service user's strengths and mental health recovery was evident within all aspects of the service.

Areas for Improvement

Not all of the support plans strongly evidenced the support being provided, in terms of service user's educational, recreational needs. The plans referred to community resources but some did not give much detail. Some reviews also did not reflect the work being done in this respect.

The service should make sure that they evidence in all support plans, the work they do in terms of supporting people, with these needs.

Grade awarded for this statement

6 - Excellent

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 strengths identified under theme 1, statement 1.1 are applicable to this statement.

Service users have opportunities to participate in the recruitment process of staff. One service user confirmed with us that she had recently been involved in staff interviews and found the process really effective in terms of having a say in the decision making process.

In consultation with the organisation, service users were involved in the identification of the core competencies and skills that they perceived as being a requirement of GAMH workers.

The provider had set up a working group made up of service users and staff from the training department. This group is called the "get into training" group. It focuses on ways in which service users may get involved in the process of staff training.

All service users spoken with only had positive things to say about the service and the support they received. The general perception of service users spoken with was that staff were well trained, conscientious, and conducted themselves in an appropriate and respectful manner.

Areas for Improvement

The service should continue to devise and implement other methods in respect of this statement.

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

New staff had received suitable induction training to support them in their initial employment, with good opportunities for ongoing development.

Regular staff team meetings take place at service level. The issues discussed included service user support needs, the concept of mental health recovery and the operational aspects of the service. It was evident that the staff make significant contributions to team meetings.

The service has a structured training plan in place. The training being provided includes; mental health and addiction, mental health recovery and the mental health act, as well as other training courses relevant to staff roles and responsibilities.

The service has appropriate policies and procedures to guide staff in their practice, including whistle blowing, medication administration, service user's finances, and health and safety, as well as other relevant policies.

A major strength within the organisation was their ability to retain staff with very little turnover being evident. Service users welcomed this as they felt that this provided them with consistency, in terms of staff providing them with support.

Structured one to one staff supervision takes place. The supervision sessions focus on staff training and development, service user support issues and health and safety. The service operates a staff appraisal system. The purpose of this is to formally evaluate staff performance, identify their support needs and learning and development needs.

We found evidence to indicate that the Scottish Social Services Council (SSSC) codes of practice had been promoted to staff.

The service has the investors in people award. Part of the criterion for securing this award, is a commitment to staff training, development and support.

The service users we spoke with were very complimentary about staff performance and motivation, and they praised the service approach to the model of staff support. This model is a team approach, as opposed to a key-worker approach. This means that the whole team gets to know each service user, so if some staff are on annual leave or training, service users receive support from other staff within the team, who they know.

A strong learning and development culture is evidence within the service and the

organisation.

Areas for Improvement

The training records revealed that few staff had undertaken training in adult support and protection. This course has recently been revamped by the provider, to take into account changes in local authority practice in this area. The service identified that as an area for development, they should prioritise this training for all staff. They are actively working on this.

We found that most staff appraisals were up to date, although a couple were overdue. The service should monitor this to ensure that all staff appraisals are current.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

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 the Care Commission 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).

Summary of Grades

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	6 - Excellent
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Management and Leadership - Not Assessed	

Inspection and Grading History

Date	Type	Gradings
25 Sep 2008	Announced	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good

Terms we use in our report and what they mean

Action Plan - When we inspect a service, or investigate a complaint and the inspection report highlights an area for improvement; either through recommendations or requirements, the action plan sets out the actions the service will take in response.

Best practice statements/guidelines - This describes practices that have been shown to work best and to be achievable in specific areas of care. They are intended to guide practice and promote a consistent and cohesive approach to care.

Care Service - A service that provides care and is registered with us.

Complaints - We have a complaints procedure for dealing with any complaint about a registered care service or about us. Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints which can have more than one outcome. Depending on how complex the complaint is, the outcomes can be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

Enforcement - To protect people who use care services, the Regulation of Care (Scotland) Act 2001 gives the Care Commission powers to enforce the law. This means we can vary or impose new conditions of registration, which may restrict how a service operates. We can also serve an improvement notice on a service provider to make them improve their service within a set timescale. If they do not make these improvements we could issue a cancellation notice and cancel their registration.

Disclosure Scotland- Disclosure Scotland provides an accurate and responsive disclosure service to enhance security, public safety and protect the vulnerable in society. There are three types or levels of disclosure (i.e. criminal record check) available from Disclosure Scotland; basic, standard and enhanced. An enhanced check is required for people whose work regularly involves caring for, training, supervising or being in sole charge of children or adults at risk; or to register for child minding, day care and to act as foster parents or carers.

Participation - This describes processes that allow individuals and groups to develop and agree programmes, policy and procedures.

Personal Plan - This is a plan of how support and care will be provided. The plan is agreed between the person using the service (or their representative, or both of them) and the service provider. It is sometimes called a care plan mostly by local authorities or health boards when they commission care for people.

How you can use this report

Our inspection reports give care services detailed information about what they are doing well and not so well. We want them to use our reports to improve the services they provide if they need to.

Care services should share our inspection reports with the people who use their service, their families and carers. They can do this in many ways, for example by discussing with them what they plan to do next or by making sure our report is easily available.

People who use care services, their relatives and carers

We encourage you to read this report and hope that you find the information helpful when making a decision on whether or not to use the care service we have inspected. If you, or a family member or friend, are already using a care service, it is important that you know we have inspected that service and what we found. You may find it helpful to read previous inspection reports about his service.

The Care Commission

We use the information we gather from all our inspections to report to Scottish Ministers on how well Scotland's care services are performing. This information helps us to influence important changes they may make about how care services are provided.

Reader Information

This inspection report is published by the Care Commission. It is for use by the general public. You can get more copies of this report and others by downloading it from our website www.carecommission.com or by telephoning 0845 603 0890.

Translations and alternative formats

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

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

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

هذه بایتسد ىم وونابز رگىد روا رولکش رگىد رپ شرازگ تعاشا هى

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

ی.ر.خ.أ تاغلبو تاقيسينتت بلطلا دن ع رفاوتم روشنملا اذه.

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.

Telephone: 0845 603 0890

Email: enquiries@carecommission.com

Web: www.carecommission.com

Improving care in Scotland