



Inspection report

Perth Association for Mental Health Support Service Without Care at Home

Caladh Centre
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Perth
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Inspected by: (Care Commission officer)	Averil Blair
Type of inspection:	Announced
Inspection completed on:	25 October 2010

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Service provided by:
Perth Association for Mental Health

Service provider number:
SP2003004003

Care service number:
CS2003050492

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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		Excellent
Quality of Environment		N/A
Quality of Staffing		N/A
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 provides meaningful activities for people with mental health issues, and gives service users the chance to try new activities.

What the service could do better

The service has encouraged service users to be involved in the completion of the self assessment submitted to the Care Commission. The service should consider further review of this process to include the development of

an action plan to give service users a clear idea of how their comments are used.

What the service has done since the last inspection

The service has further developed their opportunities for participation by encouraging stakeholders to take part in a survey.

Conclusion

The service users spoken with during the inspection spoke highly of the service and stated that staff provided a supportive and individualised service. This was observed during a drop in social session held during the inspection.

Who did this inspection

Lead Care Commission Officer

Averil Blair

Other Care Commission Officers

Not applicable

Lay Assessor

Not applicable

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

Perth Association for Mental Health (PAMH) is a voluntary service jointly funded by NHS Tayside and Perth and Kinross Council. The service has been registered with the Care Commission since 1 April 2002. The service is available to a maximum of 24 service users at any one time with appropriate staff support.

The Manager is responsible for the supervision of staff and the day to date running of the service which operates five days weekly, Monday to Friday.

The overall aim of the service is to provide a variety of support services to people aged between 16 and 65 who have a severe and/or enduring mental illness. The principal objectives are designed to contribute towards the rehabilitation of the person's mental health and to provide structured and purposeful activities in order to maintain an optimum level of functioning.

In their aims and objectives statement the service states that PAMH aims to provide meaningful activities, the opportunity to try something new and to identify and develop skills in a safe and creative environment.

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

Quality of Care and Support	6 - Excellent
Quality of Environment	N/A
Quality of Staffing	N/A
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

The inspection was carried out on the 25th October 2010 by Care Commission officer Averil Blair.

During the visit the Care Commission Officer spoke with:

- The Manager
- Seven service users

The Care Commission Officer also looked at a range of policies, procedures and records including the following:

- Services "Self Assessment document"
- a sample of Service user personal plans
- Service survey and questionnaire results
- Relevant policies and procedures

During the inspection, the Care Commission Officer also observed one specific training session plus a social drop in session which demonstrated how staff interacted with service users.

From October 2010 the Care Commission has temporarily introduced an additional less intensive approach for services which have previously reached a good level of performance. This service qualified for this reduced inspection approach and was therefore inspected only against the Quality Theme Care and Support at this inspection.

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

No

Comments on Self Assessment

The service submitted a comprehensive electronic self assessment which provided information on the strengths of the service, and areas where they felt they would like to improve. The Manager confirmed that information was received from service users for inclusion in the self assessment.

Taking the views of people using the care service into account

Seven service users returned a completed Care Standard Questionnaire to the Care Commission prior to the inspection, all strongly agreed that the service supported them and met their needs. These service users confirmed that they were able to meet regularly with key workers to discuss any issues that were important to them, and that they were encouraged to take part in group evaluations of activities. Eight service users also took the opportunity to speak with the Care Commission Officer during the inspection, and all spoke very highly of the service in general, and the staff in particular. They made comments such as "I feel very supported by my key worker, and I feel I can speak to any member of staff even if my key worker isn't available". One service user stated that he felt the service was one of the main sources of his support, and that without the skills of the staff he would not have been able to regain his mental health.

Taking carers' views into account

No carers were available during this inspection.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 6 - Excellent

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 demonstrated excellent evidence of involving service users and carers in assessing and improving the care and support provided. This statement had been inspected in more detail at the previous inspection and information in this report relates to further developments in the service.

The service continued to use group evaluations in order to elicit the views of service users and to evaluate the effectiveness of the group in meeting its aims and objectives. Outcomes of the evaluations had been collated and analysed and subsequently used to review the delivery of the groups. The service was able to provide comprehensive statistics regarding evaluations carried out. The service had distributed a questionnaire to stakeholders such as the Community Mental Health Team, Student Nurses on placement, external groups such as the Walled Garden, and MoveAhead.

Questionnaires gave stakeholders the opportunity to comment on a range of aspects of the service, such as the referral process, skills of staff and generally of the service offered by PAMH.

A questionnaire had been issued to service users prior to the planning of the group programme for 2010. Results of the questionnaire had been used to produce an analysis of the types of groups that service users would like to be provided.

The "PAMH forum" provided service users with the opportunity to discuss issues or concerns regarding the service provision. Minutes recorded indicated that a wide range of issues were discussed and explored.

Minutes of the forum meetings had been made available to all service users, ensuring that discussions and outcomes were consistently feedback.

An exercise of consultation regarding the Care Commission Self Evaluation had enabled service users to participate in identifying the services strengths and areas for improvement across the quality themes. The service had commented on this by way of a reply, which identified potential actions which the service could take to improve.

Regular service user reviews provided further opportunities for participation in evaluating the effectiveness of individual support service provided. Reviews involved other agencies and family members at the service user's request. There was evidence of a range of joint working with other agencies to provide users access to other services.

The service had achieved Level 1 of a quality assurance system, PQASSO, which evidenced service user involvement in the service, and evaluation processes used by the service.

Areas for Improvement

The service identified in its self assessment that it hoped to promote and develop opportunities for service users to access training outwith the service.

Grade awarded for this statement

6 - Excellent

Number of Requirements

0

Number of Recommendations

0

Statement 5

We respond to service users' care and support needs using person centered values.

Service Strengths

Service users spoken with during the inspection stated that they felt the service was excellent and that they felt staff responded to them in a very person centred manner. Seven Care Standard Questionnaires returned to the Care Commission prior to the inspection all stated that they strongly agreed that the service met their needs. A further eight service users spoke with the Care Commission during the inspection, and also strongly agreed that the service provided a person centred approach which they greatly appreciated. Comments such as "I don't know where I would be without PAMH", and "this service has made all the difference to my life" were made by service users.

All service users were allocated a key worker from the staff group, although service users commented that they felt able to speak with any member of staff. Formal key working meetings were arranged for a minimum of twice annually with service users to review and plan their use of the service in line with their identified needs and preferences. Service users confirmed that in effect they met much more often and that key workers were very supportive to issues in service users lives. Personal choices were seen to be recorded in service users files, along with evidence of service users having been involved in planning their programme.

The service had developed a PAMH forum which met every two months to give service users the opportunity to raise issues, and express their views. These meetings were minuted and minutes were made available to all service users. This group contributed to the service's completion of the self assessment document. Service users were involved at the start of groups to plan the detail of the group, and some groups were primarily user led. This was seen in practice during the inspection.

The service confirmed that there was an ongoing joint service user/staff group which reviewed all recording systems, policies and procedures used within the service. Volunteers were encouraged within the service, and one past service user sat on the Board of Management.

Areas for Improvement

The service identified in its self assessment that it was looking for ways to involve service users in the debriefing sessions held after structured groups. At the time of inspection this process was being piloted with one group.

Grade awarded for this statement

6 - Excellent

Number of Requirements

0

No of Recommendations

0

Other Information

Complaints

There have been no complaints made about the service since the last inspection.

Enforcements

There has been no enforcement action taken on the service since the last inspection.

Additional Information

None noted.

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 - 6 - Excellent	
Statement 1	6 - Excellent
Statement 5	6 - Excellent
Quality of Environment - Not Assessed	
Quality of Staffing - Not Assessed	
Quality of Management and Leadership - Not Assessed	

Inspection and Grading History

Date	Type	Gradings								
12 Nov 2009	Announced	<table> <tr> <td>Care and support</td> <td>5 - Very Good</td> </tr> <tr> <td>Environment</td> <td><i>Not Assessed</i></td> </tr> <tr> <td>Staffing</td> <td>5 - Very Good</td> </tr> <tr> <td>Management and Leadership</td> <td><i>Not Assessed</i></td> </tr> </table>	Care and support	5 - Very Good	Environment	<i>Not Assessed</i>	Staffing	5 - Very Good	Management and Leadership	<i>Not Assessed</i>
Care and support	5 - Very Good									
Environment	<i>Not Assessed</i>									
Staffing	5 - Very Good									
Management and Leadership	<i>Not Assessed</i>									
30 Mar 2009	Announced	<table> <tr> <td>Care and support</td> <td>5 - Very Good</td> </tr> <tr> <td>Environment</td> <td>5 - Very Good</td> </tr> <tr> <td>Staffing</td> <td>5 - Very Good</td> </tr> <tr> <td>Management and Leadership</td> <td>4 - Good</td> </tr> </table>	Care and support	5 - Very Good	Environment	5 - Very Good	Staffing	5 - Very Good	Management and Leadership	4 - Good
Care and support	5 - Very Good									
Environment	5 - Very Good									
Staffing	5 - Very Good									
Management and Leadership	4 - 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।

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

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

یرخأ تاغل بو تاقيسينت تب 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.

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Improving care in Scotland