

## Glasgow Association for Mental Health Housing Support Service

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Unannounced

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**Service provided by:**  
Glasgow Association for Mental  
Health

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## About the service

Glasgow Association for Mental Health (GAMH) is a social care service which provides a range of support to adults who have a lived experience of mental health problems and reside in the Greater Glasgow area.

GAMH is registered as a combined housing support and care at home service. This also includes support for people who use Self-Directed Support (SDS) budgets to organise their care packages. The service was supporting 917 people at the time of inspection. The nature of support delivered is based on people's assessed needs and outcomes. This includes a mix of practical and therapeutic support on a one-to-one and/or group basis.

GAMH aims to provide 'opportunities that help people who are recovering from mental health problems to live the lives that they want to live'. The service 'works with people in ways that encourage hope, personal development and self-confidence, avoiding discrimination and promoting fairness and inclusion for everyone'.

## About the inspection

This was an unannounced inspection which took place between 6 and 10 November 2023. One inspector carried out the inspection. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

This was a pilot inspection to test a new way of confirming that better performing, low risk services are continuing to provide good quality care and support. This inspection is called a core assurance inspection. This is because research tells us that these core assurances are the key areas that are essential to a service being safe. We report on them under the headings: legal assurances, wellbeing, leadership, staffing, the setting, and planned care/support.

We confirmed that the previous evaluation of very good has been maintained. We know this because on this inspection we:

- spoke with eight people using the service
- spoke with 14 members of staff and management
- observed practice and daily life
- reviewed documents including 41 questionnaires from people using the service.

## Key messages

### Legal assurances

People using the service were protected from harm because the service was operating legally and in line with their conditions of registration. This included having the appropriate insurance in place, and a range of policies and procedures that promoted good outcomes for people.

### Wellbeing

Staff understood their responsibility to protect people from harm and promote their mental and physical wellbeing. Workers had comprehensive training which included adult protection. This translated into good practice as staff were skilled in identifying potential harm in people's lives and making appropriate referrals to partner agencies. All protection issues were clearly logged, investigated, and concluded to keep people safe and well.

The service supported people well with their finances. People were supported to maximise their income, budget appropriately, and access services which benefitted their health and wellbeing. Staff advocated for people's rights effectively when dealing with financial matters, which was important to them. A person explained 'one of the first things we did was attend appointments and get [finances] sorted, this took a lot of stress away and I could focus on my recovery'.

Whilst the service did not support people to administer medication, appropriate policies and procedures were in place if people's needs changed and this was required in future to promote their wellbeing.

Every person that used the service had a personal support plan which detailed their needs and the goals they wanted to achieve. These were highly person-centred and outcome focused. People were supported to identify goals that were meaningful to them and develop effective strategies to achieve them to enhance their mental and physical wellbeing. Comprehensive risk assessments were also in place to promote life opportunities in a safe way.

### Leadership

We received positive feedback about the management team from people who used the service and staff. They were seen as approachable, knowledgeable, and supportive. Leaders established and promoted strong values which were evident in practice throughout the service.

Leaders developed effective oversight of the service with a variety of quality assurance systems. People who used the service were encouraged to give their feedback which was listened to and valued. The management team completed audits of people's experiences, care plans, and accidents and incidents to ensure people were safe and well. Appropriate referrals were made to partner agencies when required to ensure people had the right support and protection.

The service held an annual general meeting (AGM) and encouraged people to attend and share their views. A person told us they 'enjoyed the AGM' and felt 'empowered to speak' because it was their service. This further demonstrated the inclusive nature and leadership of the service.

Leaders used information from audits and feedback from people to create a service improvement plan,

which highlighted what was working well and what the service could do better. This promoted a culture of continuous improvement that will benefit people's health and wellbeing.

## Staffing

People could be assured that their staff were recruited safely with appropriate checks, references, and registrations. This was in line with national guidance, helping to keep people safe and well.

Staff had access to comprehensive training and development and all workers completed the provider's Preparation for Practice Award. This value-based programme offered staff in-depth training in their roles and responsibilities, as well as offering insight into people's needs, and a balance of theory and practice relating to human behaviour and social care. It was of considerably high standard and prepared staff well for their role. A worker told us 'The training is excellent, and we're encouraged to be reflective about our practice. It allows us to treat each person as an individual with individual experiences and support is always tailored to the person'.

Workers were further supported by a system of supervision meetings which provided a forum to discuss practice and any issues within the service. Staff told us these were meaningful and supportive, and promoted good morale across the service.

People told us they were supported by a stable, consistent, and skilled staff team who knew their needs well. This had resulted in positive experiences and outcomes.

## Setting

Care and support was delivered in people's homes and/or in the community, and did not take place in registered premises. Therefore, we did not inspect this assurance area.

## Planned care and support

The feedback we received from people who used the service was overwhelmingly positive. Every person we spoke with highlighted and praised the service's values. People felt a natural connection with their workers who demonstrated a supportive, non-judgemental approach. A person told us 'I am used to services labelling me with a diagnosis, but GAMH see me as a person. For the first time, I feel listened to and it's made a huge difference to my life'.

The people we spoke with had transformational experiences. There were significant improvements in wellbeing with people experiencing a reduction or cessation of self-harm, less frequent and severe feelings of anxiety, and greater confidence. People who previously did not leave their home were now active members of their community, forming relationships, and participating in activities that were meaningful to them.

These activities were on a one-to-one or group basis depending on people's needs and preferences. Some people enjoyed the focused support of one member of staff and working towards a specific goal, whilst others enjoyed the camaraderie of a collective activity. People had a real say in their group work and activities were determined by people's choices. Groups were diverse, ranging from gardening, health and fitness, to gaming, which was particularly popular with people who were once socially isolated.

The service had meaningful connections with other community organisations which allowed people to gain skills and develop new relationships. These community organisations provided educational and vocational

opportunities. And, in some cases, people contributed to community projects through doing voluntary work which offered a real sense of achievement. There were also opportunities for people, who had improved their health and wellbeing, to become peer volunteers within the service. This was mutually beneficial as the person further developed their skills and confidence, whilst other people received guidance from someone with shared experiences.

People were encouraged to discuss their feelings and provide feedback about their service through a variety of methods. This included one-to-one and group meetings, surveys, poetry, and song writing. This creative and inclusive approach helped give people a voice in their service and promoted very good outcomes.

## Complaints

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

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