

Care service inspection report

Highland Home Carers Ltd - Housing Support Service

Housing Support Service

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Inverness

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Inspected by: Linda Murray

Type of inspection: Announced (Short Notice)

Inspection completed on: 4 March 2014



HAPPY TO TRANSLATE

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Service provided by:

Highland Home Carers Ltd

Service provider number:

SP2004005429

Care service number:

CS2003054082

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Summary

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

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

We gave the service these grades

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

What the service does well

Highland Home Carers continues to provide a very good service which people are happy with.

What the service could do better

The service needs to make sure that staff are re-trained quickly if they have made any mistakes. Some of the very good records staff make need to be written on separate pages rather than in books which have information about lots of people.

What the service has done since the last inspection

Highland Home Carers took over the support and care of a large number of people who had previously been cared for by another organisation. A lot of the staff who used to work for the other organisation were transferred to work for Highland Home Carers.

Conclusion

Highland Home Carers continues to provide a very good quality of support and care to people living in their own homes. People are generally happy with the quality of the care and support.

Who did this inspection

Linda Murray

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at: www.careinspectorate.com

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 01 April 2011.

Requirements and recommendations

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

- **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. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.

- **A requirement** is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 and Regulations or Orders made under the Act or a condition of registration. Where there are breaches of Regulations, Orders or Conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

Highland Home Carers provides personal and practical support, advice and counselling to approximately 430 older people and people with disabilities in their own homes. The support provided covers personal care and assistance; support with the tasks of daily living such as cooking, shopping and budgeting; and more complex support and assistance arising from health needs. Support is tailored to meet identified needs and can include 24 hour support or the provision of live in carers. The service is available to people in Inverness and the wider Highland area.

Highland Home Carers is an employee-owned company. The day to day operation of the service is managed by the management team which consists of the managing director and a number of co-ordinators.

The service mission statement reflected the aims and objectives of the service:

"Highland Home Carers aims to provide a flexible, quality home care and support service, enabling individuals to remain in their own home with assistance in maintaining their current lifestyle and promoting independence where possible."

The stated values of the service included:

- Promoting a sensitive, flexible, professional service;
- Promoting a sense of belonging within the company;
- Maintaining privacy and confidentiality;
- Respecting rights and promoting equality.

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

Quality of Care and Support - Grade 5 - Very Good

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - Grade 5 - Very Good

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

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

2 How we inspected this service

The level of inspection we carried out

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

What we did during the inspection

We wrote this report following a short notice inspection visit to the Inverness, Invergordon and Leachkin offices of the service, by one Inspector, Linda Murray. The visits took place on 18 February 2014 from 8 am to 5 pm, 19 February 2014 from 8 am to 5 pm and 20 February 2014 from 9 am to 5 pm.

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

- The annual return submitted by the service
- The self assessment submitted by the service
- Care Standards Questionnaires (CSQs); 33 out of 50 sent returned to us from service users
- CSQs; 10 out of 15 sent returned to us from staff
- Care manager database
- Care/support plans
- Risk assessments
- Medication administration records
- Review minutes
- Social accounts
- Appreciation cards
- Accident and incident records
- Complaints records
- Staff records including recruitment and selection, training, supervision
- Communications/emails
- Policies, procedures and guidance
- Meeting minutes
- Monitoring records
- Staff newsletters
- Publications

Discussion with various people including:

- o Care staff
- o Care co-ordinators
- o Care supervisors
- o Care assessors
- o The training manager
- o The operations manager
- o The executive director - business development
- o The managing director/registered manager

We observed how people in their own homes and out and about were supported and cared for by staff.

We also observed how staff communicated with people who attended their office or by phone calls made to people who used the service, each other and other visitors to the office bases in Inverness and Invergordon.

Feedback was given to the operations manager at the end of the visit to the Inverness office on 20 February 2014 and by telephone to the managing director/registered manager on 04 March 2014.

Grading the service against quality themes and statements

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

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

Inspection Focus Areas (IFAs)

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

Fire safety issues

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

The annual return

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

Annual Return Received: Yes - Electronic

Comments on Self Assessment

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

The service submitted a well completed self assessment to us within the timescales given by us. The service had identified areas of strength as well as areas for development.

Taking the views of people using the care service into account

We observed how some people, in their own homes and out and about, were supported and cared for by staff. The people were not able to directly share their views. The people appeared happy and confident in their staff's company. We saw friendly appropriate relationships between the people and the staff.

We received 33 Care Standards Questionnaires (CSQs) out of 50 sent by us for random distribution by the service. People indicated that they were happy or very happy with the overall quality of care provided by Highland Home Carers. All comments made in the questionnaires were shared anonymously with the managers. We also examined the service's 'social accounts' which shared the views and opinions of people who used the service. Comments made in the social accounts were similar to those given to us. Some of the comments given in our questionnaires included:

- 'I am very very grateful with all the care and attention I receive....I have got to know most of the carers and find them very kind. I would like to say that because of my type of dementia it is helpful both to the carer and myself that we are familiar with each other.'
- 'I understand you are very tight in workers but it would be nice if you would be able to put the same carer even just for morning. But everything else is great.'

- 'I think that the carers provide mum with good care.....disagreed staff have enough time.'
- 'Completely satisfied with the overall care and attention I receive at all times.'
- 'I feel strongly that no driving time between towns is allowed in carers' schedules. Also, some people have days with no time off from morning to night which I consider bad for their health.'
- 'Everyone is very friendly and caring but intellectual abilities vary enormously. I am very grateful for all their help.'
- 'I am extremely happy with the service provided.'
- 'I can continue to live in my own home with my carers providing support and care to an excellent standard.'
- 'I have built up a great relationship with all my carers. I feel that they know me and my routine so well.'
- 'The care received by my family member is very good, all the girls treat her with respect and this means that we can relax knowing she is well cared for. Also, communication very good.'
- 'One of the problems concerns the rota. We receive our rota every fortnight and sometimes comes with blanks - we then have to phone and find out who the office has put on the rota. Sometimes if it is for the bed run we don't find out til that day.'
- 'My husband looks forward to the carers coming as they always have a smile and a laugh.'
- 'I have found that if I need it, the carers go above and beyond to help. They do a great job.'
- 'Because the service is employee owned, we have a real feeling that the carers take pride in their jobs. HHC has a very stable work force which makes the relationship with the service users very happy one.'
- 'Nothing is too much trouble, the carers are never rushed.'

Taking carers' views into account

Carers include relatives, guardians, friends and advocates. They do not include staff. Some carers had completed and returned our questionnaires. Their feedback is noted in the previous section.

3 The inspection

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

Quality Theme 1: Quality of Care and Support

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

There was evidence to demonstrate that the service continued to perform to an excellent standard to enable service users and carers to participate in assessing and improving the quality of the care and support provided by the service.

The service continued to provide information packs to people who were potentially going to use the service. One of the managers explained that people would be visited by the senior staff or a manager before the service started to meet the person and provide information about Highland Home Carers. We saw that plans had been made by two different managers for this to happen at the time of our inspection. Information included about the aims, the services that could be provided, about how to make comments or complaints and advocacy information.

We saw that service continued to audit the social, environmental and economic performance and impact of the organisation. The service continued to send out questionnaires and involved service users, carers, staff, other stakeholders and purchasers. The service continued to share the substantial 'Social Accounts' with stakeholders and a summary version would be made available for those that preferred this. We saw that this report included action points for the organisation which this year included:

- Ensuring service users are informed of any changes on their rota; we saw on the signing sheets and we were told that staff now phoned people to tell them of changes or who was filling in any gaps in the rotas.

- Ensure consistency of carers; we saw on rotas and from discussion with staff that staff were very mindful of keeping the amount of different carers to a minimum to ensure consistency when they were making up the rotas.
- More engagement with family members of Lomond Gardens and the Leachkin; staff told us and we saw from records that staff had been promoting and supporting families to be involved with their family member's lives.

We spoke with the involvement person and examined the records kept. The involvement person made contact either in person or by phone with people who used the service or their representative to find out how well the service being provided was going. The involvement person reported directly to the managing director. We saw excellent evidence that the involvement person had acted upon issues or praise. The involvement person always had information to hand to give to people telling them how they could complain to the organisation or to us. Some comments made to the involvement person included:

- 'I am very happy with Highland Home Carers.'
- 'All carers are excellent. I would like to give a gold star to XX.'

Through discussion with staff and examination of documents we saw that people continued to be involved in developing their support plans. We saw that reviews of care continued to be well planned and undertaken as required and at least once in every 6 months.

Please read 'Views of People Using the Service' sections in this report for further comments.

Areas for improvement

The operations manager agreed to further improve the review recording forms to include a space for the person being supported or their representative to sign to say they have been involved in the review.

We saw that some information in the introductory pack and on the service's website contained out of date information about us. The provider should ensure that we are referred to as the Care Inspectorate or Social Care and Social Work Improvement Scotland (SCSWIS) (not the Care Commission or the Scottish Commission for the Regulation of Care which has not existed since 2011). We will follow this up at the next inspection.

The service was looking to further develop the 'outcome focus' person centred approach to supporting people. This included training staff on how to do this and improving how to record outcomes.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

There was evidence to demonstrate that the service continued to perform to a very good standard to ensure that service users' health and welfare needs were met.

Discussion with the manager and staff and examination of care plans demonstrated that the plans continued to contain very good detail about how people's health and wellbeing needs were to be met. We saw that appropriate health care professionals were involved in reviewing and developing the support provided to people. These included dietitians, speech and language therapists, specialist nurses and GP's. Staff told us that there continued to be very good links with other the agencies and could access support and advice easily if required by people being cared for. We saw very good monitoring records of people's conditions which included epilepsy monitoring, weight monitoring, fluid and food intake and elimination monitoring.

We saw when we examined care plans that detailed risk assessments had been carried out with the person and/or their representatives. The risk assessments continued to ensure people could continue to be as independent as possible whilst maintaining their safety and that of others around.

Staff were trained in a wide range of healthcare areas including emergency first aid, infection control, best practice in dementia care, health and safety, food hygiene and moving and handling. We saw that staff had access to personal protective equipment (PPE) including disposable gloves and aprons.

We saw that there were good policies and procedures for staff to follow. These policies and procedures were being updated by the organisation at the time of the inspection. Staff were trained to administer medication to people. Staff told us and we saw in a staff questionnaire the following comment:

'I give out medication regularly, if there is any change before we start we always look at the care plan and any comments the previous carer has put in, in case there is something we should know.' This demonstrates proper practice by staff.

Examination of records and discussion with staff evidenced that medication administration training took place 2 or 3 times every month. We saw that the service did unannounced spot check monitoring 'Practical Medication Supervision' of staff medication administration practice.

At the last inspection we encouraged the management team to strive to ensure that any changes to staffing are communicated to people who use the service as soon as possible to enable people to make alternative arrangements if they were not happy with the proposed changes. We saw that the service had developed this and now kept a log of communication made to people or their representatives of any changes which had been communicated to people.

The service had improved the emergency contact for people and the Inverness office was now staffed 7 days per week. An on-call arrangement was in place for managers to respond to any emergencies. One of the specific projects had introduced an emergency responder team for very specific, named people who used the service. Staff told us this was working well to support people to live as independently as possible in their own homes.

Staff reported all accidents and there was generally good evidence in the records that areas of concern were being followed up. At the time of inspection, we saw and heard good evidence that accident and incident forms were being further improved to ensure all further follow up action had been addressed.

We saw people being encouraged and supported to take part in everyday activities such as shopping and recycling. We also saw good evidence of people being supported with exercise such as walking, swimming and horse riding.

People who used the service commented in the questionnaires returned to us:

- 'I think that the carers provide mum with good care.....disagreed staff have enough time.'
- 'Completely satisfied with the overall care and attention I receive at all times.'
- 'I can continue to live in my own home with my carers providing support and care to an excellent standard.'
- 'I have built up a great relationship with all my carers. I feel that they know me and my routine so well.'
- 'The care received by my family member is very good, all the girls treat her with respect and this means that we can relax knowing she is well cared for. Also, communication very good.'
- 'My husband looks forward to the carers coming as they always have a smile and a laugh.'
- 'I have found that if I need it, the carers go above and beyond to help. They do a great job.'

We also read the following in review minutes:

- '...very pleased with the service.'
- 'XX sleep has improved.'
- 'XX has an experienced male support team who have all worked with him for 3-5 years. The continuity of support and trust has had a huge impact on XX behaviour.....the importance of XX feeling safe was highlighted.'
- 'mother of XX is very happy and has no issues.'
- 'XX is a new man.'

Areas for improvement

When we examined some medication administration records there were gaps in the recording. There was no indication on the forms why there were gaps. After discussion with the staff and the manager and examination of other documentation we found that the reason was sometimes recorded elsewhere such as in the daily recordings. The medication recording forms should be developed to ensure 'carers notes' can be added in to address any gaps in recording such as noting a code on the form and then writing in the 'carer's note' the reason for this such as 'XX in hospital' or 'XX out for the evening with family' or 'no staff available to support XX' or 'please see incident report about missed medication'. We will follow this up at the next inspection.

The operations manager agreed to develop the risk assessments to address the risk from any animals/birds people may have. This could for example, help prevent staff who were allergic to certain animals/birds from being asked to work with people who had such pets.

Please also see areas for improvement noted in Quality Theme 3, Statement 3.

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 that the service ensured that service users and carers participate in assessing and improving the quality of the staffing in the service to a very good standard.

Please see comments made in Quality Theme 1, Statement 1 also. Care plans examined showed that service user's staff preferences or exclusions were noted where needed. This included having preferred gender of staff or where there was a known reason to exclude such as being related to the staff member.

All staff were seen to wear name badges and could be identified and the organisation also provided tops with the company name on them for staff members who carried out personal care.

The operations manager told us that when she was interviewed the people that interviewed her included some people who used the service. The managers told us they always considered the needs and preferences of people who used the service when interviewing and then allocating staff to rotas.

Areas for improvement

The service should continue to provide and improve the very good standard in ensuring that service users participate in assessing and improving the quality of staffing in the service. This could include: being involved in formal or informal interviews by service users or their representatives; having questions about qualities or outcomes (and the desired responses) designed by service users asked at interviews for new staff; participating in appraisals of staff; participating in staff training.

The service was looking to improve the inclusion of service users and family members in the recruitment process and ensuring their perspectives were reflected in interviews.

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

There was evidence to demonstrate that the service performed to a very good standard to have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Please also see Quality Theme 1, Statement 1 about health and welfare needs as well as 'taking views of people who use the service' which are both relevant to this Quality Statement.

We observed staff to communicate very well with people, making good eye contact and using that person's preferred form of communication such as speech and Makaton. We saw staff make excellent use of diversion techniques when supporting a person to do their job and to do the recycling. Staff and managers appeared to know the people's likes and dislikes. Staff were seen to make good use of their knowledge of the person's likes and dislikes to support the person to plan their day. We were very impressed at how well the managers and senior staff in particular were aware of the needs of so many different people.

The Leachkin team won the 'National Team Award' for 2013 in the housing support service team category at the Scottish Care Awards. There was a very strong sense of ownership from the staff who appeared strongly committed to providing good care and support. The operations manager and senior staff were seen to provide care and support to people so could also monitor staff practice directly.

New staff continued to be given an induction to the service which included shadowing experienced staff. Staff were given a staff manual to refer to. The service was in the process of further developing the staff handbook at the time of the inspection. A large number of staff had been taken on from another care organisation when Highland Home Carers took over the support and care of a large number of people previously supported by another organisation.

We saw that a very good training program had been developed which included access to Scottish Vocational Qualifications (SVQs) relevant to the posts staff were employed for. Both external and in-house training sessions were provided to staff. Staff meetings were being held regularly since the summer of 2013. The managers were aware of the Scottish Social Service Council's requirement for having the manager

registered. The register for supervisors in housing support and care at home services is to open in June 2014.

Monthly newsletters were being sent out to all staff. We saw that they contained good information for staff including minutes of the staff meetings, about developments within the organisation and training opportunities. The newsletters had been improved over recent months to include the full date on them. This allows people to know how current they are.

Staff reported that they were very happy with the training opportunities provided by Highland Home Carers.

- 'I feel very strongly that HHC is an excellent company to work for. Staff are given ample opportunity to progress within the company and your views are taken in to consideration.'
- 'I personally think the level of care given to our service users is of a very high standard.'
- 'We hold meetings and they are very good meetings. Any subject I bring up is sorted or getting attended to.'
- 'Any training I feel I might need, as soon as one becomes available I am on it.'
- 'All training I have had has met my needs to do my job safe and proper.'
- 'Very happy with the training provided.'
- 'I work and enjoy my job with the company as others do also.'
- 'I feel very much listened to - part of the company.'
- 'I've never had a job where I feel so contented and feel I make a difference.'

Areas for improvement

When issues with staff medication administration practice was identified at the spot checks, we saw that the supervisors would raise this immediately with the training department for the person to be re-trained and re-assessed. However, we saw from examining records and discussion with staff that sometimes there was a delay of many weeks or a couple of months before the person had been re-trained and deemed competent to administer medication. We also saw delays in training staff following accident and incidents. Delays were seen to be due to sickness or the festive season. We saw at the time of the inspection as a result of us pointing this out, that a staff member had been put forward to attend one of the imminent courses. The system for ensuring training needs are addressed immediately should be developed to ensure training delays are kept to a minimum and staff are assessed as competent to administer medication before actually doing so. We have made a recommendation about this. **See Recommendation 1.**

The information contained in the records made by the involvement person was very clear and we could see by going through the diary that actions had been taken to

follow up issues, concerns or compliments. The information was only shared with the managing director. However, the records were made collectively about a number of different people into a diary which is not in keeping with best practice. The involvement person and the managers agreed to develop and change the recording of the contacts made and action needed or taken by the involvement person. The records should be made individually and provide a chronological record of contacts and action needed and taken. We will follow this up at the next inspection.

Examination of the Leachkin staff communication book evidenced many examples of information being written in the book which should have been recorded in the notes for the person who was being written about. Because the information was recorded in the wrong place, a chronological history of events and actions needed and taken could not be kept. Much of the information recorded was in breach of the Data Protection Act 1998. We gave detailed feedback to the operations manager and one of the senior staff at the Leachkin office who agreed to address this immediately. We will follow this up at the next inspection.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. A system for ensuring training needs are addressed immediately should be developed by the provider to ensure delays in training are kept to a minimum. Staff should be assessed as competent to administer medication before actually doing so.

National Care Standard 4, management and staffing and standard 8 - keeping well, medication.

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

There was evidence to demonstrate that the service performed to a very good standard in assessing and improving the quality of the management in the service. Please see comments noted in all previous Quality Statements and 'taking views of people who use the service' section of this report.

The majority of the people who responded to our questionnaire indicated they were asked for their opinions by the organisation about how the service could improve. An on-call was in place so senior staff were available at all times in an emergency. The service issued surveys to people who used the service and people were given opportunities to comment about the management of the service.

Areas for improvement

The service should continue to enhance participation opportunities for service users and/or their representatives to assess and develop all aspects of the service provision, including the management of the service.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

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

There was evidence that the service continued to use very good quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of the service they provide.

Previous reports and comments made throughout this report and especially in Quality

Theme 1, Statement 1 are also relevant to this Statement.

We saw that the senior staff had audited care plans and had identified areas for development. Improvement to the care plans was ongoing at the time of the inspection. The service was aware of the need for accurate information and ensuring people supported were fully involved in developing the information, focusing on what was important to them.

All people who used the service had been given a named service manager so they had someone they could contact in management should there be any problems they needed to discuss.

Areas for improvement

The provider should ensure the names and the breakdown of the different teams are noted on the Annual Return information that is required to be sent to us. For example, 'The Leachkin', 'Easter Ross', 'West Inverness' and so on. The provider should also continue to ensure people who use the service and their representatives as well as other stakeholders are involved in developing the self assessment for the service.

A quarter of people responded in the questionnaires we sent that they were not aware how to raise complaints with Highland Home Carers or us. We did see that people were given information about how to make comments about the service in the introduction pack and the involvement person kept information about how to complain readily available. We suggested that how to complain to the service and to us could be a standing item on the reviews of the care packages that the service carry out with people and their representatives to further enhance people's awareness of how they can have concerns dealt with. The service should also ensure they undertake any further actions as a result of complaint investigations and record the complainant's satisfaction with the outcome. We also suggested a log of complaints be drawn up to identify trends and patterns with a view to preventing similar complaints. We will look at complaints again at the next inspection.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

4 Other information

Complaints

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

Enforcements

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

Additional Information

None

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 Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 5 - Very Good	
Statement 1	6 - Excellent
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

6 Inspection and grading history

Date	Type	Gradings
12 Dec 2012	Unannounced	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
2 Feb 2012	Unannounced	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership Not Assessed
16 Dec 2010	Announced	Care and support 5 - Very Good Staffing Not Assessed Management and Leadership Not Assessed
21 Jan 2010	Announced	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
19 Feb 2009	Announced	Care and support 4 - Good Staffing 4 - Good

Inspection report continued

		Management and Leadership 4 - Good
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All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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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।

ہے بایتسرد می م وونابز رگی دی روا ولکش رگی دی رپ شرازگ تعاشا ہی

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