

Care service inspection report

Kalisgarth Day Centre

Support Service Without Care at Home

Kalisgarth Care Centre

Pierowall

Orkney

KW17 2DG

Telephone: 01856 871134

Type of inspection: Announced (Short Notice)

Inspection completed on: 12 March 2015



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Service provided by:

Orkney Islands Council

Service provider number:

SP2003001951

Care service number:

CS2007154807

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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	4	Good
Quality of Environment	4	Good
Quality of Staffing	4	Good
Quality of Management and Leadership	4	Good

What the service does well

The Kalisgarth Centre is a vital local resource which ensures older people can continue to live on their native island. The building has a unique design and combines respite care, care at home and day centre facilities. It is well-equipped and provides an attractive setting for a range of community-related activities.

The manager and her staff work well together as a team. They are committed to providing individualised care based on the support needs and personal preferences of each service user.

The day care service is open two days a week and had a daily capacity for nine service users. The centre encourages other local community groups to use the facility and enable its service users to participate as fully as they wish in the wider life of the centre and also maintain links with the wider community.

What the service could do better

The provider, Orkney Health and Care, needed to review the management and staffing arrangements within the service.

The support planning arrangements needed to be reviewed and a more coherent and standardised format adopted.

Individual service agreements should be put in place for each service user.

Staff supervision and staff appraisals should be kept up to date.

The service should continue to further develop its in-house quality assurance arrangements.

What the service has done since the last inspection

Staff within the service continue to work well together. They know their service users very well and provide good quality care in a versatile setting.

The service continues to work with other local groups on the island to enable service users to participate in activities and events in the wider community.

A mini bus is now available to provide transport for those who use day care. This includes opportunities for local trips and outings.

Conclusion

The day care service is much valued by service users and their families. Those contributing to our inspection told us they "agreed" that, overall, they were happy with the quality of care the service provides.

The versatile staff team work well together and are committed to providing a good standard of care. Care staff provide individualised support in a friendly setting.

Those attending are made to feel welcome and part of the wider Kalisgarth experience. A range of stimulating activities are provided and those attending enjoy a nutritious meal.

The service strives for continuous improvement.

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 1 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.

Kalisgarth is a purpose-built care centre with a communal entrance area and office accommodation in the middle. Five self-contained flats, one room for respite care, a bathroom, sitting room and staff accommodation form one side of the building. The other side is a day room, kitchen and toilets. The day care room is a large bright room, which can be divided by partitions into two separate areas. There is a kitchen adjoining with a hatch through to the dining area of the day care room. The sitting area has a view out over the garden to the bay and a specially designed stained glass window. The centre is located in Pierowall village on the island of Westray and provides supported accommodation, a respite care home and a day care service to meet the needs of the island community.

Kalisgarth focuses mainly on providing care for older people, but it also addresses the needs of the whole community, providing support for people with a physical or learning disability. Residents at Kalisgarth or individuals using the respite service can access the day care and lunch is normally a community event for all who use the support or care service at Kalisgarth.

The aims of the service are to meet the individual assessed social care needs of service users and tenants in a professional, courteous and confidential manner. Staff

will work with service users to maintain their independence and will respect their dignity and privacy at all times.

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

Quality of Care and Support - Grade 4 - Good

Quality of Environment - Grade 4 - Good

Quality of Staffing - Grade 4 - Good

Quality of Management and Leadership - Grade 4 - 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 0345 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 announced inspection.

We inspected the service on 10, 11 and 12 March 2015. We provided feedback to the registered manager at the end of the inspection. The feedback included recommendations and areas of improvement made as a result of these visits.

As part of the inspection, we took account of the completed annual return and self assessment form that we asked the provider to complete and submit to us.

We sent nine Care Standards Questionnaires to the service, to be given to people who use the service and four were returned completed. We also sent questionnaires to be completed by the staff and three were returned.

During the inspection process we gathered evidence from various sources, including the following:

We spoke with:

- Five people who were attending day care or were tenants of Kalisgarth
- Registered manager
- Five social care assistants
- Administrator

We looked at:

- Evidence from the service's most recent self assessment
- Personal plans of people who use the service
- Formal care reviews and records
- Participation information, including Care Standards Questionnaires
- Accident and incident records
- Staff training records
- Risk assessments
- Notice boards

- Newsletters
- Health and safety records
- Activity photographs

We observed staff interacting with service users and toured the building.

We observed a musical entertainment afternoon.

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.

We received a completed self assessment document from the service provider. The service provider identified what they thought they did well, some areas for development and any changes they planned.

The service should consider how it can widen the contributions of its various stakeholders in the process of self-evaluation and use the self assessment process in ways that lead to improved outcomes.

Taking the views of people using the care service into account

We received four Care Standards Questionnaires (CSQs) from service users who "agreed" that, overall, they were happy with the quality of care received at Kalisgarth Day Centre.

From our observations of staff interactions we could see that service users were well supported by staff. We liked the way that all service users could take part in the wider social aspects of the centre.

We enjoyed a pleasant lunch and sat in on a musical entertainment session one afternoon. Those attending had a very enjoyable time.

Taking carers' views into account

We received two Care Standards Questionnaires (CSQs) from relatives.

One respondent "strongly agreed" the other "agreed" that, overall, they were happy with the care provided.

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: 4 - 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 is performing to a good standard in respect of this Quality Statement.

We came to this conclusion after we looked at a range of the service's practices including:

- The participation policy of the service
- Considered the results of questionnaires collected from stakeholders
- Sampled minutes of service users' meetings
- Sampled support plans, review documents and daily recordings for individual service users
- Spoke with service users

The good grade applies to performance characterised by important strengths which have a significant positive impact.

The provider has a participation statement which outlines the various ways in which service users could contribute their views on all aspects of the service.

The service's statement of aims and objectives recognised the rights of service users to "make informed choices and to take risks". The service had also devised an 'expectations' statement which confirmed that service users would be asked for their "comments or suggestions to improve the care service" and would be "actively involved in the review of their individual care plans".

All service users were given copies of the service's complaints, comments and

compliments procedures. There had been no complaints since the previous inspection.

Questionnaires had been issued to service users and feedback confirmed that, overall, they "agreed" they were happy with the care the service provides.

A service development plan had been devised. Most of the issues for development were made on basis of both formal and informal discussions with service users. The plan highlighted the actions being taken by the service to act on the views expressed by those contributing.

In addition to daily chats and discussions regular reviews took place and these informed how future care was to be supported. The service liaised with other care providers, such as the care at home service, to build up an accurate profile of the support individuals would need at Kalisgarth.

In addition to this staff could access the Orkney Health and Care IT systems to download the most up-to-date information of service user's personal circumstances and ongoing support needs.

The setting within the Kalisgarth Centre ensured that all service users were given opportunities to participate in the wider social activities on offer within the unit. Families could visit their relatives regularly and the unit had a strong ethos to maintain close ties with the wider community - all of which ensured positive outcomes for service users.

Taking all of the above into account we conclude that the service was performing to a good standard.

Areas for improvement

The service needed to link the questions contained in its questionnaires to the Care Inspectorate's quality themes. This would better evidence the views of the service's various stakeholders in relation to the quality statements being inspected - and how these were rated by those participating. It also needed to demonstrate how the results of its surveys were evaluated and what the outcomes of its service development plans were.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

The service is performing to a good standard in respect of this Quality Statement.

We came to this conclusion after we looked at a range of the service's practices including:

- Sampled support plans, review documents and daily recordings for individual service users
- Spoke with service users
- Examined other related documentation

The good grade applies to performance characterised by important strengths which have a significant positive impact.

Respite support plans were developed through discussions with service users, close relatives, if appropriate, and by taking account of the most recent social work assessment. The support plan provided essential details of the individual's health and welfare needs.

Risk assessments were completed including about any moving and transferring issues.

In addition to daily chats and discussions regular reviews took place and these informed how future care was to be supported. The service liaised with other care providers, such as the care at home service, to build up an accurate profile of the support individuals would need at Kalisgarth.

In addition to this staff could access the Orkney Health and Care IT systems to download the most up-to-date information of service user's personal circumstances and ongoing support needs.

The care staff at Kalisgarth aimed for service users to be supported to follow their usual daily living routines in order to minimise any disruption to their preferred lifestyles.

The 'Kalisgarth News' newsletter provided details of the wide-ranging events, anniversaries and activities offered by day care. In addition useful contacts information was provided relating to charities, such as Age Concern, from whom confidential advice could be sought.

There was some information detailed about their previous life histories and what and who was important to them. Service users were asked about their personal preferences and choices which were recorded in their support plans.

We observed that staff provided support in a sensitive and discreet manner. The activities on offer were optional and service users were encouraged to take part but their rights to participate or not were always respected.

During the inspection a musical entertainment afternoon was held. It was clear that those taking part had a thoroughly enjoyable time together and also opportunities to meet with some of the local tenants at Kalisgarth.

Taking all of the above into account we concluded that the was performing to a good standard and that the support offered by service led to positive outcomes for service users.

Areas for improvement

Kalisgarth Centre provides a wide range of care and support services to the local community. Within the complex are tenancies for up to seven housing support/care at home service users. Also available is a one bedded respite care facility. In addition to this day care is provided two days a week.

The manager of the service combines her post with a community nursing role. Sometimes the shift patterns can impact on the continuity of a management presence within the unit. The centre has no assistant manager or senior carer to deputise in the manager's absence.

Staff told us that they held their manager in high regard but there were times, too, when they felt "vulnerable" and "isolated" in the absence of a full-time management presence within the unit.

The care staff also fulfil a variety of additional roles including domiciliary and meal preparation tasks.

The service was functioning well but some routine staff supervision and appraisals had not been kept up-to-date. We considered there was potential for the situation to impact on the overall quality of care and support and concluded that the provider needed to review the current management and staffing arrangements within the service to ensure it was sufficiently resourced. **(See Recommendation 1)**

The supporting planning arrangements needed to be reviewed to ensure that staff are fully prepared to receive new respite guests at Kalisgarth before their admission. Part of the review should include adopting a standardised care plan format with a clear index of contents. We noted there was sometimes difficulties downloading the latest copies of care reviews from the IT system and this needed to be resolved. Risk assessments should adopt a more individualised and less generic approach to ensure the personal circumstances of each service user is properly reflected in their care plans. **(See Recommendation 2)**

Written service agreements needed to be put in place for each service user which stipulated the terms and conditions of the service provided. **(See Recommendation 3)**

The service needed to consider using the enhanced practice resource 'Promoting Excellence: Dementia Framework' to provide a more structured approach to cognitive stimulation therapy (CST).

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 3

Recommendations

1. The provider to review the current management and staffing arrangements within the service to ensure it is sufficiently resourced.

National Care Standards, Support Services: Standard 2 - Management and Staffing Arrangements.

2. The provider to review its supporting planning arrangements to ensure a standardised care plan format is developed with a clear index of contents. Risk assessments should adopt a more individualised and less generic approach to ensure the personal circumstances of each service user is properly reflected in their care plans.

National Care Standards, Support Services: Standard 4 - Support Arrangements.

3. Written service agreements to be put in place for each service user which stipulated the terms and conditions of the service provided.

National Care Standards, Support Services: Standard 3 - Your Legal Rights.

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 4 - Good

Statement 1

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

Service strengths

The findings in this quality statement are similar to those reported on in Quality Statement 1.1.

The service is performing to a good standard in respect of this Quality Statement.

We came to this conclusion after we looked at a range of the service's practices including:

- The participation policy of the service
- Considered the results of questionnaires collected from stakeholders
- Sampled minutes of service users' meetings
- Sampled support plans, review documents and daily recordings for individual service users
- Spoke with service users

The good grade applies to performance characterised by important strengths which have a significant positive impact.

Areas for improvement

The service should continue to survey the views and suggestions of its various stakeholders about ways in which the quality of the environment could be further improved.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

We make sure that the environment is safe and service users are protected.

Service strengths

The service is performing to a good standard in respect of this Quality Statement.

We came to this conclusion after we looked at a range of the service's practices including:

- Support plans, review documents and risk assessments
- Development plan; Personal emergency evacuation plans; Staff training records
- Incident monitoring arrangements
- Quality assurance arrangements
- Toured the premises

The good grade applies to performance characterised by important strengths which have a significant positive impact.

We found that the centre was an attractive and welcoming facility with good amenities. It was free from offensive odours and intrusive sounds. The premises were kept in good decorative order and furnishings within the unit well-maintained.

Respite service users were provided with a written agreement for their stay at Kalisgarth. Risk assessments were carried out and updated. A sensible balance is offered in everyday events and activities between reasonable risk taking and the service's duty of care to provide a safe environment in which service users are protected.

There were arrangements in place to check and maintain equipment. Repairs were notified to OIC and generally these were completed reasonably quickly.

Staff carried out temperature checks and other safety tests with regard to Legionella.

Accidents and incidents were recorded and the manager checked all records for any recurring themes and to identify any possible actions to prevent re-occurrence.

Members of staff knew their service users very well and had detailed knowledge of their individual support needs.

Taking all of the above into account we concluded that the service was performing to a good standard.

Areas for improvement

In Quality Statement 1.3 of this report we have raised a recommendation for the provider to review the management and staffing arrangements within the unit to ensure it is sufficiently resourced to meet the aims and objectives of the service and to avoid any potential for the current arrangements to adversely impact on the overall quality of care and support.

The provider should continue to monitor and maintain the current good standards.
The provider should ensure it is rigorous in identifying any areas for improvement and identifying action plans to address these.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - 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 findings in this quality statement are similar to those reported on in Quality Statement 1.1.

The service is performing to a good standard in respect of this Quality Statement.

We came to this conclusion after we looked at a range of the service's practices including:

- The participation policy of the service
- Considered the results of questionnaires collected from stakeholders
- Sampled minutes of service users' meetings
- Sampled support plans, review documents and daily recordings for individual service users
- Spoke with service users

The good grade applies to performance characterised by important strengths which have a significant positive impact.

Areas for improvement

The service should continue to survey the views and suggestions of its various stakeholders about ways in which the quality of the service's staffing could be further improved.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

The service is performing to a good standard in respect of this Quality Statement.

We came to this conclusion after we looked at a range of the service's practices including:

- Spoke with members of staff
- Observed their interactions with service users
- Examined staff training records
- Looked at staff supervision and appraisal arrangements
- Examined relevant documentation

The good grade applies to performance characterised by important strengths which have a significant positive impact.

We found that staff were sincere carers who were committed to providing good quality care and support. There was good morale within the staff group and they worked well together as a team. Staff retention within the service was good.

We met with staff and they told us they rated the quality of care within Kalisgarth as "pretty good" and "very good". They told us that communication within the team was good and that they "work out solutions for service users".

Staff had received information about the Scottish Social Services Council (SSSC). OIC supported care staff to obtain necessary qualifications in order to register with the SSSC. Some staff already had a Scottish Vocational Qualification.

Recent training had included; First Aid, Moving and Handling and Essential Food Hygiene. There was ongoing training at SVQ Level 2.

The manager provided some supervisory and staff appraisal supports. Staff found these sessions useful. Staff were encouraged to keep their skills and practice up to date by familiarising themselves with reports and research documents and by using the computer which was purchased for them.

We observed staff provide support in a discreet, sensitive and respectful manner.

Taking all of the above into account we concluded that the service was performing to a good standard.

Areas for improvement

We met individually with staff members and they told us that sometimes in the absence of the manager - who also fulfilled a local community nursing role - they could, at times, feel "vulnerable" and "isolated". These feelings were compounded as the unit did not have an assistant manager or senior carer to deputise in the

manager's absence.

We noted, too, that staff could sometimes be stretched in the various roles they performed which combined that of a carer, and the undertaking of domiciliary and meal preparation tasks.

In Quality Statement 1.3 of this report we have raised a recommendation for the provider to review the management and staffing arrangements within the unit to ensure it is sufficiently resourced to meet the aims and objectives of the service and to avoid any potential for the current arrangements to adversely impact on the overall quality of care and support.

The service was functioning well but some routine staff supervision and appraisals had not been kept up-to-date. More could be done to ensure that staff supervision and staff appraisal arrangements did not fall behind schedule.

The provider should continue to monitor and maintain the current good standards. The provider should also take account of the issues identified in this inspection report and ensure it is rigorous in identifying any areas for improvement and identifying action plans to address these.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 4 - 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 findings in this quality statement are similar to those reported on in Quality Statement 1.1.

The service is performing to a good standard in respect of this Quality Statement.

We came to this conclusion after we looked at a range of the service's practices including:

- The participation policy of the service
- Considered the results of questionnaires collected from stakeholders
- Sampled minutes of service users' meetings
- Sampled support plans, review documents and daily recordings for individual service users
- Spoke with service users

The good grade applies to performance characterised by important strengths which have a significant positive impact.

Areas for improvement

The service should continue to survey the views and suggestions of its various stakeholders about ways in which the quality of the service's management and leadership could be further improved.

Grade awarded for this statement: 4 - 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

The service is performing to a good standard in respect of this Quality Statement.

We came to this conclusion after we looked at a range of the service's practices including:

- Support plans
- Staffing arrangements
- Quality assurance arrangements
- Other relevant documentation

The good grade applies to performance characterised by important strengths which have a significant positive impact.

The Kalisgarth Centre is a vital local resource which ensures older people can continue to live on their native island. The building has a unique design and combines respite care, care at home and day centre facilities. It is well-equipped and provides an attractive setting for a range of community-related activities.

The service provides good quality care. Its staff were knowledgeable and provided support in a sensitive, discreet and respectful manner. There was a strong ethos amongst the staff group to deliver good quality care.

Staff teamwork was good, as was morale within the unit.

The manager and her staff work well together as a team. They are committed to providing individualised care based on the support needs and personal preferences of each service user.

The day centre is much valued by service users and their families. Those contributing to our inspection told us that, overall, they "agreed" they were happy with the care it provides.

The service strives for continuous improvement. The manager was developing an audit tool based on the National Care Standards. This had been effective in identifying actions for improvement. A service development plan had been devised and was being implemented.

Taking all of the above into account we concluded the service was performing to a good standard.

Areas for improvement

We have raised a recommendation in Quality Statement 1.3 of this inspection report for the provider to review the management and staffing arrangements within the unit to ensure it is sufficiently resourced to meet the aims and objectives of the service

and to avoid any potential for the current arrangements to adversely impact on the overall quality of care and support. We previously raised concerns about this issue in our inspection report of November 2013. The provider will need to devise an action plan to satisfactorily address this issue.

The provider needed to further develop its quality assurance arrangements by ensuring it used robust quality audits to monitor and maintain the current good standards. The provider should ensure it is rigorous in identifying any areas for improvement and identifying action plans to address these. **(See Recommendation 1)**

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The provider to further develop its quality assurance arrangements by ensuring it used robust quality audits to monitor and maintain the current good standards. The provider should ensure it is rigorous in identifying any areas for improvement and identifying action plans to address these.

National Care Standards, Support Services: Standard 2 - Management and Staffing Arrangements.

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

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 - 4 - Good	
Statement 1	4 - Good
Statement 3	4 - Good
Quality of Environment - 4 - Good	
Statement 1	4 - Good
Statement 2	4 - Good
Quality of Staffing - 4 - Good	
Statement 1	4 - Good
Statement 3	4 - Good
Quality of Management and Leadership - 4 - Good	
Statement 1	4 - Good
Statement 4	4 - Good

6 Inspection and grading history

Date	Type	Gradings
15 Aug 2011	Unannounced	Care and support 4 - Good Environment 5 - Very Good Staffing Not Assessed Management and Leadership Not Assessed
6 Jul 2010	Announced	Care and support 5 - Very Good Environment Not Assessed Staffing Not Assessed Management and Leadership 4 - Good
10 Jun 2009	Announced	Care and support 4 - Good Environment 5 - Very Good Staffing 4 - Good Management and Leadership 4 - Good

Inspection report continued

28 May 2008	Announced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and Leadership 3 - Adequate

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 بایں تہہ سہ ہونابز رگی د روا ہولکش رگی د رپ شرازگ تعاشا ہی

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

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