

Rawyards House Care Home Care Home Service

Motherwell Street
Airdrie
ML6 7HP

Telephone: 01236 761611

Type of inspection: Unannounced
Inspection completed on: 19 July 2017

Service provided by:
RH Independent Healthcare Limited

Service provider number:
SP2003002430

Care service number:
CS2003010591

About the service

Rawyards House Care Home offers accommodation in a converted villa house and attached purpose-built extension with an adjoining conservatory cum lounge area. It is conveniently situated for public transport routes and is within walking distance of local shops and community amenities in the Airdrie area.

The registered provider is RH Independent Healthcare Ltd with correspondence address managed by Regional Manager, Abbey Healthcare Ltd.

The service is registered for eighty-eight persons of which up to forty may have dementia. The four units are:

- Connell - places offering palliative care
- Ash - places for frail elderly
- Cedar and Cedar Grove - places for frail elderly
- Beech - places for persons living with dementia or cognitive impairment.

The front door was accessible by a flight of stairs and optional ramp access to the rear of the property directly from the rear car park. There is a secure door entry system with keypad functionality on both these doors.

All bedrooms were single occupancy and a number had been personalised to the individual's taste offering a homely feel. Service users had access to communal toilets and bathing facilities and in each unit a lounge and separate dining room or a lounge cum dining room area was also available.

What people told us

Three relatives returned completed care standards questionnaires. We spoke with four more relatives individually during our inspection as well as 20 residents. All, except one relative said that they were overall happy with the care and support that they or their relative received at the care home. All residents told us that staff responded to their care needs quickly. Everyone, except one relative said that the recent refurbishment had lifted everyone's spirits. A few felt that there could be more staff on duty at times. We looked at these aspects of care during the inspection and report on them below. Some comments included:

- Food has become better recently
- Staff phone and update me about any changes
- I haven't a care in the world....these girls do all the caring I need. The food's good....I quite like it
- This place was dull and drab....now what a difference....it's so cheery!

Self assessment

The Care Inspectorate is not currently requesting services to submit this.

From this inspection we graded this service as:

Quality of care and support

4 - Good

Quality of environment

4 - Good

Quality of staffing	4 - Good
Quality of management and leadership	4 - Good

Quality of care and support

Findings from the inspection

We found that personal plans contained good information to guide staff on how best to care and support each resident. Associated risk assessments were in place and used to inform the relevant care plans. These were reviewed regularly with the resident and/or their family. Requirement 1 and recommendation 6 made at the previous inspection had been met.

We observed staff to have good knowledge of the residents and showed a warm and caring nature, especially when spending time with people who were becoming distressed. They treated people in a dignified manner, whilst trying to promote independence. Recommendations 3 and 5 made at the previous inspection had been met.

We noted that residents were receiving their medications as prescribed, however, we reminded the service to ensure that all handwritten transcriptions on the medication Administration Record (MAR) sheets followed best practice guidance.

We heard about how people spent their day and about some activities organised by staff, including arts and crafts, birthday parties and card games. Residents also told us about various trips out that they had enjoyed. The service was currently recruiting for a third member of activity staff which would make them well placed to build on this aspect for people living there.

We found that the service had made sound progress with the mealtime experience for residents who told us that the food had improved recently. We observed Mealtimes were unhurried and people were offered support as they needed this. Recommendations 2 and 9 made at the previous inspection had been met.

We observed that residents looked clean and tidy. Staff supported people to maintain this throughout the day. Residents and relatives, with the exception of 1 relative, told us that this was always the case.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of environment

Findings from the inspection

The service had made considerable improvements to the environment by recently completing an extensive refurbishment. Residents we spoke with told us how this had improved living at the service. We heard residents pass comments about how lovely the place was looking. We heard about the next steps planned, including a review of the various signage used around the care home. Requirement 2 made at the previous inspection had been met.

We found that a smoking area was now in place in the garden for people to use. Requirement 3 made at the previous inspection had been met.

We heard from residents about how they enjoyed going out to the garden and on the first day of the inspection a pre-planned garden party took place to celebrate two resident's birthdays. The service had not yet fully progressed recommendation 1 from the previous inspection and the garden was in a position to be developed for the residents. This recommendation had not been met. See recommendation 1.

We looked at how the service ensured that the home was kept safe for residents and noted that in house maintenance checks were carried out including fire checks and hot water temperatures. External service checks were also carried out, including the fire and nurse call system, lifting equipment and gas safety. We asked the service to ensure that any remedial action required following checks were included in their service development plan.

We made a recommendation at the previous inspection around the storage of items in communal areas for residents. This issue had now been addressed and people were able to use all the communal lounges. This recommendation had been met.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The provider offers no secure garden space or has any resident's gardening planning group to ensure the outside space is developed to meet the individuals assessed health and social needs.

National Care Standards, Care Homes for Older People – Standard 4, Your Environment
This recommendation was made on 15 December 2014.

Grade: 4 – good

Quality of staffing

Findings from the inspection

We sampled staff recruitment and found that residents could be assured that new staff had been selected using best practice guidance. New staff had gone through an induction process that included a competency assessment prior to them successfully completing their probation period. Requirement 4 and recommendation 4 made at the previous inspection had been met.

We looked at training records. Staff we spoke told us that there were plenty of training opportunities and gave examples of training they had enjoyed and how they had put this into practice. Requirements 5 and 8 made at the previous inspection had been met.

We made a recommendation at the previous inspection about training for staff in line with 'Promoting Excellence' to support staff to work with people living with dementia. This was a work in progress. This recommendation had not been met. See recommendation 1.

We looked at the dependency levels collated by the service along with staff rotas. We also spoke with staff who worked on both day shift and night shift and to residents and relatives. Residents told us that staff responded to their needs within a reasonable time. There was a stable workforce on day shift, compared to night shift where there were a few vacancies. The service was working hard to fill these posts. Overall staff told us that they were able to meet residents' needs, although there were occasional blips which meant that they had less time to spend on activities with people. Requirements 6 and 7 made at the previous inspection had been met.

The majority of staff told us that they received regular supervision from their line manager and had access to staff meetings. They told us that they found these useful and that senior staff were very approachable and supportive. Meetings could be a bit sporadic so we asked the service to devise a programme to ensure a more consistent approach. Recommendation 4 made at the previous inspection had been met.

We found that nursing and care staff were registered with either the Nursing and Midwifery Council (NMC) or the Scottish Social Services Council (SSSC) as required by the service. However, we noted many care staff that were registered pending fulfilment of an SVQ qualification. We were disheartened to hear that there was an expectation that staff would pay for this themselves and would be concerned that the service may lose staff that they have heavily invested in and know the residents extremely well due to this qualification not being achieved and therefore not being legally able to continue their employment. We asked the service to raise this with the provider. We will review this at our next inspection.

Feedback from residents and relatives was extremely positive about staff and staff were to be commended for their hard work to improve the service.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The provider should ensure that the training plan contains topics that meet the focus raised by the Scottish Government, Dementia - Promoting Excellence.

National Care Standards, Care Homes for Older People – Standard 5, Management and Staffing Arrangements.
This recommendation was made on 18 February 2016

Grade: 4 – good

Quality of management and leadership

Findings from the inspection

We found that there were a range of quality assurance systems in place, including internal audits carried out by the management team and external monitoring from the provider and North Lanarkshire Council. Key areas were covered including falls management, medication management and personal plans for residents. We noted that any remedial action points were identified and sampled some and found that these had been carried out. However, the service would benefit from ensuring that these always contained clear timescales for completion, the person responsible and should be revisited to ensure that they have been achieved to make them meaningful. Requirements 9 and 10 made at the previous inspection had been met. Recommendation 8 made at the previous recommendation had not been met. See recommendation 1 detailed below.

Residents and relatives were able to feedback their views to the service during individual review meetings, group meetings and surveys.

The service had laid effective foundations to establish a stable management team across all four units of the care home. They were well placed to make further progress to develop senior staff's leadership skills.

The vast majority of staff we spoke with told us that they felt well supported by the management team. They told us that the home manager and deputy manager were very visible around the care home and that they would feel at ease to approach them with any ideas or worries that they may have. They felt that they would be listened to. There were a few staff who did not feel this was the case, which we discussed with the manager who assured us that they would address this.

We discussed that the self – assessment, which we previously asked for, was now being replaced by the service's own development plan and asked the service to look at putting this in place.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The service should ensure that any remedial action points arising from any feedback, audits or maintenance/service checks have a clear timescale for completion with the person/persons responsible identified. These should then be re-visited to ensure that actions have been completed.

National Care Standards, Care Homes for Older People – Standard 5, Management and Staffing Arrangements.

Grade: 4 – good

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

Requirement 1

The provider and management must, through their in-house process and systems review and monitor the content of the new documentation contained in the care plans to ensure:

- the care plan is person-centred
- informative of and to the service user, their advocate and staff
- promote independence
- contain necessary risk assessments, for example tissue viability
- clearly state the outcomes for the individual
- the service received and delivered are scrutinised through the review process.

This is to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 4(1)(a) – Welfare of Users – A provider must make provision for the health, welfare and safety of service users and Regulation 5 – Personal Plans.

National Care Standards for Care Homes for Older People – Standard 6: Support Arrangements

Timescale for improvement: To start immediately and be completed within eight weeks of the publication of this report.

This requirement was made on 15 December 2014.

Action taken on previous requirement

Please see information under quality theme 1.

Met – outwith timescales

Requirement 2

Essential work and repairs must continue to the home environment both internally and externally ensuring it is decorated and maintained to a high standard. The service provider must ensure the environment is appropriate to meet the care and support needs of each resident including those who are living with dementia.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 10(1)(a)(b)(d) – Fitness of Premises.

Timescale: To commence immediately and completed within three months from receipt of this report.

This requirement was made on 18 February 2016.

Action taken on previous requirement

Please see information under quality theme 2.

Met – outwith timescales

Requirement 3

The provider must protect the health and wellbeing of all people, staff and residents, but with a focus on specific individuals who previously used the smoke room sited in Cedar Unit until summer 2014, but have not identified suitable venue now within the building.

This is to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 4(1)(a) – Welfare of Users – A requirement to make proper provision for the health and welfare of users and takes account of:

Smoking, Health and Social Care Legislation (Scotland) Act 2005

National Care Standards for Care Homes for Older People – Standard 9: Feeling Safe and Secure

Timescale for completion: To start immediately and be completed within four weeks of publication of this report.

This requirement was made on 18 February 2016.

Action taken on previous requirement

Please see information under quality theme 2.

Met – outwith timescales

Requirement 4

The provider must ensure that the provider's policies and procedures for the recruitment and induction of new employees is adhered to protect the health and welfare of people who use the service.

This is to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 15(b) - Staffing - A provider having regard to the size and nature of the care service, the statement of aim and objectives and the number and needs of service users - (b) Ensure that persons employed in the provision of the care service receive - (i) Training appropriate to the work they are to perform; and (ii) Suitable assistance, including time off work, for the purpose of obtaining further qualifications appropriate to such work.

Timescale for improvement: To start immediately and be completed within eight weeks of publication of this report.

This requirement was made on 18 February 2016.

Action taken on previous requirement

Please see information under quality theme 3.

Met - outwith timescales

Requirement 5

The provider must ensure that the contents of the training matrix and outcome action plan, identifying timescales for course attendance to meet registration requirements and timescales and plans for continued service development. The courses must be relevant to roles and responsibilities and creates a suitably trained workforce to meet the assessed needs of the people who reside at Rawyards Care Home.

This is to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 15(b) - Staffing - A provider having regard to the size and nature of the care service, the statement of aim and objectives and the number and needs of service users - (b) Ensure that persons employed in the provision of the care service receive - (i) Training appropriate to the work they are to perform; and (ii) Suitable assistance, including time off work, for the purpose of obtaining further qualifications appropriate to such work.

Timescale for improvement: To start immediately and be completed within eight weeks of publication of this report.

This requirement was made on 18 February 2016.

Action taken on previous requirement

Please see information under quality theme 3.

Met - outwith timescales

Requirement 6

The provider must review the present staffing each resident's dependency level and provide the calculations, collated evidence and action plan to the regulator for further discussion. The provider must ensure that the outcome of assessed need is reflected in the staffing numbers, which may fluctuate on a shift to shift basis to meet resident's needs and the skill mix to reflect the outcome of this review process. Rawyards Care Home must

note that the staffing schedule reflects the minimum staffing levels for eighty-eight service users. This calculation does not factor in any fluctuations in assessed needs and dependencies for each individual or take cognisance of the environment they live in; individuals' lifestyle choices; the deployment of staff; how other roles and responsibilities of staff have been factored in to minimise impact on direct care delivery hours by staff such as laundry duties or catering duties.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 15(b)(i) – Staffing.

Timescale: To start immediately and be completed within four weeks of publication of this report.

This requirement was made on 18 February 2016.

Action taken on previous requirement

Please see information under quality theme 3.

Met – outwith timescales

Requirement 7

The provider must ensure that at all times suitably qualified and competent persons are working in the service in such numbers as are appropriate to meet the health and welfare of service users.

(i) The provider must ensure an accurate review of each individual's dependency needs are calculated over a 24 hours period depending on their changing healthcare needs. These calculations must be taken into account which may require an increase in staffing at given times.

(ii) Staff recording the dependency of each resident must receive training and have an understanding of the information they are required to record in order to provide an accurate assessment. These assessments must include the physical, psychological, recreational needs and environmental layout of the home.

(iii) There must be a suitably qualified and competent person allocated to manage the home in the absence of the manager. Implement a system to ensure that staff are formally supervised, supported and monitored to enable them to improve their practice and competency in line with the training and support they have received.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 15 – Staffing.

Timescale for Improvement: To start immediately and be completed within four weeks of publishing this report.

This requirement was made on 17 August 2016.

Action taken on previous requirement

Please see information under quality theme 3.

Met – outwith timescales

Requirement 8

The provider must develop a clear, written training plan to demonstrate how and when training will be delivered to ensure all staff working in this care service receives training appropriate to their role and which is relevant to meet health, safety and welfare needs of service users. There must be a plan in place to prioritise the following training for all staff:

- Dementia Awareness
- Medication Administration and Accountability
- Management of Stress and Distressed Behaviour
- Wound Care
- Palliative Care
- Tissue Viability and Skin Care
- Infection Control.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 4(1)(a) - Welfare of Users and 15(b)(i) - Staffing.

Timescale for Improvement: To start immediately and be completed within four weeks of publishing this report.

This requirement was made on 17 August 2016.

Action taken on previous requirement

Please see information under quality theme 3.

Met - outwith timescales

Requirement 9

The provider must ensure that the outcome of in-house surveys and advice from action plans provided by visiting agencies such as Scottish Fire and Rescue Service or Environmental Health; the method of communicating these outcomes to the workforce; clearly specify the method to rectify and complete the action plans and the sanctions for failing to adhere to the information and protecting the people who use the facilities from risk of harm.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 4(1)(a) - Welfare of Users and 15(b)(i) - Staffing.

National Care Standards for Care Homes for Older People - Standard 4 - Your Environment

National Care Standards for Care Homes for Older People - Standard 5 - Management and Staffing Arrangements

Timescale for Improvement: To start immediately and be completed within eight weeks of publishing this report.

This requirement was made on 17 August 2016.

Action taken on previous requirement

Please see information under quality theme 4.

Met - outwith timescales

Requirement 10

The provider must ensure there are suitable quality assurance systems implemented with a formal action plan provided as evidence to the Care Inspectorate of the activities, effort, timescales and positive outcomes following the issues identified during this regulatory activity such as access to funds for the upkeep, the progress and development of the environment; the implementation of the preferred dependency tool is used to ensure staffing at levels to improve, maintain and sustain the health, recreational and spiritual needs of service users.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 4(1)(a) - Welfare of Users and 15(b)(i) - Staffing.

Timescale for Improvement: To start immediately and be completed within eight weeks of publishing this report.

This requirement was made on 17 August 2016.

Action taken on previous requirement

Please see information under quality theme 4.

Met - outwith timescales

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

Recommendation 1

The provider offers no secure garden or has any residents' gardening planning group to ensure the outside space is developed to meet the individuals assessed health and social needs.

National Care Standards for Care Homes for Older People - Standard 5: Management and Leadership

This recommendation was made on 15 December 2014.

Action taken on previous recommendation

Please see information under quality theme 2.

This recommendation had not been met.

Recommendation 2

The provider and management should review and ensure that the dining experience is informative with menus in a format that is suitable to the needs of all people who use the service. The environment and tables are pleasing to the eye, calm and pleasant atmosphere and are a positive event for all people who use the service.

This recommendation was made on 15 December 2014.

Action taken on previous recommendation

Please see information under quality theme 1.
This recommendation had been met.

Recommendation 3

The provider and management should ensure through training, supervision and monitoring of practice that at all times staff treat people who use the service, their visitors and colleagues with respect and dignity.

This recommendation was made on 15 December 2014.

Action taken on previous recommendation

Please see information under quality theme 3.
This recommendation had been met.

Recommendation 4

The provider should ensure there is a procedure in place to review and monitor staff competency levels to put into practice the information received through training courses attended including dignity, respect and choice especially in relation to the individual's appearance.

National Care Standard for Care Home for Older People – Standard 5: Management and Leadership

This recommendation was made on 18 February 2016.

Action taken on previous recommendation

Please see information under quality theme 3.
This recommendation had been met.

Recommendation 5

The provider should review the communication needs of people who use the service and ensure that staff have capacity and skills to meet these needs and have access to appropriate equipment and outside space to meet the individuals assessed health and social needs.

National Care Standards for Care Homes for Older People – Standard 5: Management and Leadership

This recommendation was made on 18 February 2016.

Action taken on previous recommendation

Please see information under quality theme 1.
This recommendation had been met.

Recommendation 6

The service should perform a risk assessment on the residents' capacity to manage their finances on admission to the service and on an ongoing basis and be encouraged by staff to exercise as active a role as possible in the management of their finances in accordance with:

Adults with Incapacity (Scotland) Act 2000 - Guidance for Managers - Code of Practice - 6.14, 6.13, 1.17.5, 6.26, 6.29, 7.12-17.

National Care Standards for Care Homes for Older People - Standard 9: Feeling Safe and Secure

This recommendation was made on 18 February 2016.

Action taken on previous recommendation

Please see information under quality theme 1.

This recommendation had been met.

Recommendation 7

The provider should ensure that the training plan contains topics that meet the focus raised by the Scottish Government, Dementia - Promoting Excellence and Stress and Distress.

National Care Standards for Care Homes for Older People - Standard 5: Management and Staffing Arrangements

This recommendation was made on 18 February 2016.

Action taken on previous recommendation

Please see information under quality theme 3.

This recommendation had not been met.

Recommendation 8

The provider should review the implementation and outcomes of their quality assurance system and process and its impact on the day-to-day lives of people who use the service.

National Care Standards for Care Homes of Older People - Standard 5: Management and Staffing Arrangements

This recommendation was made on 18 February 2016.

Action taken on previous recommendation

Please see information under quality theme 4.

This recommendation had not been met.

Recommendation 9

The service should ensure staff are trained appropriately for the promotion of good nutrition and eating well. The service should review the overall dining experience throughout the care home, presentation of tables, meals and accompaniments to stimulate the senses and encourage consumption of calories to protect the people who use the facilities from risk of weight loss or infection.

National Care Standards for Care Homes for Older People – Standard 13: Eating Well

This recommendation was made on 17 August 2016.

Action taken on previous recommendation

Please see information under quality theme 1.
This recommendation had been met.

Recommendation 10

The service should review the overall storage capacity available and usage thereof within the care home to reduce compromising choice, accessibility to areas such as the lounge, and to protect the people who use the facilities from risk of harm.

National Care Standards for Care Homes for Older People – Standard 4: Your Environment and Standard 9: Feeling Safe and Secure

This recommendation was made on 17 August 2016.

Action taken on previous recommendation

Please see information under quality theme 2.
This recommendation had been met.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings	
18 Jan 2017	Unannounced	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed

Date	Type	Gradings	
17 Aug 2016	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 2 - Weak 2 - Weak 2 - Weak
19 Feb 2016	Unannounced	Care and support Environment Staffing Management and leadership	Not assessed Not assessed Not assessed Not assessed
21 Aug 2015	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 2 - Weak 3 - Adequate 2 - Weak
15 Dec 2014	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
12 Sep 2014	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 3 - Adequate 3 - Adequate 3 - Adequate
9 May 2014	Unannounced	Care and support Environment Staffing Management and leadership	1 - Unsatisfactory 2 - Weak 2 - Weak 1 - Unsatisfactory
16 Dec 2013	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 2 - Weak
25 Apr 2013	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate Not assessed Not assessed

Date	Type	Gradings	
14 Dec 2012	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	Not assessed
25 Jul 2012	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	Not assessed
		Management and leadership	3 - Adequate
16 Mar 2012	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	Not assessed
9 Aug 2011	Unannounced	Care and support	2 - Weak
		Environment	3 - Adequate
		Staffing	2 - Weak
		Management and leadership	Not assessed
12 May 2011	Unannounced	Care and support	Not assessed
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	Not assessed
12 Jan 2011	Unannounced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	3 - Adequate
2 Nov 2010	Announced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	2 - Weak
4 May 2010	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	2 - Weak
		Management and leadership	2 - Weak

Date	Type	Gradings	
13 Nov 2009	Announced	Care and support Environment Staffing Management and leadership	2 - Weak 2 - Weak 2 - Weak 2 - Weak
23 Mar 2009	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 2 - Weak 2 - Weak
29 Jul 2008	Announced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 2 - Weak 2 - Weak

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