The Braes
Care Home Service Children and Young People
42A Wallace Crescent
Brightons
Falkirk
FK2 0HN

Inspected by: Lynne Nimmo
Type of inspection: Unannounced
Inspection completed on: 22 November 2011
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

<table>
<thead>
<tr>
<th>Area</th>
<th>Grade</th>
<th>Description</th>
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<tbody>
<tr>
<td>Quality of Care and Support</td>
<td>4</td>
<td>Good</td>
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<tr>
<td>Quality of Environment</td>
<td>4</td>
<td>Good</td>
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<td>Quality of Staffing</td>
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<tr>
<td>Quality of Management and Leadership</td>
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What the service does well

We found that children and young people continue to be cared for in an environment that is very well maintained. The staff team in place are committed to meeting their individual needs. They are skilled and experienced in residential care and work well together as a team.

What the service could do better

To enable the management and staff team to develop the service, the provider needs to make a decision about the remit of the service. Initially this was to be a short term unit, but evidence shows that this does not always meet the needs of the young people referred for a placement.

What the service has done since the last inspection

The staff have developed as a team and feel they have better working relationships with each other.

They have evaluated the work of the service and identified ways that it could be improved to better meet the needs of children and young people.
Conclusion

We found that the service provides a quality service to children and young people. They work well with other agencies so they can support the individual needs of young people.

Who did this inspection

Lynne Nimmo
1 About the service we inspected

The Braes is registered to provide a care service to five children and young people between the ages of 8 and 18 who have been assessed as requiring short term placements to support them during periods of crisis. They support children and young people during this period and help them to return home or move on to longer term placements.

The service was registered in June 2010. Before 1 April 2001 this service was registered with the Care Commission. On this date the new scrutiny body, Social Care and Social Work Improvement Scotland (SCSWIS), commonly known as Care Inspectorate, took over the work of the Care Commission, including the registration of care services. This means that from 1 April 2011 this service continued its registration under the new body Care Inspectorate.

The residential care service is situated in Brightons.

At the time of the inspection two young people were using the service.

The Braes aims to:

Establish a safe and positive looked after and accommodated experience.

Provide a high quality, professional service, facilitating a homely environment. Work with the young people and their families to support them to find solutions to allow the young person to return home speedily and safely (wherever possible).

Offer a balanced combination of structure, supervision and support will be provided by the team of care staff to assist young people in developing socially, physically and emotionally, in a safe and caring environment.

Act as positive role models for the young people which will contribute to the promotion of confidence and self worth.

Adopt a Child Centred philosophy, working with the young person, their families, social worker and school/further education to set clear safe boundaries that respect individual feelings, personal space and safety. Staff will offer continuity of care and a consistent approach in the implementation of the young person’s Care Plan.

Value and respect the young person and their family. The service provided will reflect anti-oppressive and anti-discriminatory values.

Adhere to all Government Standards and Legal Requirements.
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 3 - Adequate**

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.scswis.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
This report was written following an unannounced inspection which was carried out on Monday 21 November 2011 between 9.30 am and 5.00pm by Lynne Nimmo, Inspector. Feedback was given to the service on Tuesday 22 November 2011.

Information was gathered from the following sources

- young people’s care plans
- minutes of meetings - young people’s, staff and management
- risk assessments
- incident records
- staff consultation records
- evaluation report detailing the work of the service.
- surveys carried out by the service
- information from team development day.

Discussion took place with a range of care staff including:

- the manager
- senior care staff
- care staff
- young people

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

Of the six recommendations made five have been met. In relation to involving young people in planning their care, the recommendation is continued as this is an ongoing process for this service.

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 fully completed Self Assessment document from the service provider. We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each of the headings that we grade them under.

The service provider identified what they thought they did well, some areas for development and any changes they planned.

Taking the views of people using the care service into account

Two young people were present during some of the inspection. They were observed to be settled in the house and have good relationships with staff.

Taking carers' views into account

No carers views where sought at this inspection.
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

Overall 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

This report should be read along with the one we produced following the inspection carried out on 6 May 2011.

We found that the service has developed the use of formal and informal ways to encourage children, young people, parents and stakeholders to give their views on the quality of care and support.

Since the last inspection the service has used the questionnaires they had developed to gather views about the service from young people, parents, social work and health care staff. This information outlined what they thought were the positive areas as well as those for development.

Where possible, the manager and staff continue to gather relevant information about young people’s individual needs before their admission. This can be difficult when the placement is sought in an emergency situation, but staff endeavour to gather this as soon as possible. This then enables staff to support the young person in placement and help them establish routines. It also enables them to establish relationships with other agencies involved with the young people so they can work together.

Young people are encouraged to be involved in planning their care. Staff use Getting it Right for every Child (GIRFEC) with young people to detail how they will be supported to achieve good outcomes. Young people are aware the plans in place and know the proposed outcomes for them. We observed staff to be consistent in applying the plans and reinforcing why they are in place.
Areas for improvement

The service has used questionnaires as a way to gather views from young people, parents and other professional about the service. Although the feedback was mostly positive, areas for improvement had been identified. The service needs to show what action they take to address any issues raised and introduce any changes. See recommendation 1.

Staff should continue to encourage young people's involvement in their care. There are plans in place to further develop 'key worker' time and use this more effectively as a way to promote young people's involvement.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. Information gathered from surveys should be evaluated and where appropriate used to improve the service. It should be clear where any areas of concern are addressed.

   National Care Standards - Care home for children and young people - standards 7.9, Management and staffing.
Statement 3
We ensure that service user’s health and wellbeing needs are met.

Service strengths
We found that the skilled and experienced staff continue to meet the health and well-being needs of the children and young people in their care.

We found that the content and layout of young people’s care plans has been improved. All plans now contain the current formats being used to record information. As the documents are standardised it means that information about young people is easier to find. Staff continue to use a range of materials to support young people in their daily lives.

Since the last inspection, there has been an improvement in the way that Incident forms are completed. This mainly relates to the last section relating to Life Space Interviews (LSI) and any changes needed to care plans. We found more information to show who had been contacted following any incident young people had been involved in. Staff had also recorded any discussion they had had with the young person following any incident or their attempt to carry out a LSI. We acknowledge due to this being a short term unit, it is sometimes difficult to see the progress/changes that are made due to young people moving on.

The staff continue to be pro-active in contacting and working with other agencies to support young peoples health and well-being. For a short time they worked closely with a staff member from Children and Adolescent Mental Health Service (CAMHS). By having regular consultations and getting advice from them, staff were enabled to work better with young people. Due to a change in staff remits this does not happen as often, but the service still has links with CAMHS when needed. They also had a youth worker talk to young people about smoking and giving them advice about stopping. Young people, therefore, have access to a range of services who can offer advice and help them make positive choices about their lives.

As identified at the last inspection, the service has updated the handbook for young people.

There has been some improvement in the service notifying the Care Inspectorate about serious incidents or accidents young people are involved in.

Areas for improvement
Discussion with staff has identified they want to continue working on the handbook for children and young people. They should include information about the Care Inspectorate in the section about complaints and useful numbers.

The service does not always formally notify the Care Inspectorate as required when serious accidents or incidents occur. See requirement 1.
In one of the admission forms there is no space to record information about siblings. It would be helpful to have this information and the current relationship and any contact in place.

**Grade awarded for this statement:** 4 - Good

**Number of requirements:** 1

**Number of recommendations:** 0

**Requirements**

1. The service must notify the Care Inspectorate of any serious accidents or incidents involving young people.  
   **This is to comply with SSI 2002/114 Regulation 21- Notifications of death, illness or any other events. Timescale: from receipt of this report.**
Statement 4

We use a range of communication methods to ensure we meet the needs of service users.

Service strengths

We found after sampling evidence, observation of practice and discussion with young people and staff that there are very good communication systems in place.

Staff within the service have continued to work hard at establishing relationships with other agencies. For example they work closely with staff in Education to encourage and support the young people in placement to follow the education plan in place for them. When young people do not manage this, we observed staff to be very good at explaining why the plan is in place, the expectations of the young person to follow it and the consequences in place when this did not happen. Staff members were observed to have a consistent approach to ensure consequences were followed through. In taking this approach young people are given a clear message about the plans in place for them, what they are being supported to achieve and what happens if this they to not follow the plans in place.

A continued strength of the service is that staff use the systems in place to communicate effectively with each other, the young people and other agencies. The change over meetings, team meetings, planning meetings, and liaison with other agencies ensure that everyone is kept up to date with the current situation for young people. Within the service, this has improved the consistency in approach when working with young people.

Young people continue to have opportunities to discuss any issues and give their views about the service. They can do this with staff on a daily basis, house meetings and are encouraged and supported to attend meetings that concern them. Young people are well prepared for meetings and know what staff will be supporting them.

Where it is appropriate young people are supported to maintain contact with family and friends. Staff build relationships with families and work with them to ensure planned contact takes place. Relatives and friends are able to visit young people within the service.

Areas for improvement

Managers are aware they need to continue working with staff in area teams to ensure they have regular contact with the young people in placement. A continued area for development is ensuring that future plans are in place for young people.

There are plans in place to further develop the keyworker role. Discussion with the senior worker outlined how they plan to promote how the formal and informal time spent with with young people can be used effectively to follow the care plan in place.
Grade awarded for this statement: 5 - Very Good
Number of requirements: 0
Number of recommendations: 0
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
We found that young people continue to have good opportunities to influence changes within the service.

Young people who move into the service are able to personalise their rooms and are encouraged to help maintain the environment. Young people are aware of the rules in place and are encouraged to follow them. All young people have risk assessments in place and Individual Crisis Management plans (ICMP) that outline how any identified behaviours should be managed. Young people are involved in agreeing plans so they know how staff will support them.

A survey carried out by the service received positive feedback about the environment.

Care plans show where young people have been able to choose activities to be involved in. They have also signed an Internet agreement document agreeing to abide by rules in place when using the computer.

Areas for improvement
The service should continue develop and evidence the ways that young people, families and stakeholders are involved in influencing the use of the environment.

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
We found that the service continued to offer young people a safe, secure environment that is maintained to a high standard.

A range of policies and procedures continue to guide staff practice. These include child protection, restraint and procedures to be followed if young people abscond. It was evident from documentation that staff follow procedures to keep young people safe. Staff work with other agencies such as the Police and NHS staff to do so.

All young people have risk assessments which aim to minimise risk for young people are in place. In addition risk assessments for the environment and activities young people are involved in have been developed. This means staff have identified the areas in which young people need support and have strategies that promote their safety.

Two members of the management team are now trained to deliver restraint training to staff. This will ensure that staff are trained and complete refresher training as necessary to keep their skills up to date.

Areas for improvement
As previously reported, staff should continue to fully complete incident forms and used to show where LSI have taken place and care plans have been updated.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0
Statement 4
The accommodation we provide ensures that the privacy of service users is respected.

Service strengths
We found after inspecting the environment, talking with staff and observing practice that privacy of service users is respected.

All young people have access to single, en-suite rooms which they can lock.

The facilities available within the house offer separate rooms for young people to be together or participate in individual activities. The kitchen/dining area has direct access to the garden area. Young people also have access to a computer suite. Therefore, giving them a choice of how to spend their time when at home.

The information booklet for the service outlines to young people what the service provides for them and what they can expect when they live at The Braes. All information regarding young people is stored securely.

Areas for improvement
As previously stated the service are continuing to update their handbook for young people. Information about the Care Inspectorate should be included within this.

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
Since the last inspection we found that children and young people have had some opportunities to assess and improve the quality of staffing in the service.

On a daily basis children and young people had opportunities to meet and discuss any issues with staff and management.

Young people have been involved in the recruitment process for staff. They have attended training which has helped them understand the procedure and their role within this.

They are also able to give their views about staff involved in their lives through the review process, social worker or Who Cares? worker.

Staffing ratios continue to be increased to meet the needs of the young people in placement.

Areas for improvement
The provider and service should continue to develop the opportunities for young people and their families to give their views about staffing.

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
After sampling of the evidence provided and discussion with staff, we determined
that the service continues to operate at a good level.

Since the last inspection the staff have participated in a development day. Staff views
were sought about what they thought they did well and what areas they wanted to
make improvements in. Staff feel this event has helped improve working
relationships as they know each other better and recognise individual strengths, skills
and experience.

Staff feel valued and well supported by colleagues and managers. They continue to
see team meetings, handover meeting and supervision as useful forums to discuss
practice and share information about young people, training and good pieces of work
they undertake with young people.

Staff continue to work well with other agencies and share relevant information with
them. Since the last inspection a member of staff has worked with the Intensive
Family Support Service (IFSS) to deliver a parenting group. This enabled parents to
consider how they were parented and discuss their own parenting style. As staff
work with other agencies they are able to share skills and knowledge and work with
parents of the young people they care for.

Information and discussion with staff demonstrated that they continue to know
young people well. They build relationships with families by having regular contact
with them. Observation of practice demonstrated that staff continue to be skilled at
interacting with young people, raising issues with them and implementing the care
plan in place.

Areas for improvement
We identified that the training opportunities for staff have reduced since the last
inspection. Although mandatory training is still accessible there seems to be fewer
training opportunities for staff to further develop their skills and experience. An
annual training plan should be developed for the service that outlines service
priorities and individual staff training needs that will enable them to meet the needs
of the young people they work with. See recommendation 1.
Grade awarded for this statement:  4 - Good

Number of requirements:  0

Number of recommendations:  1

Recommendations

1. An annual training plan should be developed for the service to outline service and staff training needs.

   National Care Standards - Care home for children and young people - standards 7.8, Management and staffing
Statement 4
We ensure that everyone working in the service has an ethos of respect towards service users and each other.

Service strengths
We observed during the inspection that all staff interact with young people in a positive and respectful way.

As previously reported all staff were observed to interact with young people in a positive way. They were consistent in their approach, ensuring that young people are given a clear message that their care plans are being followed as agreed. As staff take this approach young people experience being treated with respect and not being given mixed messages which they can find confusing.

All staff are aware of the National Care Standards and Scottish Social Services Council (SSSC) codes of conduct.

Areas for improvement
Staff should continue to be positive role models for the young people in placement, interacting with them in consistent ways.

Grade awarded for this statement: 5 - Very Good
Number of requirements: 0
Number of recommendations: 0
Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 3 - Adequate

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
We found there has been limited opportunities for young people, their families and stakeholders to participate in assessing and improving the quality of management and leadership.

The ways in place at present include seeking their views through daily communication and questionnaires. Young people have opportunities to discuss the service and raise any issues with external managers or the Who Cares? worker.

Parents, carers and stakeholders have opportunities to comment on the service provided at reviews and meetings.

Areas for improvement
Further opportunities need to be offered to young people and their families in regard to giving their views about management and leadership. In addition managers intend to use the information given at review meeting to review and develop the service.

Grade awarded for this statement: 3 - Adequate

Number of requirements: 0

Number of recommendations: 0
Statement 3
To encourage good quality care, we promote leadership values throughout the workforce.

Service strengths
We found that the service is good at promoting leadership values throughout the workforce.

As previously noted, team meetings and handover meetings are used to discuss the service, share staff views and give them guidance to support young people.

Staff feel very involved in developing the service and are able to take initiatives forward. Since the last inspection staff have developed the care plans used for young people. They have worked hard to establish GIRFEC within the service to meet the individual needs of young people.

Staff use their initiative when working with young people. For example one member of staff identified that a young person responded better to visual prompts to help them in their daily routines. In using this to help them staff are using their experience to enable young people in what they are doing and achieve good outcomes.

Areas for improvement
The service should continue to involve staff in the development of the service and develop their roles and responsibilities.

The service has applied for a variation to change the management structure. In addition to this the remit of the service is currently being reviewed by the provider. Until these areas are decided upon, it is difficult for staff to develop the service until they know if they are to continue as a short term unit or not. Therefore, the provider needs to decide this as a matter of priority to enable staff to continue the development of the service. During this period of transition it would be helpful to have a development plan for the service to identify short term goals. See recommendation 1.

Consideration also needs to given to training needs of senior staff if they are to take on more leadership responsibilities and supervision of staff. See recommendation 1 in Quality Theme 3, statement 3.

Grade awarded for this statement: 4 - Good

Number of requirements: 0
Number of recommendations: 1
Recommendations

1. A development plan for the service should be compiled to identify, in the first instance, short term goals for the service.

   National Care Standards - Care home for children and young people - standards 7.9, Management and staffing.
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

Since the last inspection information has been gathered to evaluate the work of the service. A report outlines the positive aspects of the service and identifies areas for improvement.

The service has developed the use of surveys and has gathered views of young people, their families and other professionals involved in their lives. This has provided them with positive feedback as well as areas for improvement.

The team development day offered staff the opportunity to comment on the service and the work they do. This enabled them to identify what they did well and how they wanted the service to develop. For example this included partnership working and keyworker time.

An annual report about the service identified gaps in practice such as not always having referral information, not having enough meeting during a young person’s placement and that the 12 week timescale for young people to be there is too short.

The local authority continues to monitor the work of the service in various ways such as through reviews and corporate meetings.

Areas for improvement

Although quality assurance systems had been used more since the last inspection, due to changes in the management team, it was not clear how the information would be used to improve the service. Information should be collated, evaluated and used to inform the development of the service. Where any issues have been raised, the service needs to show how they have been addressed. See recommendation 1 in Quality Theme 1, statement 1.

Due to a change in the management team, there has been no action taken on the areas identified for improvement at the team development day. Consideration needs to be given to using this information to improve the service see recommendation 1.

Consideration could be given to using quality assurance models to evaluate the service.
Consideration should be given to developing the information included in the self assessment. It would be helpful if outcomes for young people were identified as well as examples of good practice. Staff also need to consider how they demonstrate the range of work they undertake with young people at inspection. As this is a short term unit, when young people move on all their information is passed on. This can make it difficult to track young people and see the positive outcomes for them.

**Grade awarded for this statement:** 4 - Good

**Number of requirements:** 0

**Number of recommendations:** 1

**Recommendations**

1. An action plan based on the evaluation information from the team development day and annual report could be developed to improve the service.

   *National Care Standards - Care home for children and young people - standards 7.9, Management and staffing.*
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
N/A

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 SCSWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).
5 Summary of grades

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6 Inspection and grading history

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<th>Date</th>
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<td>Care and support 4 - Good</td>
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<td>Environment 4 - Good</td>
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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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