Grange Hall
Care Home Service Adults
Drygrange
Melrose
TD6 9DH
Telephone: 01896 848802

Inspected by: Mandy Falconer
Type of inspection: Unannounced
Inspection completed on: 24 August 2012
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Service provided by:
Grange Hall (Scotland) Ltd

Service provider number:
SP2003001966

Care service number:
CS2003009179

Contact details for the inspector who inspected this service:
Mandy Falconer
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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

<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>5</td>
<td>Very Good</td>
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<tr>
<td>Quality of Environment</td>
<td>5</td>
<td>Very Good</td>
</tr>
<tr>
<td>Quality of Staffing</td>
<td>6</td>
<td>Excellent</td>
</tr>
<tr>
<td>Quality of Management and Leadership</td>
<td>5</td>
<td>Very Good</td>
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What the service does well

We found that the service treated residents with respect and dignity in all aspects of their care. We saw that care plans were person centred and were written with the assistance of the residents and their families or carers.

We found staff to be well supported through regular training and supervision. We found staff to be well motivated and enthusiastic about their roles.

What the service could do better

The service should continue to maintain their very good standards in all areas of the care offered.

What the service has done since the last inspection

The service continues to involve residents, relatives and staff in all aspects of the service. People were encouraged to express their views through the regular meetings. Use of questionnaires and were provided with opportunities to speak with the manager throughout the day.
Conclusion

Overall, we found that Grange Hall provided a very good service to older people with a range of abilities. We found that staffing levels were constantly reviewed and were sufficient to meet the needs of the current resident group.

The care home provided excellent opportunities for staff to receive training and to improve their skills and experience.

The feedback we received from residents, relatives and staff was that Grange Hall was a lovely place to live and work.

Who did this inspection

Mandy Falconer
1 About the service we inspected

Grange Hall is registered to provide care and accommodation for up to 49 older people. However, at the time of inspection there were 46 residents living in the home, but no residents at the time receiving pre-arranged respite care.

The home is able to offer long term nursing, residential and respite care.

Grange Hall was built in the 1800’s as a large private house and was converted into a care home in the 1980’s. The home is set in extensive private grounds with its own parking. The home is situated between the Scottish Border towns of Earlston and Melrose.

Resident’s accommodation is provided over four floors with access to each floor provided by stairs and a lift. All resident’s bedrooms are single rooms, some of which have en suite facilities. Appropriate bathing and toilets are available on each floor. There are separate kitchen, laundry and staff facilities in the home.

The philosophy of care and residents charter within Grange Hall states that “the company seeks to deliver the highest standards of care in a professional manner, within a safe, caring and homely environment within reach of the community”.

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 2011, this function was carried out by the Care Commission. Information in relation to 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 its service, 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.
- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reforms (Scotland) Act 2010 and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Inspectorate.
Based on the findings of this inspection this service has been awarded the following grades:

**Quality of Care and Support - Grade 5 - Very Good**  
**Quality of Environment - Grade 5 - Very Good**  
**Quality of Staffing - Grade 6 - Excellent**  
**Quality of Management and Leadership - Grade 5 - Very Good**

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

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

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

What we did during the inspection
We wrote this inspection after carrying out an unannounced inspection that took place over two days on 13th and 24th August 2012. The inspection was carried out by Inspector Mandy Falconer.

As requested by us, the care service submitted an annual return and self assessment prior to the inspection taking place.

We sent out 20 service user questionnaires and 11 were returned. We sent out 20 carer/relative questionnaires and 12 were returned.

As part of the inspection we reviewed a sample of information relating to the quality themes inspected including the following:

- five support plans and risk assessments
- policies and procedures
- accident records
- duty rotas
- maintenance records
- incident records
- staff training records and staff personnel files
- minutes of staff, resident and relatives meetings
- information available about the service offered
- medication records
- nutritional risk assessments and menus
- activity records and life histories
We also spoke to the following people:

- registered manager
- registered nurses
- two senior carers
- six care staff
- five relatives
- seven residents
- activity coordinators
- chef

We also spent time looking around the home and checked individual bedrooms and communal areas. We also spent time observing staff working with residents in the communal areas.

Grading the service against quality themes and statements

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

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

Inspection Focus Areas (IFAs)

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

Fire safety issues

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

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

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a ‘self assessment’ form telling us how their service is performing. We check to make sure this assessment is accurate. The self assessment was completed online as requested by us.

The manager had consulted with staff, residents and relatives and incorporated their views into the assessment.

We found that the information contained in the self assessment was reflective of the documentation we reviewed during the inspection. We felt the manager had graded the service at the appropriate level.

Taking the views of people using the care service into account

We sent out Care Inspectorate questionnaires to residents living in the service and we received 11 completed questionnaires. We also spoke with residents during the inspection.

Comments received included the following:
"I think the place is lovely and I am very well looked after"
"my daughter couldn’t have found any better place for me"
"you couldn’t find a better home"
"I love my room, I can watching TV, listen to music or just look at the view"
"Staff are excellent always popping in and out through the day"
"We are very happy we took a long time to choose the home and we made the right decision"

From the 11 questionnaires returned eight strongly agreed the service was very good overall and two happy. One person disagreed, however, did not leave any comments.

Whilst speaking with residents they commented on how good the staff were and that there was always plenty of staff around to meet their needs. Residents said there was a very good range of activities on offer including arts and crafts, music events, painting, church services, exercise, sonas and regular outings to Ratho, local garden centres and places of interest. The residents had enjoyed a recent visit from the animals from Gorgie farm.
Taking carers’ views into account

We sent out Care Inspectorate Questionnaires prior to the inspection and we received 12 back from relatives and carers as well as speaking with relatives visiting the service.

Comments from relatives/carers included the following:

“Very satisfied with care my relative receives”

“Staff always friendly and quick to attend to anything you ask them to attend to”

“I find staff don’t always have the information I require or do not have the time to speak”

“We are very impressed by the quality of the care provided by the staff at Grange Hall. All members of staff treat my mother with respect and are very aware of her personality traits”

“My mothers bedroom is spacious, well maintained and has a picturesque outlook”

We found that relatives were very happy with the quality of the staff working in the home and felt that there was always sufficient staff on duty. Relatives liked the fact that staff were always present in the communal areas throughout the day.

Overall we found that people were either very happy or happy with the quality of the service offered within the home.
3 The inspection

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

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

We graded this quality statement as 6 - Excellent at the previous inspection and we awarded a 6 - Excellent at this inspection.

We found that the service continues to offer opportunities for people to participate in all aspects of the service provided. Regular meetings continue to take place and open agendas allow people to contribute to the discussion.

Regular social events provided an opportunity for relatives and residents to get together with staff and enjoy various outings and fairs. Recent events have included Ratho boat trips, jubilee celebrations, Olympics day and summer fete.

Monthly relative, resident and staff meetings take place in the home and this was confirmed by everyone we spoke with. Topics for discussion included a range of subjects about staffing, environment, activity planning, preparation for Care Inspectorate inspection. Agendas were open and everyone was able to contribute to the meetings. On occasions guest speakers attended the meetings and relatives found these interesting.

The self assessment had been discussed at all the meetings and everyone had been asked their opinion of how the service was performing.
The latest survey carried out within the home rated the service as performing at an excellent level. The survey had been sent to a sample of residents, staff, relatives and visiting professionals.

Comments from the survey included the following:

“What I am always kept informed of what’s going on”

“What care is based on person-centred approach and the resident is in the centre of everything”

“The grounds are lovely for a walk”

“I go out with my visitors”

“I feel the management is strong and I feel very safe”

“Very grand building set in beautiful surroundings”

“Training at Grange Hall is second to none”

“Always a pleasure to visit, warm and welcoming and humorous atmosphere”

We found notice boards around the home advertising social events, cards from relatives saying thank you for the good work, information about what the service has to offer to any resident or their family.

Up to date information about the activities on offer as well as lots of examples of residents art work around the home.

The care home offers a very good variety of internal and external social events for the residents. A digital photo frame was in the main reception area showing lovely pictures of residents taking part in activities and outings.

We reviewed the support plans of residents and found very good information about how individuals liked to spend their day. Through discussion with relatives and residents we found that they were very involved in the care planning process. Formal reviews were carried out every six months with relatives and representatives invited to participate. During our inspection reviews were taking place for three residents.

**Areas for improvement**

The service should continue to maintain their current excellent standards in this area.

**Grade awarded for this statement:** 6 - Excellent

**Number of requirements:** 0

**Number of recommendations:** 0
Statement 3
We ensure that service users’ health and wellbeing needs are met.

Service strengths
We graded this quality statement as 5 - very good at the previous inspection and the care home had maintained their very good standards in this area and we awarded a grade of 5 - very good at this inspection.

We evidenced this through discussion with residents, relatives and staff as well as reviewing care plans and observing staff practice whilst assisting residents with their care.

As part of the inspection we reviewed five support plans and found very good information on how residents needs were being met within the home, how they liked to be supported and who their named nurse and keyworker was.

The care plans contained information about past and present medical conditions, their current medication, life histories and “all about me” person centred information about the help they needed with daily living skills.
Risk assessments were in place for nutrition, falls, pressure area care, moving and handling and dependency assessment.

Any additional care plans required for specific health problems like diabetes, dementia, heart conditions etc were in place for those that needed them. We found that care plans were evaluated on a monthly basis by the registered nurses or supervisors, or sooner if needs changed. Regular reviews were carried out both internally and externally by the Social Work department.

All residents were registered with the Earlston Doctors practice unless residents had kept their own GP that they had prior to moving into the home. Dr. Bond and Dr. Seabrook were contracted by the home to provide a weekly surgery to ensure that the care residents received was consistent. The staff were able to ask the GP’s to see individual residents as needed. The doctors carried out regular reviews of the medication residents were prescribed and and Dr. Seabrook and the manager had recently carried out an audit of all the analgesics used in the home. Psychotropic medications were due to be audited and discussion about the use of this type of medication within the care home.

We found that staff were respectful of residents needs and abilities and adapted their support to individual people to enable them to maintain as much independence as possible.
Care staff said that they were well supported by their supervisors and the management team and felt that the training offered was second to none. Staff were found to be very enthusiastic about their role within the home. Staff said they were well trained to meet the needs of the residents.

We spent time looking at menus and sampled the range of food on offer within the home. We spoke with the chef and residents and relatives about the quality of the food. The chef informed us that he regularly spoke with residents to ask what they thought of the menus and the food offered. If changes were needed the chef would adjust the menu to suit their preferences. The chef was able to change the menus and had no problems with the food budget within the home. The chef had a very good understanding of the individual diets of the residents and had received training on the nutritional needs of the elderly.

**Areas for improvement**
The service should continue to maintain their very good standards in this area.

**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: 5 - Very 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
Comments made under quality statement 1.1 also apply to this quality statement.

We found that the provider was committed to making continued improvements within the home and had a plan in place for ongoing refurbishment.

Ten new en suite bathrooms were planned and the notification had been received by the Care Inspectorate about the work taking place. Bedrooms were refurbished as they were vacated and we saw several rooms that had recent new decoration, carpets and furnishings.

We spoke with relatives about the homes environment and most had chosen the home because of the style of the building and its surroundings.

We noted that relatives and residents were asked their views about improvements that could be made around the home and this was progressed by the provider and the manager.

Areas for improvement
The service should continue to maintain their excellent standards in this area.

Grade awarded for this statement: 6 - Excellent
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 graded this quality statement as 5 - very good at the previous inspection and we found that the service had continued to maintain their current standards and we awarded a 5 - very good at this inspection.

We evidenced this through discussion with the manager, reviewing maintenance records and speaking with staff, relatives and residents.

The home employs two maintenance staff who were responsible for the day to day upkeep of the care home, the gardens and the records.

We spoke with one maintenance staff member who showed us all the regular checks they were responsible for carrying out, including water temperature checks, emergency lighting, bed rail and equipment checks, fire risk assessments, regular drills and equipment checks and generator checks. The homes administrator kept robust records of all the equipment checks that took place within the care home including service records for hoists, lifts, electrical appliances, gas safety checks and mattresses.

We spoke with staff working in the care home who all said they had a very good supply of moving and handling equipment including hoists, standaids, handling belts and slings to assist residents. Staff had all received health and safety training as well as infection control to ensure high standards of cleanliness and good hygiene practices were carried out. Staff had access to protective clothing including gloves and aprons to prevent cross infection.

We found that good laundry and waste systems were in place within the home and all staff wore uniforms whilst at work.

Contracts were in place for the removal of clinical waste and household waste from the home and staff knew the correct procedure for disposal of rubbish within the home.

All visitors were required to sign into the home to ensure that the correct fire procedures could be adhered to and so that they knew who was in the home. Policies were in place for people visiting the home, including children.

Policies were in place for health and safety, infection control, waste management and moving and handling.
Housekeeping staff were employed within the home between 7.30am and 6.30 pm each day at the request of relatives and carers.

The care home carried out safe recruitment practices to ensure that robust checks had been carried out on all new staff employed including taking up references and PVG (Protection of Vulnerable Group) checks completed.

**Areas for improvement**

The service should continue to carry out regular checks on the environment and ask the views of residents and relatives of their ideas for improvement.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0
Quality Theme 3: Quality of Staffing
Grade awarded for this theme: 6 - Excellent

Statement 1
We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service Strengths
Comments made under quality statement 1.1 also apply to this quality statement.

Areas for improvement
The service should continue to maintain their current excellent standards in this area.

Grade awarded for this statement: 6 - Excellent
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**

We did not grade this quality statement at the previous inspection and we awarded a 6 - Excellent at this inspection. We evidenced this through discussion with staff and reviewing staff training records and supervision.

The care home had a yearly training plan in place and forthcoming training included:

- Health and safety
- Adult support and protection
- Dementia awareness
- Diet and nutrition
- Challenging behaviour

We spoke with all levels of staff during the inspection and found that staff had attended variety of training over the past year including:

- SVQ(Scottish Vocational Qualifications)
- Supervisory management
- Palliative care
- Elder abuse
- Dementia awareness
- Fire training
- Infection control
- Food hygiene
- Ageing process
- Adults at risk
- Preventing infection in care settings
- Moving and handling

All staff said they were invited to monthly staff meetings and we reviewed the minutes of the meetings and found a range of topics discussed. All staff were responsible for reading the minutes of the meetings if they had not been able to attend. Meetings were open to all grades of staff and staff reported that communication was very good within the care home.
Staff attended daily hand overs to find out what was happening in the home on a daily basis.

Staff supervision was carried out every two to three months and all staff that we spoke with felt that this was very worthwhile as they were able to discuss their training needs and any issues within the home.

Staff commented that the manager/matron was very approachable and worked regularly on the floor and had a very good understanding of what was happening in the home.

Relatives and visitors felt that staff were very professional and that they were made very welcome in the home when visiting.

We found that the office and medical room contained lots of good practice materials for staff to read during the day. Staff also commented that they were encouraged to read the care plans of the residents on a regular basis.

We found that the manager and provider were committed to offering staff progression within the service and staff were encouraged to continue their training. Senior staff had all undertaken supervisory management training and were now undertaking supervision sessions with the care staff.

Staff who were eligible to be registered with SSSC(Scottish Social Services Council) had been registered and the provider had paid for their registration. Newsletters provided regular updates about staff training and any recruitment that had taken place.

**Areas for improvement**

The service should continue to offer training to staff to enable them to have the skills and experience to meet the needs of the residents.

**Grade awarded for this statement:** 6 - Excellent

**Number of requirements:** 0

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

Statement 1
We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths
Comments made under quality statement 1.1 also apply to this quality statement.

Areas for improvement
The service should continue to maintain their current excellent standards in this area.

Grade awarded for this statement: 6 - Excellent
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
We did not review this quality statement at the previous inspection. We awarded a grade of 5 - very good at this inspection.

We found that the service had very good systems in place to audit the quality of the service provided. This included sending out regular satisfaction surveys, completing regular audits of medication, care plans, falls, accidents, environment, staffing and training.

The local GP also carried out regular audits of residents medication including the use of analgesics and psychotropic medication.

We saw that there was an action plan drawn up for any areas where improvements were needed with clear timescales and responsible person.

The inspector spent time reviewing accident and incident records and found these to be completed well, with regular reviews by the manager.

The home had a complaints procedure in place and we saw that no complaints had been received about the service.

The home had policies and procedures in place and these were reviewed by the manager and provider in line with current good practice.

All staff employed in the service were given copies of the SSSC codes of conduct and copies of the staff handbook were available throughout the home.

The service was very good at notifying the Care Inspectorate of any incidents, deaths or staff issues within the care home.

Areas for improvement
The service should continue to maintain their very good standards in this area.

Grade awarded for this statement: 5 - Very Good
Number of requirements: 0
Number of recommendations: 0
4 Other information

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

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

Additional Information
The service was not required to submit an action plan following the previous inspection.

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 SCWIS 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

### Quality of Care and Support - 5 - Very Good

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### Quality of Environment - 5 - Very Good

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### Quality of Staffing - 6 - Excellent

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### Quality of Management and Leadership - 5 - Very Good

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## 6 Inspection and grading history

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<th>Type</th>
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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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