

Care service inspection report

Belhaven Day Care Troon

Support Service Without Care at Home

13 Academy Street

Troon

KA10 6HR

Inspected by: Michael Thomson

Type of inspection: Unannounced

Inspection completed on: 12 October 2012



HAPPY TO TRANSLATE

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Service provided by:

Heatherpark Community Services Ltd

Service provider number:

SP2007009496

Care service number:

CS2007167362

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Summary

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

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

We gave the service these grades

Quality of Care and Support	4	Good
Quality of Environment	5	Very Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership	5	Very Good

What the service does well

The service offers a very good standard of care and support. Service users are very happy that they are treated as individuals and their care and support is provided in a way that they like and want.

Service users told us that they are always given a lot of choice on what they can do when attending the service. They are able to interact together within the service and at times go out into the community with support from staff on an individual basis to complete personal tasks. Service users told us that the service gives them a very important opportunity to meet other people in a comfortable, good and safe environment.

What the service could do better

The service should continue to offer service users the good quality of service they currently receive.

The service should continue to monitor and strive to develop their records and systems to best evidence focus on service users and their views.

The service should ensure that electrical equipment is always checked timeously.

What the service has done since the last inspection

The service has responded well to the issues we raised at the time of the previous inspection. Recording systems had been developed further and offered clearer account of people's views at their reviews. The service had introduced an independent audit on their service and this had given them some areas to progress. At the time of this inspection we saw that they were responding to the issues which had been raised.

Conclusion

The service continues to offer service users a good and valued service which they state meet their needs and interests. Service users believe that they have a good level of influence on the service that they receive. Service users told us that the staff were very good at their work and always treat them respectfully and as individuals.

The service operates to a very good standard and is continuing to establish ways to further improve their support to those who use the service.

Who did this inspection

Michael Thomson

1 About the service we inspected

"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

The Care Inspectorate will award grades for services based on findings of inspections. Grades for this service may change after this inspection if we have to take enforcement action to make the service improve, or if we uphold or partially uphold a complaint that we investigate.

The history of grades which services have been awarded is available on our website. You can find the most up-to date grades for this service by visiting our website, by calling us on 0845 600 9527 or visiting one of our offices.

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 Reform (Scotland) Act 2010 and Regulations and Orders made under the Act, or a condition of registration. Where there are breaches of Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Inspectorate."

Belhaven Day Care, Troon is located in the town centre. It is part of the services provided by Heatherpark Communities Service Ltd. which comprises of four services within the care sector promoting specific care for their clients. It has a sister service located in Prestwick.

The Day Care Centre provides support to older people who attend on a daily basis between the hours of 9:00 am and 6:00pm. The service is provided to 10 people per day over 365 days. Each person may have one or two days per week.

The service aims to:

"Promote social stimulation by using the community facilities, encouraging people to keep up previous interests, and support people to develop new interests."

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 5 - Very Good

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - Grade 5 - Very Good

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

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

2 How we inspected this service

The level of inspection we carried out

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

What we did during the inspection

We wrote this report after an unannounced inspection of Belhaven Day Care Troon which took place between 13.30hrs and 17.00hrs on 11 October 2012 and 9.45hrs and 13.00hrs on 12 October 2012. The inspection was carried out by Michael Thomson, Care Inspector.

The manager had sent us an annual return and a Self Assessment as requested by us.

We met with service users on both days of inspection. In this inspection we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents, including:

Service users' records including personal plans

Risk assessments

Participation strategy

Questionnaires on service users views of the service

Audit on questionnaires

Monitoring Officer's report

External Audit on service

Records on one to one conversations and visits with clients

Service information pack

Staff meeting minutes

Staff training records

Service's training plan and induction programmes

Registration and insurance certificates

Maintenance records

Records relating to the service's minibus

Complaints procedure

Complaints records

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 requirements we made at our last inspection

The requirement

The provider must ensure the wellbeing of service users at all times. In order to achieve this the Provider must ensure that:

Staff receive training on the need to maintain accurate records relating to medication.

This is to comply with: The Public Services Reform (Scotland) Act 2010 (Requirements for Care Services) Order SSI 2011/210 Regulation 4 (1)(a) - A regulation regarding Health and Welfare, 5(i) - A regulation regarding Personal Plans and 11(b) - A regulation regarding Staffing

Timescale: Within 24 hours of receipt of this report.

What the service did to meet the requirement

This had been done to a satisfactory level. See Statement 1.4 in this inspection report.

The requirement is: Met

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 had been completed to very good standard. The manager had highlighted the service's strengths and areas for improvement.

Taking the views of people using the care service into account

People using the service were very happy with the service they received. They told us that staff were very good and friendly. They said that the service was vital to them and gave them somewhere to go and the chance to meet people that they otherwise would not have had.

We were told that the service was focussed on them and that they were well cared for by staff who knew them well.

They told us that they were able to become involved in activities within the service or were able to out into town assisted by staff to carry out a number of functions.

Service users told us that the staff looked after them and kept an eye to their wellbeing.

One person said that there was a little bit of a delay between receiving the various courses when they had their lunch. No other issues were raised with us by service users.

Taking carers' views into account

We received no comments or input from relatives relating to 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

Grade awarded for this theme: 4 - Good

Statement 1

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

Service strengths

The grade awarded for this quality statement at the previous inspection on 20 March 2012 was 4 - Good. The evidence we sampled at this inspection increased the grade to 5 - Very Good. We concluded this after we read the available evidence and also took account of what had been written and stated by those using the service.

Service users and their carers continued to be involved in assessing and influencing the quality of their care and support received. This continued to be done to a very good standard. Service users said that they could speak to staff at any time and about anything. Mini Forums had continued and service users told us they were able to influence all aspects of the service through these. We observed interactions between staff and service users and heard people being asked for their opinions on activities and general care throughout the inspection.

In the last inspection we made the recommendation that:

"The manager should develop a more detailed record of care plans and reviews relating to the support and care to be offered to service users."

We saw that records of care plans and reviews had improved. Care plans now contained more detail showing much clearer individuality in service users' support planning. Service users' reviews showed their opinions on the service and how they felt about the service they received.

The service had developed a large print brochure to ensure all service users were aware of the service available to them. Each service user had a contract in place and this was retained in their individual files.

Records maintained by staff highlighted the options service users had when attending the day care service. Records showed us that service users had chosen what to do and where to go. The clients told us that the one to one time was very important to

them. This allowed them to go to town, to banks, hairdressers or for a walk. They told us that they were able to decide what to do with this dedicated personal time. They told us that some times they liked to use it and sometimes they didn't.

The service had a strategy to establish service users' wishes. This included questionnaires and an internal and external audit. Both of these highlighted that service users considered the service to be very good or excellent. We found that feedback to us reflected this also.

We found that the service supported service users with hearing impairment. This was noted in service users' files. We saw that the service also had a Loop System which assists people with hearing aids who had hearing impairment. Feedback from the external audit highlighted the need to ensure that all staff were familiar with the loop system and that more consideration could be given to activities and interests for service users with visual impairment. The service had begun to address these issues.

Comments from service users included:

"The girls are nice, polite and pleasant"

"I feel safe in this service...I really like the day service, it is really beautiful. I always like coming here, the company is good"

"Service excellent. The staff are all nice and quite good at the things they do...attitude of the staff is very good...(staff) good at knowing when you are under the weather"

"The staff are quite crafty at bringing things into games and activities to get your mind going"

"You get tea and coffee anytime and they know what I like"

Areas for improvement

The service should continue to build on the very good opportunities it gives service users to be involved in their care and support. The service should action those developments noted in their internals and external audits of the service.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

The grade awarded for this quality statement at this inspection was 5 - Very Good. We concluded this after we read the available evidence and also took account what had been written and stated by those using the service.

The service had referral information which highlighted service users' needs. This

information contained detailed information on each service user's health and wellbeing. Details included contact details for their doctor and community health professional supports. Service users told us how staff knew them and realised when they were "under the weather". We saw that staff observations had raised health care issues for a service user which had helped to highlight changes in their health status. We saw that professional advice was being followed within the service to support service users.

Individual care and support plans were developed from the information noted above, along with that from service users and their families. Six monthly reviews had been carried out on each service user. This allowed a formal opportunity to discuss any changes in need and if the service users' needs were being met. Service user's details were also documented in a way that allowed access quickly to a folder in an emergency. This summarised individuals' needs and contained all required information which may have been required to shared with health care professionals.

We found that service users' records and files had been very well organised and streamlined. This ensured easy access to clear and accurate information on the needs and wishes of service users.

The service had a medication policy. This allowed staff to encourage, support or remind service users to take their medication. This support was clearly documented in the service users' care plans. All medication taken by service users was recorded in the medication book. Staff had completed internal or external training on medication to ensure good practise. A copy of our medication policy was given to staff. New weekly audit on medication records had been introduced to monitor and ensure safe practice.

Staff had access to training courses to ensure service users' health and well-being.

Training had included:

Moving and Handling,

Risk Assessment,

Infection Control,

Health and Safety

Medication.

The service intended to introduce training in December relating to dementia and this was intended to become an integral part of in-house training for all staff.

The service assisted service users to attend appointments to clinics, chiropodists, opticians, and other relevant services. Service users told us that they are encouraged to do exercises. The service had DVD's and a Wii (sport/fit) for those who were interested.

Service user's had been involved in outings to promote social interaction and staff had regularly escorted service user's on outings, with shopping tasks or when

attending health appointments.

Service users told us that they received a 3 course meal on a daily basis, which they enjoyed and valued.

The detail and recordings of care plans and statutory reviews had been improved as noted in Statement 1.1

Areas for improvement

The service should continue to provide the very good level of service which the service users valued.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

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

Service strengths

The grade awarded for this Quality Statement at the last inspection was 3 - Adequate. The evidence we sampled at this inspection raise the grade to 4 - Good. We concluded this after looking only at the issues we highlighted in the previous inspection.

In the previous inspection we made a requirement:

"The provider must ensure the wellbeing of service users at all times. In order to achieve this the Provider must ensure that:

Staff receive training on the need to maintain accurate records relating to medication".

Action taken:

At the last inspection we highlighted an issue not with medication practice itself, but with communication around medication. This had been looked at by the service.

Training on medication policy and practice had been carried out and an audit on medication and records had been put in place. When we spoke with staff they were very clear about the need to have clarity around all recordings and especially any record relating to medication. This issue had been addressed very well by the service.

Outcome: Met

We made a recommendation in the previous inspection report:

"The Manager should ensure that all staff have access to training on dementia".

As noted in Statement 1.3 the service was introducing training in Dementia which would become an integral part of the in-house programme from December 2012.

Outcome: Met

Areas for improvement

The service should continue to maintain these records and ensure audits are robust and well recorded.

Grade awarded for this statement: 4 - 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

The grade awarded for this quality statement at the previous inspection on 20 March 2012 was 4 - Good. The evidence we sampled at this inspection increased the grade to 5 - Very Good. We concluded this after we read the available evidence and also took account what had been written and stated by those using the service.

Areas for improvement

See Statement 1.1 for further information.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

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

Service strengths

The grade awarded to the Quality Statement at this inspection was 5 - Very Good. We concluded this after observing the environment, speaking to service users and staff and reviewing the service's records.

The door into the service was secured and could only be opened from inside the premises, or by staff who had appropriate electronic keys to open the door. Those entering the service required to sign in and out of the building. This gave the service a clear record on who had been in the building at any time.

Service users were transported to the day care service and home on the service's mini-bus. This was insured, had appropriate legal records in place to evidence compliance with road worthiness. All staff that drove the service's minibus had undergone appropriate driver assessments by an external company.

The service had records in place to evidence that all equipment had been serviced and repaired as and when required. The service conducted daily checks within the building to ensure all exits were secure and operating as required, in case of any emergency.

A repair log was in place for internal repairs for minor issues. We saw that any repairs

took place quickly.

We saw that fire safety checks had taken place. Appropriate records were also in place relating to food hygiene. The service had been visited by Environmental Health. We saw that in response to the points raised the provider had bought new equipment. This had been done very quickly after the visit.

Service users told us they were happy with the environment. All with whom we spoke told us it was warm, comfortable and that they felt safe. No issues were raised by service users during this inspection.

Portable Appliance Testing (PAT) was due to be completed at the time of this inspection. We received evidence that this had been fully completed before the time of writing this report.

The service maintained records on accidents and incidents. These were accurately completed and no trends had been noted.

The service's registration certificate and insurance were on display as required. These were located in the hallway on entering the building.

We discussed the service's policy on Adult Support and Protection with staff. This policy and procedure were in place to safeguard service users by directing effectively staff practice should staff have had any concerns about a service from any source. We found that staff had a very good understanding on how to protect service users within their care and who they should contact if they had such concerns.

Areas for improvement

The service should continue to provide a service in a manner that allows service users to feel safe and protected

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 1

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

Service strengths

The grade awarded for this quality statement at the previous inspection on 20 March 2012 was 4 - Good. The evidence we sampled at this inspection increased the grade to 5 - Very Good. We concluded this after we read the available evidence and also took account what had been written and stated by those using the service.

Areas for improvement

See Statement 1.1 for further information.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

The grade awarded for this Quality Statement at this inspection was 5 - Very Good. We concluded this after looking at training records, the service's training plan, speaking with staff and service users.

Service users told us they were very happy with the staff whom they said knew them very well. They told us that the staff group were motivated, were good at their work and knew how to encourage them with activities and interests whilst they attended the service.

The service used a complex computerised training and recording system. This system recorded staff training dates in a manner which then advised the management team, in good time, when refresher training had been due. This helped to ensure that staff training was at all times up to date.

The provider had a range of training opportunities for staff which they were able to access. This training included internal training courses, external training which

included input from various companies and colleges and thematic supervision. The service had also developed training based on role play.

The service sought feedback from staff on training undertaken. No issues were raised generally and the training was considered by staff to be appropriate and valuable.

Staff confirmed the records we reviewed. We found that staff had a good understanding on Adult Support and Protection. From the discussions we had with service users and staff we found that the staff within the service applied the principles of the National Care Standards to their approach to everyday work.

We found that the communication issues we had raised at the time of the last inspection around medication had been addressed with staff. The staff we spoke with were clear about their role in relation to medication, its storage and ensuring that good records were maintained at all times.

Staff showed commitment and person centeredness in their approach to service users. This was also discussed and described by service users who told us "The staff are good at their job", "They know and understand me well".

Staff underwent appraisal and periodic supervision. Through these processes staff were able to influence their own personal training, as well as take advantage of the training being offered by the service.

Areas for improvement

The manager should continue to develop on the very good practice demonstrated in this area of work.

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: 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

The grade awarded for this quality statement at the previous inspection on 20 March 2012 was 4 - Good. The evidence we sampled at this inspection increased the grade to 5 - Very Good. We concluded this after we read the available evidence and also took account what had been written and stated by those using the service.

Areas for improvement

See Statement 1.1 for further information.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service strengths

The grade awarded for this Quality Statement at this inspection was 5 - Very Good. We concluded this after looking at the systems the service had in place to ensure that it delivered the service which it told service users they would receive.

The service had a clear statement on what was being offered to service users and their relatives within this service.

Service users told us that the service they received was very good. They told us that any issues they had could be brought to the management team through the range of systems. Through this the service made sure people's needs were understood and responded to.

There were systems to ensure service users' health and wellbeing. These included: Assessments prior to beginning with the service to ensure the suitability of the service

Care plans to direct staff on the detail of service users' individual care and support needs

Daily attendance updates on the service provided during the day's attendance. This ensured focus on service users' needs.

Six monthly statutory reviews of care and support to ensure that the focus on care met with service users' needs and wishes.

Policies and procedures to direct staff when supporting service users.

These systems ensured appropriate care and support provided was based on needs and wishes.

The service monitored and managed the fabric of the building and its equipment to ensure that it was in good order to meet with service users' needs. This included:

Systems for recording and addressing any issues with routine visual checks

Staff reporting on issues or breakages with routine in-house repairs

Routine equipment maintenance by external companies

Inter-agency checks on safety issues

The service had a range of policies and procedures to guide and direct staff on the service's business and the provision of care

Appropriate insurance policies which were displayed as required.

Through these systems the service ensured the safety and comfort of service users.

The service had appropriate systems in place to identify the staff it needed. This included:

Assessments of service users' needs to help determine staff numbers

Procedures to ensure that staff employed were appropriate people to work with residents

Systems to establish training gaps, monitoring and recording training delivered to ensure staff skills.

These processes ensured that the staff were in correct numbers, properly vetted and developed to support service users.

The service's system of audits was carried out effectively. The service had been awarded ISO 9001 charter mark which analysed their systems including their quality assurance system. The Management team's systems worked very well in supporting service users to maintain their independence and to support them and their families in continuing to live within their community. As noted earlier in this report, there had been significant improvement in the organisation and layout of service users' files and records. This made information clearer, easier to access and more proficient for the running of the service.

Areas for improvement

The service should continue to work to maintain the very good standard of demonstrating how they ensure they meet their objectives in providing service users with the quality of service that they claim to offer.

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

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

Quality of Care and Support - 4 - Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Statement 4	4 - Good
Quality of Environment - 5 - Very Good	
Statement 1	5 - Very Good
Statement 2	5 - Very Good
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Management and Leadership - 5 - Very Good	
Statement 1	5 - Very Good
Statement 4	5 - Very Good

6 Inspection and grading history

Date	Type	Gradings
20 Mar 2012	Unannounced	Care and support 3 - Adequate Environment Not Assessed Staffing 4 - Good Management and Leadership Not Assessed
8 Jun 2010	Announced	Care and support 4 - Good Environment Not Assessed Staffing Not Assessed Management and Leadership 4 - Good
20 Jul 2009	Announced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good

Inspection report continued

		Management and Leadership 3 - Adequate
9 Sep 2008	Announced	Care and support 4 - Good Environment 4 - Good Staffing 3 - Adequate Management and Leadership 3 - Adequate

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

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Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ہے بایں تسد یم ونابز رگی د روا ولکش رگی د رپ شرازگ تعاشا ہی

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

ی.رخأ تاغل بو تاقي سن تب بل طلا دن ع رفاوتم روشن مل اذه

本出版品有其他格式和其他語言備索。

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