

## Care service inspection report

# RNIB Scotland - Springfield Service

## Support Service Without Care at Home

Springfield Road

Bishopbriggs

Glasgow

G64 1PN

Telephone: 0141 772 5588

Inspected by: Claire Drummond

John Elliott

Type of inspection: Unannounced

Inspection completed on: 28 January 2013



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## Service provided by:

Royal National Institute of Blind People

## Service provider number:

SP2003000155

## Care service number:

CS2003000800

## Contact details for the inspector who inspected this service:

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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	6	Excellent
Quality of Environment	6	Excellent
Quality of Staffing	5	Very Good
Quality of Management and Leadership	5	Very Good

### What the service does well

We found that this service excels in involving people who use the service and their relatives and carers in decisions made at the service. The service is exceptional in terms of the work it does in supporting people to achieve their potential in all areas of their lives. We saw evidence that the service advocates for people who access it and staff work very hard to help people who use the service and carers to be aware of their rights and what they should expect from this service and others.

### What the service could do better

The service should consider adapting their medication recording system to include counting medication in and out of the service.

### What the service has done since the last inspection

The service continues to develop the ways in which it involves people who use their service and the relatives and carers in making decisions at the service. We found that a sensory garden which was being planned at the last inspection has been completed and includes a memorial garden at the request of relatives. The development of this garden and the involvement of people who use the service in this development have been recorded in several different ways. This work highlights the innovative approaches to working with people which are utilised at the service.

Quality checks are carried out by people who use the service.

## **Conclusion**

We found that this service continues to provide an excellent standard of care and support to people who use the service. Carers and relatives of people who use the service we spoke with were extremely complimentary about the service and the positive impact it has on their lives and those of the people they care for.

## **Who did this inspection**

Claire Drummond

John Elliott

**Lay assessor:** Ms Alice Brown

# 1 About the service we inspected

Our mission is to ensure people who have a learning disability and who may be blind or partially sighted are being offered informed support that enables them to lead lives that are fulfilling, meaningful and as independent as possible. We strive to work towards a world where people who have a learning disability and who may be blind or partially sighted enjoy the same rights, responsibilities, opportunities and quality of life as people who are not.

We work towards equality of access to, and quality of, eye care input for people who have a learning disability.

We work with local authorities, health and voluntary agencies, and with individuals, to increase the awareness of prevalence rates of visual difficulties amongst people who have a learning disability and the consequences of this.

We provide a range of direct services for those who have both learning disability and visual difficulties and a range of indirect services which encourage others to improve their services for people who have a learning disability by addressing the issues arising from visual difficulties.

Within our Springfield Day Assessment and Outreach services we can help by supporting you to learn more about your sight loss and how you can develop your independent living skills and how others should support you by taking your sight loss into account. The Outreach team can support you on a one to one personalised way to maintain your own tenancy/home by supporting you to manage your finances, attend medical appointments, access your local community and its facilities and activities, access further education and to maintain your social contacts to combat social isolation.

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](http://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 6 - Excellent**

**Quality of Environment - Grade 6 - Excellent**

**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](http://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 following an unannounced inspection which took place over two days. The inspection started at 9:15 am until 15:45 pm on 12 December 2012 and was completed on 20 December from 9:30 am to 14:30 pm. Feedback was given to the service at 09:45 am on 28 January 2013. The inspection was carried out by Care Inspectorate Inspector, Claire Drummond, Lay Assessor Alice Brown and Inspector John Elliott.

As requested by us, the provider sent us an annual return. The provider also sent us a self assessment form.

We issued twelve questionnaires to people who use the service. Nine completed questionnaires were returned before the inspection.

During the inspection we considered the following evidence;

Registration Certificate and Staffing Schedule

Staff rotas

Quality Assurance Audits

Four Care plans and associated documents, e.g. Risk Assessments

Four Staff files including induction, training and supervision records

Interviews with four members of staff

Accidents and Incident records

Medication Audit

Minutes of service user and carers meetings

Minutes of staff meetings

Complaints records

Discussions with the Manager and staff members

Discussions with eleven people who use the service

Nine returned Care Inspectorate questionnaires

Telephone conversations with five carers or relatives

We observed the interactions between staff and people who use the service

### **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](http://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 service provided us with a very informative and accurate self assessment. The grading of the service in its self assessment was informed by feedback from people who use the service and their carers.

## **Taking the views of people using the care service into account**

The views of people using the service are contained throughout this report.

## **Taking carers' views into account**

The views of carers are contained throughout this report.

## 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: 6 - Excellent

#### 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 found that the service has an excellent level of participation.

We saw evidence of the creation of the sensory garden at the service which also includes a memorial garden at the request of some parents. The service has recorded the development of the sensory garden visually in a large book and with a DVD which has a soundtrack of music written and performed by people who use the service. These media recordings clearly show the process of decision making and how service users and carers were involved in this. We saw the choices which were made individually and collectively by service users about the bricks and borders in the garden.

We found that the service produces a newsletter on a twice yearly basis which is used to share information about the service with service users and carers and invite feedback from stakeholders.

The Provider has created a service users forum called the 'Big Say' group which meets monthly to discuss any feedback they have regarding service delivery and other issues. The group has a mechanism to feed this information back to individual services. We found that a service user representative from the Big Say group represents the views of service users at a national level on the RNIB committee.

We saw minutes of the parents and carers group which meets three times a year with a different agenda / focus depending on the issues which are current for them and the service. This group provided input to the service when it was preparing grading for

the self assessment to the Care Inspectorate. We also saw evidence of the ways in which the service has involved service users in grading the service.

We also saw minutes of service users meetings about a variety of issues and events at the service which provide evidence of an excellent level of participation of service users.

During this inspection we found that one service user had suggested an awards ceremony for staff. We saw how the Manager used different methods and approaches to ask service users for their views about staff to inform this award ceremony.

We found evidence that the service has involved service users and carers in a consultation about a potential change to the operating hours of the service.

We found evidence in staff supervision minutes that their views about the quality and future direction of the service were sought and valued by the management team.

People who use the service spoke with the Lay Assessor who has experience of using this type of service. Their comments include;

"I love it here"

"I like it as well"

"It breaks up my week"

"If this place was to shut, I would go protesting".

### **Areas for improvement**

The service should continue to use and develop innovative ways of involving people who use the service.

**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 saw that information held about people using the service is well recorded and clear. The aims and objectives of the service are detailed and this information is shared with people using the service and their carers and relatives. The service also provides a clear statement of their values and how the support they offer will be provided. Notes kept are outcome focused and demonstrate a good level of analysis.

Personal information about people who use the service is consistently good and captures their wishes and support needs well.

We found that very clear, focused assessments are completed at the service during the 10 week visual assessment process. Reports and notes about this assessment are completed to a very good level of detail. We saw evidence of feedback from relatives and carers which indicate that the assessments made by the service are seen to be accurate. A written statement from a relative regarding a review meeting states; 'as always, you have got him spot on'.

We found evidence of six monthly reviews taking place at the service and note that these are focused on improving the quality of life experienced by people who use the service.

We carried out a medication audit during this inspection and found that medication was being administered according to the medication policy. Staff had received training around the delivery of medication according to this new policy and told us that this was helpful.

The wide variety of activities at the service mean that people who use the service can select different activities to be involved in. The service has excellent facilities, for example, a sensory room, kitchens and quiet areas which people can choose to use.

A Lay Assessor who has experience of using services stated that; 'Care and support observed during inspection was very good. A group of service users were in the training kitchen making their lunch that day. They were grouped around a table cutting open and buttering rolls...There was very good interaction and banter between staff and service users.'

The Lay Assessor also noted comments which carers made to them on the telephone;

- "Marvellous"
- "Wish \*\*\*\*\* had 5-days at RNIB"
- "\*\*\*\*\* loves it, and they love \*\*\*\*\*"
- "Very good service"
- "If it was up to \*\*\*\*\* they would be there every day"
- "No complaints whatsoever"
- "Everything great, well organised"
- "It's a great place"
- "100% happy"

### **Areas for improvement**

Recording of medication could be completed following a clearer system for example, recording amounts of medication on the same sheet. Also amounts of medication coming in and out of the service.

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

**Number of requirements:** 0

**Number of recommendations:** 0

## **Quality Theme 2: Quality of Environment**

Grade awarded for this theme: 6 - Excellent

### **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 excellent evidence of the involvement of people who use the service in the development of the sensory garden at the service.

The minutes of carers meetings highlight the excellent level of participation they have had in the development of this outdoor space.

Please see Quality Theme 1, Statement 1 for further information about Participation.

### **Areas for improvement**

The service should continue to evidence the excellent level of involvement of people who use the service and their relatives and carers at the service.

**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 found that the building was purpose built to meet the needs of the people with visual impairments and people with physical disabilities. All decoration and furnishings have been selected to promote the independence of people using the service. Tactile markers and Braille have been used in addition to changing floor coverings and colours to highlight paths and areas for people to access. Both the interior and exterior of the building have handrails designed to maximise independence.

The Lay Assessor who has experience of using this type of service noted; 'The facility was custom built and is very well maintained and equipped. There are various activity rooms, these include:- A multi sensory room which was very warm and relaxing with music and lights. A music room which was very well equipped with guitars, bells drums, keyboard and a Wii. There were also pictures of service users playing instruments.

A training kitchen which was very well equipped and modern...An art room, which is well equipped, on the inspection day three service users were making Christmas wreaths with cuttings from the Christmas tree...

There is a communal area which has pictures of all service users. Another area is used as an Information Technology area and meeting room. There is a Conservatory which is used as a gathering area. A timetable of activities is on the wall. Large sofas are here, and staff were supporting people to eat here. A tactile room which is equipped with a Lava Lamp and Tactile Wall Boards, aromatherapy is carried out here...The entrance area and corridors are wide with a handrail running around it. At the entrance to each room there is a sign in Braille on the handrail. The flooring here changes at different areas. This helps the service users identifying where they are.

The garden area is extremely well laid out. There is a Sensory Garden. A part of the garden also has plants which attracts butterflies. Here too, there are differing surfaces. This serves the same purpose as the internal flooring. On inspection day it was very frosty, but this did not detract from the attractiveness and overall appearance. The back garden area is also south facing and therefore benefits from any sun. There are various changing rooms and toilets throughout the unit. Overhead lifts are installed in changing rooms. These were all very clean.

The sensory garden has been carefully designed with people who use the service and professionals to support people to access it as independently as possible. Pathways have been sized to make them accessible to all and there are several different areas for people to access. Contrasting colours and textured pathways have been used to

provide accessible tracks, each pathway has raised signage and Braille for route finding. Highly scented flowers and plants have been used to provide Olfactory markers. The front garden at the service has a water feature which provides an auditory clue for people who use the service.

We found that great care has been taken at the service to ensure that the varying needs of people using the service are met. A multi sensory room maintains a warmer temperature than other parts of the building and is well equipped to enable a Functional Visual Assessment to be carried out at the service. The service also has a music room with multi media equipment and musical instruments which people who use the service and visiting performers use.

A large kitchen area with modern equipment promotes service users independence by allowing space for people to be supported to produce their own meals. An adjoining dining room area provides a space where people prepare sandwiches and other cold foods.

We saw a tactile room at the service and an art room which promote a variety of individual and group activities. There are several comfortable seating areas within the building which are used as gathering areas and for discussions and story telling activities.

We found bathrooms at the service to be large enough to allow people who use the service to be supported with intimate care in a dignified manner. One bathroom at the service has a tracking hoist which allows the safe lifting of some people who use the service.

General building maintenance is provided by a contractor and we saw evidence of equipment and building checks being up to date and completed regularly. We saw evidence that the contractor is carrying out all appropriate safety checks at the service and is also providing maintenance and repairs when required. We also saw evidence of audits of the environment being carried out by the contractor.

### **Areas for improvement**

We saw some continence products being stored in bathrooms on the first day of this inspection, however these had been removed by the second day of inspection in response to feedback to the service about this.

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

**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**

We saw evidence that a service users suggestion to give awards to staff had been developed and had taken place at the service. During this inspection we saw people who use the service being supported by the Manager to express their views about staff and saw a variety of ways in which they were asked for their feedback about individual staff.

We found that people who use the service being supported to participate in staff interviews and also to deliver training to staff as part of their induction process. Service users told us that they had been supported by the service to enable them to do this.

We saw evidence in staff files where feedback from carers had been used to inform staff supervision and also where this had identified training needs of staff.

We found that service users from other Royal National Institute of Blind and Partially Sighted People (RNIB) services have been supported to perform quality audits of the service. We found evidence of internal quality audits being completed by the Manager. In August 2012 they looked at the quality of staffing at the service and a report has been produced with action points identified in response to their findings. We checked staff files and found that these points had been actioned following this audit.

Please see Quality Theme 1, Statement 1 for further information about participation.

### **Areas for improvement**

The service should continue to develop and record the ways in which it involves people who use the service and their carers in assessing the quality of staffing.

**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 found that staff files contain copies of certificates of registration with appropriate bodies, e.g. Scottish Social Services Council. We found evidence that staff supervision takes place on a regular basis and follows a comprehensive format with a good level of recording leading to action points being identified and allocated. Where any practice issues have been identified we saw evidence of these being followed up with staff appropriately in supervision. A supervision agenda is used by the service, we saw that this is informed by the individual staff members annual appraisal and other information. Supervision and appraisals take place according to the timescales in the Providers policy. We found that goals were noted in appraisal minutes and evidence of these being actioned is seen in supervision minutes.

We found that staff are being asked to familiarise themselves with new policies and procedures as required and confirm their reading and understanding of these.

We found evidence of reviews of staff probationary periods taking place and saw that these are minuted and copies stored in staff files.

Staff files we looked at indicate that safer recruitment policies are being followed at the service.

We saw records of the learning and development accessed by staff in their files, staff told us that they have access to as much training as they need. One member of staff who is also a volunteer with the service told us that they received the same access to training as paid staff when they were volunteering. This means that the service invests in all of the individuals who support people using the service not just paid members of staff. This is likely to lead to a greater level of consistency across the service.

We saw evidence that staff have received training in a variety of ways around a new medication policy which has been developed at the service. This includes input at a team meeting, individual training and discussion in supervision accompanied by some observation of staff practice when administering medication.

We found that many staff at the service had worked there for several years, one person told us that this was because they felt supported to provide a good service to service users and carers.

We found that the Manager of the service has an overview of the learning and development needs of staff and that these are recorded in a training matrix which informs staff personal development plans.

The Lay Assessor who has experience of using this type of service noted; 'There was a good mix of staff, i.e., male and female. I felt this was good as there appeared, on the day, to be more male than female service users.

The relationship between staff and clients was relaxed, and staff had good knowledge of individual needs and abilities'.

### **Areas for improvement**

Service users and carers could be offered the opportunity to become involved in the assessment of staff, for example during probationary period or to inform supervisions and appraisals more formally.

**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

We found evidence that the Provider has trained and supported a group of service users to enable them to provide a quality checker role to this and other RNIB services. People who use this service will be involved in quality checking and providing feedback to other services while service users from other services will perform this role for Springfield service.

We found evidence that people who use the service and their carers are asked to evaluate the service on a regular basis. We also saw that their comments and the feedback they provided had been collated by the service and an action plan has produced in response. This action plan has been shared with people who use the service and other stakeholders.

Please see Quality Theme 1, Statement 1 for further information about participation.

#### Areas for improvement

The service should continue to develop and records the methods it uses to involve people who use the service and their carers in evaluating the quality of management and leadership at the service.

**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 saw evidence of procedures being followed at the service when any incidents arose, this included informing relevant agencies where required.

We found that the Manager carries out internal audits of service user and staff files on a regular basis. The Day service Co-ordinator audits the staff files for staff who report to them. The Manager then performs quality checks and audits these. This is followed with an action plan which details any actions which managers and staff need to complete to ensure compliance with the standards used by the Provider.

We also note that actions were followed up in supervision meetings with key staff members. We saw evidence of actions identified at audit being completed by staff.

Managers carry out a weekly audit of medication stored at the service for people who use the service.

The environment is also audited. A health and safety audit is carried out on an annual basis at the service by two staff.

Contractors providing maintenance at the building are checking the environment on a monthly basis.

The Provider has recently supported people who use this service and other RNIB services to train as quality auditors. This means that people from this service will perform a quality assurance role within other services. People who use other RNIB services will take a quality audit role at the Springfield service.

### Areas for improvement

Environmental audits could be completed by people who use the service.

**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

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

<b>Quality of Care and Support - 6 - Excellent</b>	
Statement 1	6 - Excellent
Statement 3	6 - Excellent
<b>Quality of Environment - 6 - Excellent</b>	
Statement 1	6 - Excellent
Statement 2	6 - Excellent
<b>Quality of Staffing - 5 - Very Good</b>	
Statement 1	6 - Excellent
Statement 3	5 - Very Good
<b>Quality of Management and Leadership - 5 - Very Good</b>	
Statement 1	6 - Excellent
Statement 4	5 - Very Good

## 6 Inspection and grading history

Date	Type	Gradings
20 Dec 2010	Announced	Care and support 5 - Very Good Environment Not Assessed Staffing Not Assessed Management and Leadership Not Assessed
7 Jul 2009	Announced	Care and support 5 - Very Good Environment 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
26 Jun 2008	Announced	Care and support 5 - Very Good Environment 5 - Very Good Staffing 4 - Good Management and Leadership 5 - Very Good



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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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## Translations and alternative formats

This inspection report is available in other languages and formats on request.

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

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ہے بایتسرد می م وونابز رگی د روا ولکش رگی د رپ شرازگ تعاشا ہی

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