Oxgangs Young Peoples Centre
Care Home Service Children and Young People
54 Oxgangs Avenue
Edinburgh
EH13 9JP
Telephone: 0131 447 7971

Inspected by: Sandra Wright
Type of inspection: Unannounced
Inspection completed on: 27 November 2012
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Service provided by:
City of Edinburgh Council

Service provider number:
SP2003002576

Care service number:
CS2003010922

Contact details for the inspector who inspected this service:
Sandra Wright
Telephone  0131 653 4100
Email   enquiries@careinspectorate.com
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>4</td>
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<tr>
<td>Quality of Staffing</td>
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What the service does well

The staff at Oxgangs YPC knew the young people in their care very well and were supportive of their individual needs.
The Manager had a very good overview of what was happening in the home and had a very positive relationship with the young people.

What the service could do better

The Local Authority needs to ensure that the incident process includes debriefing and restorative practice for staff and young people.

What the service has done since the last inspection

We found improvements to the way in which the service consulted with young people and how they responded positively to the views of young people.
The service had worked on improving the provision of food and nutrition.

Conclusion

In the main, the young people at Oxgangs YPC were happy with the care they receive. They had good relationships with staff. The staff were committed to working with young people to form positive attachments.
Who did this inspection
Sandra Wright
1 About the service we inspected

Oxgangs Young People’s Centre (Oxgangs YPC) is a purpose built Home situated in a residential estate in Edinburgh. The Home cares for a maximum of eight children and young people, aged 12 to 18 years, who for a variety of reasons, require to be looked after away from home.
The location of the Home is accessible to local amenities and public transport routes.

At the time of the inspection there were seven young people staying at Oxgangs YPC.
On the day of the inspection four of these young people were not available as they were staying at home or elsewhere.

The stated aims and objectives of the service are as follows:-
To uphold the dignity and rights of young people at all times.
To safeguard and promote the welfare of young people at all times.
To enable young people to fulfil their potential in all aspects of their lives.
To work in partnership with families and other agencies involved with children.
To maintain a commitment to the young people in our care to ensure that they are kept safe in a stable placement.
To aim to return the young person to their family of origin wherever possible and consistent with the young person’s best interests.
Service users’ views will be sought through the cultivation of open and trusting relationships with unit staff; the involvement of external professionals and other trusted adults.
We are committed to equality and staff will challenge discrimination in all it’s forms.

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.scswis.com.
This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

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 4 - Good**
**Quality of Staffing - Grade 4 - Good**
**Quality of Management and Leadership - Grade 4 - 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 medium intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

What we did during the inspection
We wrote this report following an unannounced inspection that took place between 10:00 and 17:00 on 26 and 27 October 2012. The inspection was carried out by Sandra Wright, Inspector.

As requested by us, the provider of the service sent us an annual return. They also sent us a completed self assessment. Before the inspection we sent the service eight questionnaires to be given to the young people who use the service. We did not receive any completed questionnaires.

During this inspection we asked the service to show us evidence to support their self assessment. We looked at records:-
- staff meeting minutes
- staff rotas
- care plans and young people's files
- records of medicines administered
- risk assessments for young people
- incident records

The service sent us additional information, such as news letters.

We met individually with one young person and spoke informally with two more young people. We met with the Manager and three members of staff. We spoke informally with other members of staff and observed staff practice during the inspection.

We took all of the above evidence into consideration when writing this report. We also took into account the Public Services Reform (Scotland) Act 2010 and associated Statutory Instruments, the National Care Standards for care homes for children and young people, and the Scottish Social Services Council (SSSC) Codes of Practice for Social Service Workers and Employers.

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

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

**Inspection Focus Areas (IFAs)**

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

**Fire safety issues**

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services’ responsibilities for fire safety at www.firelawscotland.org
What the service has done to meet any recommendations we made at our last inspection

We made four recommendations at the last inspection. We have commented on these within the body of this report.

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 Care Inspectorate received a completed self assessment document from the service provider. The self assessment identified the strengths of the service and also some areas for development. In the main, this reflected what we found at the inspection.

Taking the views of people using the care service into account

Before the inspection we sent out 8 Care Standard Questionnaires (CSQ’s) to be given to the young people. We did not receive any completed questionnaires,

During the inspection we spoke with one young person who was staying in the home. They said that whilst Oxgangs YPC was not where they wanted to be that is was not a bad place to live. They said that their home was comfortable and that they mostly felt safe. They confirmed that there were regular residents meetings and they got a say in what went on in the home Other young people who were there at the time of the inspection were reluctant to speak to the inspector.

Taking carers’ views into account

Carers include parents, guardians, relatives, friends and advocates. They do not include care staff. We did not receive any views from carers at this inspection.
3 The inspection

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

Quality Theme 1: Quality of Care and Support

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 found evidence that the service looked for the views of the young people and their families.

This included:

* Internal complaints and suggestions
* LACC reviews
* Keyworker sessions
* Regular telephone contact
* Residents meetings
* Suggestions box
* News letters

At the last inspection we made a recommendation that the service provider should further develop and implement a clear participation strategy. Whilst this had not happened we found that, since the last inspection, the service had made improvements to how they encourage young people to give their views. Whenever possible, young people, their parents and carers visited the home before the young person was admitted. This gave them a chance to meet staff and to begin to develop relationships. The visit provided parents with information about how to contact their young person and gave them a chance to see where their young person would be living.

A system of reviews built on the initial contact between parents, young people and the staff. A placement agreement meeting allowed everyone to get together and make initial plans for the care of the young person. This ensured that everyone was
clear about the plan and gave both parents and the young person the chance to give their views. Regular reviews, thereafter, continued to provide opportunities for discussion. Staff supported young people to make their opinions heard, either by suggesting that they write them down on ‘Having your say’ forms or by attending the review with the young person to give encouragement. In this way, young people were supported to influence their care plans and be involved in planning for their future. Through discussion we found that young people had presented their choices to the cook about what foods they liked or disliked. Individual young people had also requested specific foods to be bought and this had resulted in the requested items being bought. A nutrition group which included the cook, two of the young people and a member care team had got together to look at menus. This had resulted in changes to the menus to suit the tastes of the young people whilst still providing a balanced diet.

We found evidence that regular keyworker meetings took place. A keyworker is a named member of staff who works with the young person in a variety of ways such as:-

* attending meetings with the young person, for example, reviews or Children’s Panel Hearings
* keeps contact with other professionals such as social workers or workers from other support agencies
* works individually with the young person to help them develop their skills
* works with the young person to identify areas where they need more support and then made sure that this happens
* provides support and encouragement
* links with the young person’s family if this is appropriate

At these meetings, young people planned their day to day activities and talked about achievements and goals. Young people had signed their keyworker notes and made comments about how they felt which evidenced that they had been asked for their views.

A suggestions box was used to get ideas for residents meetings. The meetings were taking place every second Wednesday and had proved effective in getting new ideas from the young people. We were told that the meeting had recently resulted in changes to the supper routines at the request of the young people.

The service showed us newsletters which young people had contributed to. The newsletters contained lots of useful information about forthcoming events and gave praise to young people’s achievements. The newsletters were also used to invite the views of the young people.

The service had worked on two simple unit statements which were given to young people when they first arrived. These were entitled ‘House Rules’ and ‘What You Can Expect from Staff’. These were simple statements meant to give young people information which they could question and to help them settle in. In addition each young person had been given a copy of the Unit Booklet and a copy of ‘That Wee Book’, which gave information about children’s rights and responsibilities and where to get advice on a range of topics.

During the inspection we saw staff talking to young people in a relaxed and friendly
The young people were confident when speaking to staff and well prepared to give their views about how they were cared for. Staff were seen to be respectful of the young people’s personal views. We saw that, in the main, staff had built positive, friendly relationships with the young people.

The formal council complaints process was known to the young people and had been used by them in the past. We found evidence that the manager responded to complaints appropriately and that they were taken seriously.

The Who Cares worker visited the home regularly and met with young people. This provided young people with regular access to someone outwith City of Edinburgh Council to talk to if they had any issues and who could support them if needed. The local authority Children’s Rights Officer also visited the home regularly.

Records showed that the home spoke regularly with parents. We also found evidence that staff regularly spoke to parents on the phone. We saw that parents and other relatives were actively encouraged to visit the home. This provided parents with an opportunity to see where their young person was living and establish relationships with the staff.

**Areas for improvement**

Whilst the service was perfuming to a very good standard in relation to this statement we found that the service provider, Edinburgh City Council, did not have a participation strategy to promote involvement and consultation and give guidance to staff about the expectations in relation to participation. See recommendation 1.

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

**Number of requirements:** 0

**Number of recommendations:** 1

**Recommendations**

1. It is a recommendation that Edinburgh City Council should develop a participation strategy and that the service should use this to further develop consultation and ensure this is embed this fully throughout all their practice. They should ensure that records are kept up to date to evidence this. National Care Standards for care homes for children and young people: Standard 18 - Concerns, comments and complaints.

**Statement 3**

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

**Service strengths**

We found evidence that the service was performing to a very good standard in relation to this statement.

We saw that, in the main, staff had built good relationships with the young people. Through discussion we found that the staff knew the young people well. They were aware of their individual needs and how to support them. Therefore young people
received consistent messages from their carers. We found that each of the young people had a care plan which detailed their needs and plans for the future. The young people knew about these could influence their plans through their keyworker meetings and LAAC reviews. We found, from care plans and in discussion, that staff were aware of the dangers that young people faced through their risk taking behaviour and they worked with the young people to help them make informed choices. The care plans were fully completed, up to date and signed. They were relevant to the young people and easy to read. We saw that young peoples care plans were beginning to follow the Getting It Right For Every Child (GIRFEC) model and in discussion staff said they were becoming familiar with this way of working. GIRFEC is a nationwide strategy introduced by the Scottish Government to standardise the way that services record the work they are doing with children and young people.

All of the young people had risk assessments which were up to date. Incident reports were completed correctly and indicated what action needed to be taken if necessary. We saw that I staff tried to encourage young people to eat healthy and nutritious food. The inspector had lunch at the service and found this to be healthy and tasty with lots of options to choose from. Young people told us that they quite liked the food and that the home had a good cook. We saw that the cook worked from menus which reflected the likes and dislikes of the young people. We found that, whilst the main ingredients stayed the same, young people could ask for the menus to be changed if they fancied something different. Young people said that they could make themselves snacks when they wanted to.

We found evidence that the staff encouraged the young people to take part in physical activities. We also saw evidence from records that staff were working with young people to quit smoking and had helped them to think about ways of managing their addiction.

Each of the young people had a section in their care plan to record health issues and medication. On admission each young person had a health check with the Looked After and Accommodated Children (LAAC) Nurse. In all cases this had resulted in a healthcare plan which identified health needs and resulted in appropriate appointments with other health professionals such as dentists and opticians. The service had a locked cabinet for the storage of medicines which was well organised and contained appropriate medication belonging to identified young people. We found that, in the main staff were following the medication guidance and ensured that young people who wanted to could manage their own medication.

Staff consulted with the Child and Adolescent Mental Health Services (CAMHS) team to help them understand and work with the complex needs of the young people they cared for. They also had links with Edinburgh Connect which an NHS initiative to aiming to promote and enhance the mental health of looked after and accommodated children. Edinburgh Connect had provided support and advice for staff as well as carrying out direct work with the young people. Staff, who needed it, had taken part in updates to child protection training and the staff we spoke with were knowledgeable about the actions they should take if there were concerns about any of the young people.
We saw that staff encouraged the young people to treat each other with respect. They recognised that some young people struggled with group living and tried to help them negotiate with each other. Young people were encouraged to maintain friendships and activities outwith the home and retain their individuality.

**Areas for improvement**

At the last inspection we made a recommendation that the service should review the incident process. At this inspection, whilst we were happy with the way incidents were managed and we were told that staff discussed incidents with young people this was not done in a formal or systematic way. We found that incident records did not identify debriefing for young people or staff which meant that there was no evidence of how young people resolved issues raised during incidents. See requirement 1

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

**Number of requirements:** 1

**Number of recommendations:** 0

**Requirements**

1. It is a requirement that the local Authority must review the incident process to ensure that a process for debriefing and restorative practice is included. This is in order to comply with SSI 110 (2011) regulation 4(1)(a) - a regulation that the provider must make proper provision for the health, welfare and safety of service users.
   
   Timescales - Within 4 weeks of publication of this report.
Quality Theme 2: Quality of Environment
Grade awarded for this theme: 4 - Good

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

Service strengths
Evidence found in Quality of Care and Support, Statement 1, also applies to this statement. We found that the service used the same processes to consult parents and young people about the environment. Young people had personalised their rooms with posters and soft furnishings.

Areas for improvement
Evidence in Quality of Care and Support, Statement 1 also applies to this statement.

Grade awarded for this statement: 4 - Good
Number of requirements: 0
Number of recommendations: 0

Statement 2
We make sure that the environment is safe and service users are protected.

Service strengths
We found that the service was performing to a good standard in relation to this statement. We found that the home had secure entry and that any visitors were vetted by staff. The Manager had established systems in order to repairs were carried out reasonably quickly. We saw that the home was in a reasonable state of repair and was clean and tidy. The staff encouraged the young people to play their part in keeping the home pleasant. New soft furnishings had made the environment more attractive. Risk assessments had been carried out for the premises to ensure that dangers were minimised. Some staff had completed First Aid training. Each young person had their own bedroom which provided a personal private space. At the last inspection we made a recommendation that all staff should have up to
date accreditation in CALM (Crisis, Aggression, Limitation and Management) Training which helped them to recognise and diffuse difficult situations and when necessary hold child young people safely. The manager told us this had happened and was aware that she needed to have a clear overview of necessary training updates. All of this helped towards ensuring that young people were cared for safely.

Areas for improvement

The Manager identified in the self assessment that she plans to organise further CALM and Child protection training in order to keep staff fully up to date.

Whilst the home tried to encourage young people to quit smoking some continued to do so. Both staff and young people were told that they should not be smoking in the grounds of the home, however we heard that sometimes people were doing that. See recommendation 1

We also found that sometimes repairs took a long time to get carried out. See recommendation 2

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 2

Recommendations

1. The provider should issue clear guidance about smoking. In addition the service should continue to give very clear guidance about not smoking in the grounds. National Care Standards for care homes for children and young people: Standard 11 - Keeping well - lifestyle.

2. It is recommended that the provider should ensure that all necessary repairs are carried out promptly and efficiently. National Care Standards for care homes for children and young people. Standard 5 - Your environment
Quality Theme 3: Quality of Staffing
Grade awarded for this theme: 4 - Good

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

Service strengths
Evidence found in Quality of Care and Support, Statement 1, also applies to this statement. We found that the service used the same processes to consult parents and young people about the quality of staffing. Staff turnover in the service was low and some young people made positive statements about staff and how they had worked with them.

Areas for improvement
Evidence in Quality of Care and Support, Statement 1 also applies to this statement.

Grade awarded for this statement: 4 - Good

Number of requirements: 0
Number of recommendations: 0

Statement 3
We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths
We found that all staff were either qualified or working towards qualification within an identified timescale. They had access to training opportunities such as HNC, SVQ, as well as courses such as CALM training and first Aid. Staff identified training needs through their supervision sessions and said they were encouraged to attend conferences and seminars when staffing allowed. City of Edinburgh Council produced a variety of training opportunities which staff could access through the Council Intranet system. All staff were registered with the Scottish Social Services Council (SSSC) and were aware of their Codes of Practice. The SSSC are the body who regulate care staff and decide the level of qualification for each post. Staff also knew about the National Care Standards and had access to information which informed their practice.
We found evidence of regular staff meetings where staff shared information and had professional discussion. This alongside regular senior staff meetings promoted good teamwork and encouraged staff to address practice issues.

We saw that, in the main, staff were motivated and enthusiastic in their work and committed to providing the best service possible.

We found that the home had a consistent core group of staff. We found evidence of occasional cover provided by locum staff, however this was minimal and the same locums were used on a regular basis. This provided consistency of care for the young people.

Some staff had received formal supervision and all had participated in annual appraisal. The Manager and the External Manager met regularly for formal supervision.

Areas for improvement

Staff told us that sometimes supervision had to be rearranged because of the needs of the service. They said that whilst every effort was made to reinstate formal supervision sessions sometimes that had to take place on a more informal basis.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. Supervision should be seen as high priority and should always be rearranged when cancelled. National Care Standards for care homes for children and young people. Standard 7 - Management and staffing
Quality Theme 4: Quality of Management and Leadership

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 management and leadership of the service.

Service strengths
Evidence found in Quality of Care and Support, Statement 1, also applies to this statement. We found that the service used the same processes to consult parents and young people about the quality of management and leadership.

Areas for improvement
Evidence in Quality of Care and Support, Statement 1 also applies to this statement.

Grade awarded for this statement: 4 - 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
In Quality Theme 1 Statement 1 we identified a range of ways that the service involved parents/carers and young people in passing on their views. Other people who were involved in the service are known as stakeholders. These could include social workers, visiting professionals such as the Looked After and Accommodated Children’s Nurse and staff from CAMHS.

We found that the views of other professionals were sought through Care Planning Meetings and after any visits to the service. Records indicated that staff spoke regularly with outside agencies and that they were welcomed into the home.

We found evidence that the external Manager visited the home regularly and met with the Manager. The Manager and Assistant Unit Managers were also involved in a variety of working parties and partnerships with other agencies to address issues arising in the care of children.

Staff meetings took place regularly which allowed staff to be consulted and informed about aspects of the service.
In the main, the staff team worked well together and staff had a clear understanding of their responsibilities. Staff said that they felt supported by each other and the Manager. The Manager could access all the necessary policies and procedures and use these to inform practice. The Manager had a very good overview of the running of the service and had high expectations of the staff who worked there. The service made appropriate notifications to the Care Inspectorate and were keen to work with us to show how they provide a very good service.

**Areas for improvement**

The Manager identified in the self assessment that they would use the unit development plan to inform the self assessment. She also told us that she intended adopting the participation strategy from another City of Edinburgh residential service and adapting it to fit the needs of Oxgangs YPC.

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

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6  Inspection and grading history

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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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