

Care service inspection report

Pentland View Close Support Unit

Care Home Service Children and Young People

83 Pentland View Edinburgh EH10 6PT

Telephone: 0131 445 4024

Inspected by: Duncan Craig

Type of inspection: Unannounced

Inspection completed on: 16 April 2013



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Service provided by:

City of Edinburgh Council

Service provider number:

SP2003002576

Care service number:

CS2003010924

Contact details for the inspector who inspected this service:

Duncan Craig Telephone 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

Quality of Care and Support 5 Very 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

We found that Pentland View Close Support Unit provided very good long term residential care and support to the young people living there.

The service worked very well with young people to help them develop purposeful and safe lifestyles. This was within the context of promoting an ethos of "community".

The cook, administration worker and domestic played a significant role in contributing to this sense of community.

We saw that managers and staff worked very hard to make Pentland View a very positive place to stay.

There was a strong focus on involving young people and promoting health and wellbeing.

We found that the service worked well with other services and agencies to best meet the needs of young people.

We found that managers and staff had a very high level of commitment to the young people in their care and to those who had previously been in their care.

We saw that relationships between young people and staff were very positive.

The managers and staff of the service were suitably qualified, knowledgeable and skilled.

We saw that the service provided a homely, stable and safe environment.

The unit presented as clean, tidy, well decorated and well furnished.

What the service could do better

Whilst considerable improvement was evident, we discussed with the manager the need to continue to monitor and audit care planning and risk assessment.

We discussed with the Manager the need for clarity as regards notifications to the Care Inspectorate.

The provider should continue to invest in the property to ensure the living environment reflects the valuing of young people.

What the service has done since the last inspection

We found that two new Assistant Unit managers, one external and one internal, had been appointed to the team. This change was being managed well and experienced as positive.

The service had successfully negotiated a challenging period in 2012.

The service had updated its Functions and Objectives to better reflect aftercare support and the role of the regulator.

We found that the service had continued to progress "Health Promoting" status and was awaiting evaluation of Tier 2 status.

We found that the service had worked hard to build upon the established relationships with the Looked After and Accommodated Nurse (LAAC Nurse), the Who Cares? Scotland Worker, the Children's Rights Officer and the Edinburgh Connect project, all of whom were regular visitors to the unit and contributed to the health and wellbeing of the young people.

All commented positively on their relationships with the service.

We found that the service had continued to develop its "Participation Strategy", with the Who Cares? Scotland facilitated young people's group ("Pentland View Young Peeps"), playing a major role.

We saw that the service operated to its own developmental "Action Plan" to progress issues within the overall departmental framework.

We saw that the manager had developed a "one stop" system for monitoring the review of care plans and risk assessments. This also allowed for the monitoring of social worker contact.

Considerable decoration and refurbishment had been completed, including the fitting of new window frames. At inspection, a major refurbishment of a bathroom was taking place.

We saw that the service had further developed its very pleasant, fenced off garden area at the rear of the grounds and had made additional improvements to the front garden area.

Conclusion

We found that Pentland View Close Support Unit provided very long good long term care and support to young people.

We saw that mangers and staff worked very hard to maintain an inclusive and caring culture within the context of promotion of "community". Central to this was listening to and involving young people.

We saw that the whole team was supportive of, and committed to, their service.

Who did this inspection

Duncan Craig

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at: www.careinspectorate.com.

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

Requirements and recommendations

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a recommendation or requirement.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.
- 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 Care Inspectorate

Pentland View provides residential care and intensive support to five young people aged between 12 years and 18 years, who have a variety of needs. The service is part of the City of Edinburgh Council's overall provision for young people who require to be looked after and accommodated.

The aim of the service is to provide "intensive support to five young people whose behaviour has placed them at the threshold of secure accommodation". The service's "Functions and Objectives" state that "one of the aims of the placement at Pentland View is to enable the young person to assume sufficient control over their emotions so as to be able to function in society once they move on to an independent living environment".

At inspection, five young people were living in the service, some of whom had resided there for a number of years.

The service is located within a quiet residential area on the west side of Edinburgh. This affords good links to transport and amenities. The building is detached and stands in it's own spacious, well maintained grounds. Part of the grounds have been developed in to a vegetable and flower garden by young people and staff.

Inspection report continued

The building is in general good repair, well decorated and furnished and blends in well with neighbouring houses.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 5 - Very Good Quality of Environment - Grade 5 - Very Good Quality of Staffing - Grade 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

This inspection was carried out on 16 April 2013 by Duncan Craig of the Care Inspectorate.

We analysed the Annual Return and Self Assessment completed by the service prior to inspection.

We spoke with two young people and received one completed Care Standards Questionnaire from a young person.

We discussed the functioning of the service with the Manager, five staff members and a student on placement. We engaged briefly with other members of the team.

We spoke with, or had e-mail exchange with, the Who Cares? Scotland Worker, The Children's Rights Officer (CRO), the Looked After Nurse (LAAC Nurse) and representatives of Edinburgh Connect.

Two Social Workers e-mailed their detailed views of the service to us.

We looked at a range of documentation including care plans, risk assessments, health files and incident records.

We also looked at the interior and exterior of the building.

Interaction between young people and staff and staff practice were observed throughout the inspection visit.

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

Seven recommendations were made following the inspection of 19 April 2012.

Recommendation 1: One of the bathrooms upstairs, and the decor upstairs generally, needs to be upgraded to reflect the very good decor standards evident in the rest of the house.

NCS 5 Care Homes for Children and Young People - Your Environment.

Outcome: Met.

Progress: Refurbishment work has taken place and at inspection the bathroom was

being upgraded.

Recommendation 2: The service should, as planned, identify members of the team to train and operate as work place "First Aiders".

NCS 11 Care Homes for Children and Young People -Keeping Well - Lifestyle.

Outcome: Met.

Progress: Four members of the team had undertaken training and two of them were designated First Aiders.

Recommendation 3: The management team must notify the Care Inspectorate of incidents as detailed

within the "Guidance on notification reporting - All registered care services".

Publication Code: OPS-0411-020

NCS 6 Care Homes for Children and Young People - Feeling Safe and Secure.

Outcome: Met.

Progress: Considerable improvement has been noted in the last year. At this inspection we discussed further "fine tuning" with the Manager.

Recommendation 4: In addition to informing the line manager of incidents, a system should be put in place to ensure written incident reports are signed off timeously. NCS 6 Care Homes for Children and Young People - Feeling Safe and Secure. Outcome:Met.

Progress: The line Manager visits the service approximately three weekly. We saw that incident reports were signed off by him.

Recommendation 5: The manager and line manager should explore the views of some young people that their social workers did not visit frequently enough. Part of this dialogue should consider the significance, or otherwise, that none of the young people's social workers responded to our request to share their views on the service and how it impacted upon their client.

NCS 6 Care Homes for Children and Young People - Feeling Safe and Secure.

Outcome: Met.

Progress: We were told that the Manager had discussed the matter with each young person's Social Worker. Additionally, the service now recorded Social Worker contact in order to monitor frequency and raise issues if required. We saw that Social Work contact was appropriate.

Two Social Workers provided us with their very detailed, and positive, views of the service.

Recommendation 6: The manager should, as discussed with the Inspectors and intended by him:

- 1) complete the review the unit's Functions and Objectives to take in to account changes in Throughcare and Aftercare provision and changes to the regulator
- 2) implement the unit "Action Plan" as soon as is practicable
- 3) implement the draft "Incident Debriefing" tool.

Monitoring and review arrangements for the above should be put in place.

NCS 7 Care Homes for Children and Young People - Management and Staffing.

Outcome: Met.

Progress: We saw that all three issues had been addressed.

Recommendation 7: The provider should establish further, more formal, quality assurance systems. The current work on key performance indicators will, when instigated, provide a major contribution to this.

NCS 7 Care Homes for Children and Young People - Management and Staffing. NCS 18 Care Homes for Children and Young People - Concerns, Comments and Complaints.

Outcome: Met.

Progress: We saw that the Manager had instigated a "one stop" monitoring system to ensure that Care Plans and Risk Assessments were reviewed and updated as required.

The Manager also used his dialogue with the various external agencies involved in the unit to inform practice. The Line Manager was a regular visitor to the service.

The annual return

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

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The service fully completed their self assessment and identified areas of good practice and areas that they wished to develop.

Taking the views of people using the care service into account

We spoke with two young people, both of whom were known to us from previous inspections.

We received one completed Care Standards Questionnaire.

Young people spoke very positively about Pentland View.

They told us that they felt listened to and were confident in raising issues.

They said that they particularly enjoyed the activities that they had access to both within Pentland View and in the community.

We saw that they enjoyed very good relationships with the staff team.

Taking carers' views into account

We were unable to speak with parents/carers at this inspection.

However, feedback from the LAAC Nurse, the Children's Rights Officer, Edinburgh Connect, the Who Cares Worker and two Social Workers indicated that the service was held in high regard.

Comments included:

- "I feel the my team have become an extended part of the unit team"
- "Managed the needs of the young person well"
- " (Staff team) motivated, caring and concerned for the needs of the young person"
- "(Communication was) excellent. There was always someone available to speak to"
- "An open culture"
- "I have found the quality of care to be of a high standard"
- "I have found communication to be of a high standard"
- "Offer (young person) a sense (young person) is highly valued"
- "(The service) is managed effectively with importance placed on staff and team cohesion".

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 that the service had very good arrangements in place to involve young people in all aspects of unit life as well as their care and support.

We saw that young people were fully consulted and involved regarding Looked After and Accommodated procedures, (LAC), and Children's Hearings.

We also saw that young people were fully involved in support planning and risk assessment.

The Key worker system was very effective and proved the main vehicle for young people to express their views about their care and support. This was reinforced by very good young people/staff relationships. We saw that young people were able to raise issues with staff and were confident of being listened to.

We saw evidence of effective communication, and ongoing attempts at communication, with parents/carers.

We saw minutes of, and were told of, the regular and well established Young people's Group, "Young Peeps Group", facilitated by the Who Cares? Scotland worker. This allowed for group living issues to be placed on staff meeting agenda and for the worker to raise matters directly with the manager. All involved cited this group as a major positive in the life of the unit.

We saw that the service had a participation statement included within the "Rights and Responsibilities" section of its "Functions Objectives" document. There were also specific sections entitled "Partnership with Parents" and "Child Centred Collaboration". These statements made it clear that the views of young people, parents/carers and other stakeholders were welcomed in contributing to the quality of care and support provided. The service also had a DVD and a leaflet for prospective users of the service that made explicit the desire for partnership working and stakeholder contribution.

We saw very good evidence of the young people's involvement in "Health Promotion" and the unit was awaiting evaluation to achieve Tier 2 status.

The cook consulted directly with the young people regarding menu planning.

We saw very good evidence of the Children's Rights Officer being involved in the life of the unit, both in terms of group advocacy and individual advocacy.

Similarly, the LAC Nurse had a high profile within the unit, both in terms of the promotion of general health and well being and in supporting individual young peoples health needs.

We found an established open culture where young people were able and confident in raising issues about all aspects of life within the unit.

Areas for improvement

The service should continue to encourage and facilitate the involvement of young people, parents/carers and other stakeholders in assessing and improving the quality of all aspects 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

We found that the service had in place very good arrangements for promoting health and wellbeing.

We found very good health assessment and planning that operated in conjunction with the LAAC nurse.

We saw that "Health Records", attached to each young person's file, were well maintained and up to date. The service enjoyed very good relationships with the LAAC Nurse, Edinburgh Connect, Who Cares? Scotland and the Children's Rights Officer. Additionally, we heard of very good examples of joint working with the Education Coordinator regarding educational issues.

At a departmental level, new recording arrangements had recently been introduced that incorporated the "Getting It Right For Every Child" SHANARRI (safe, healthy, achieving, nurtured, active, respected, responsible and included) headings.

All young people were registered with a GP, dentist, optician, and other external services as required.

We saw that catering arrangements were very good, with a varied and health menu. Young people spoke to the cook daily regarding their dietary preferences.

The service had achieved "Health Promoting Unit" status, tier one and was awaiting evaluation for tier two. This work was led by an Assistant Unit Manager (AUM) and a member of the staff team.

The AUM was the designated Health Link Worker and maintained overview of health related issues.

In addition to the external services we contacted, managers and staff told us that the service continued to have good links with a number of health related services including Caledonia Youth, Skylight and Hype.

We found evidence that young people were continuing to be encouraged informally, and through key working and care planning arrangements, to take part in activities. At inspection, a young man was accompanied by a staff member to the gym and to the swimming pool. The service had established a very good relationship with an officer from Edinburgh Leisure who facilitated access to council health and sport resources. At inspection, negotiations were taking place regarding a rock climbing course for young people.

Young people enjoyed a very good relationship with the cook and were encouraged to discuss menu planning and meal preparation.

We saw evidence of well established "Pamper Nights" where young people had access to relaxation techniques, head and foot massage and discussion centred around self esteem and well being.

An Art Therapy session took place each Monday facilitated by a University student.

Staff members we spoke with exhibited a very good knowledge of child protection and safe care issues.

The staff also indicated very good awareness of general health promotion issues and were able to give examples of specific examples of work with young people.

We saw records of, and staff members described to us, training and development opportunities they had experienced that promoted their understanding of health and wellbeing.

Management and staff spoke very enthusiastically regarding their recent experience of training in relation to attachment, dyadic theory and social pedagogy.

We also saw evidence of the young people's ongoing involvement, supported by staff members, in raising funds for a charity, "GT500", that provided support to a school in the Gambia.

Areas for improvement

The service should continue to work with, and further develop relationships with, external professionals to further promote the health and wellbeing of young people.

The development of the "Outhouse", adjacent to the house, as an art and wellbeing resource should continue.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: $\ 0$

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 5 - Very Good

Statement 1

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

Service strengths

Please see Theme 1, Quality of Care and Support, Quality 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.

Areas for improvement

Please see Theme 1, Quality of Care and Support, Quality 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.

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

We found that the unit had in place appropriate safety arrangements.

The building was secure and visitors were required to sign in and out. We saw that staff appropriately "challenged" visitors to the unit as to their legitimacy.

We found the building to be well maintained, furnished and decorated. At inspection, refurbishment of a bathroom was taking place.

We saw that no major repairs were outstanding.

A "Chill Out" room had recently been created by young people and staff to provide a quiet area for discussion or time away from the group.

We found the staff team to be knowledgeable and aware regarding child protection and safe care issues. Risk assessment arrangements were very good, with plans updated regularly. We saw examples of imaginative risk assessments and "self help" aids, written in a manner easily understood by the young person and incorporating references that were important and meaningful to the individual.

Relevant policy and procedure, including "Whistle blowing" and "Anti-Bullying" were in place.

Staffing levels were sufficient to meet the needs of young people. We saw that Managers reviewed staffing at each Management Meeting, Staff Meeting and at Change Over. Deployment practice was very good.

We found that the strength of relationships between young people and staff was a major contributor to young people feeling safe. Additionally, the line manager was a regular visitor to the unit and young people were on first name terms with him and felt able to approach him. The regular visits by, and established relationships with, external agencies and services (Who Cares? Scotland, Edinburgh Connect, CRO's,etc) further contributed to a safe and open living environment.

First Aiders had been identified and trained accordingly. Additionally a further two staff members had undertaken this training.

Appropriate accident and incident recording arrangements were in place.

Areas for improvement

The staff team must ensure that the internal front door is locked at all times to effectively manage visitors.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The staff team must ensure that the internal front door is locked at all times to effectively manage visitors.

National Care Standards 6 Care Homes for Children and Young People - Feeling Safe and Secure.

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

Please see Theme 1, Quality of Care and Support, Quality 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.

Areas for improvement

Please see Theme 1, Quality of Care and Support, Quality 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.

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

We found a very skilled, knowledgeable and motivated team within the service.

We observed very good staff practice and interaction with young people throughout our inspection.

We witnessed informed and insightful dialogue regarding the care of young people.

Established Edinburgh wide recruitment arrangements were in place that ensured all relevant checks were carried out prior to appointment. This Incorporated very good induction arrangements. At inspection a student on placement and a recently appointed AUM described a very comprehensive induction to the service and described to us the ongoing support they received from managers and staff.

We found a very good programme of staff supervision, including regular supervision to the manager provided by his line manager.

We found very good staff meeting and changeover arrangements were in place.

We found all staff to be registered, or gaining appropriate qualifications for achieving registration, with the Scottish Social Services Council (SSSC).

The staff team held a range of appropriate qualifications ranging from Diploma in Social Work to HNC and SVQ 3 in Social Care.

The Manager had achieved level 2 Child Protection and all staff had completed level 1.

One of the AUMs was a qualified Practice Teacher.

Night staff were valued by Managers and the rest of the team. A member of Night Staff we spoke with confirmed that they felt included and involved in the life of the unit. Night Staff were at the forefront of introducing new computerised recording procedures.

We saw that a Performance Review and Development system, ("PRD") was in place, with all staff being set personal professional objectives that would be subject to annual review. This was an agenda item within supervision.

We saw records of, and staff described to us, various training and development opportunities that the had undertaken recently. These included whole team Development Days, Attachment Theory, Dyadic training and Domestic abuse.

Inspection report continued

All staff were trained in Crisis and Aggression Limitation and Management (CALM) and one member of the team was a qualified instructor.

A recent Development Day had focused upon Health and Wellbeing and involved an officer from Edinburgh Leisure.

Staff we spoke with were aware of the National Care Standards and SSSC Codes of Conduct.

Areas for improvement

The service should maintain its very good staffing arrangements.

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

Please see Theme 1, Quality of Care and Support, Quality 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.

Areas for improvement

Please see Theme 1, Quality of Care and Support, Quality 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.

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

We saw that the LAC Review and Children's Hearing outcomes informed the service as to how it was meeting young people's needs. Very good review arrangements were in place that informed planning and risk management for each young person.

We saw that the service sought the views of external agencies and services to enable their feedback to inform practice and planning. External professionals we spoke with, or exchanged e-mails with, told us of good communication and a preparedness by the service to "take on board" views and observations.

We found a healthy culture of ongoing feedback from young people regarding all aspects of the service via Key Worker, Young Peoples Group and access to Manager and Line Manager.

The effective supervision, staff meeting and change over meeting structure contributed to this.

The manager spent time with young people who all knew him very well. Young people were seen to enjoy a good relationship with him and they told us that they were happy raising any issues with him.

The external line manager visited the unit approximately three times weekly. This was to carry out the supervision of the manager, attend the "occasional" staff meeting and to, generally, make himself available to young people and staff. He also read all incident reports and contributed to them in writing. He was informed by telephone of any serious incidents.

At the previous inspection, the line manager told us of other City of Edinburgh Council professionals who

"have a key role in assisting units identify issues relating to education/training (for young people). This offers me a valuable insight into how effectively units are dealing with these issues."

He also described other activities and sources that provided him with intelligence regarding the service's performance. For example, feedback from training events, LAC Reviews, Children's Hearings, etc.

Areas for improvement

The service had established very good communication with the Regulator and, broadly, we were notified of issues appropriately. We had further discussion with the Manager regarding improving Notification performance.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

4 Other information

Complaints

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

Enforcements

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

Additional Information

The service gave us an appropriate action plan following the inspection of 19 April 2012.

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 - 5 - Very Good				
Statement 1	nent 1 5 - Very Good			
Statement 3	5 - Very 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	Туре	Gradings	
19 Apr 2012	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good 5 - Very Good 4 - Good
12 Jan 2011	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed Not Assessed Not Assessed
7 Oct 2010	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed Not Assessed Not Assessed

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12 Feb 2010	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 4 - Good Not Assessed
30 Jul 2009	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good 4 - Good 4 - Good
24 Mar 2009		Care and support Environment Staffing Management and Leadership	4 - Good 3 - Adequate 5 - Very Good 4 - Good
19 Nov 2008	Announced	Care and support Environment Staffing Management and Leadership	4 - Good 3 - Adequate 5 - Very Good 4 - Good

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 cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

- که بای تسد ریم رونابز رگید روا رولکش رگید رپ شرازگ تعاشا هی

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

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