

Care service inspection report

Eliburn Day Centre

Support Service Without Care at Home

Jackson Place

Eliburn East

Livingston

EH54 6RH

Telephone: 01506 774 300

Inspected by: David Todd

Type of inspection: Unannounced

Inspection completed on: 1 May 2013



HAPPY TO TRANSLATE

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Service provided by:

West Lothian Council

Service provider number:

SP2003002601

Care service number:

CS2003016363

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

What the service does well

The service is welcoming and friendly. People using it are treated with dignity and respect.

The service makes good use of its resources and provides a range of activities both in the service and in the local community.

The service works well with health care professionals to provide support for each individual.

What the service could do better

The service should continue to provide the very good quality of care identified in this report.

The service could ensure that it is staffed well enough to meet the needs and wishes of people using it and carers.

What the service has done since the last inspection

The service has improved the decoration and design of some of the rooms. Gardens have been created to make the outside areas more attractive. A gardening project has seen the creation of raised beds ready for planting.

Aims and objectives have been rewritten and issued to service users and staff.

Conclusion

The service provides very good quality of care and support in the areas we looked at. Staff were enthusiastic and motivated to find the best ways to work with people and improve their experience at Eliburn.

Who did this inspection

David Todd

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Before 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.

Requirements and Recommendations.

If we are concerned about some aspect of a service, or think it needs to do more to improve, we may make a recommendation or a 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 based on best practice and the National Care Standards.

A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 ('the Act') and secondary legislation made under the Act, or a condition of registration. Where there are breaches of Regulations, Orders or Conditions, a requirement may be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

Elburn Support Service (the service in this report) is operated by West Lothian Council (the provider). It provides a support service - day care for up to 47 adults each day. Adults are aged between 16 and 65 years and have a significant learning disability and complex physical and health care needs. The staff team work alongside health care staff, giving easy access to a range of services including physiotherapy, speech and language therapy and nutrition.

The service is available Monday to Friday except for public holidays. The service operates from a building that has undergone major construction work to expand the premises to meet service users' care needs. The service is situated close to the centre of Livingston.

The service leaflet states one aim is to:

'Assist and enable service users to achieve their potential by remaining as independent as possible for as long as possible. This is done in a person centred way and involves parents/carers, family members and professionals involved in supporting the service user within their day to day life'.

On the first day of the inspection 34 of the expected 37 people were using the service.
On the second day 35 of the expected 38 people were using the service.

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 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 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. The inspection was carried out by Care Inspectorate Inspector David Todd. This took place on 16 April 2013 between 9.30am and 4.30pm and on 17 April 2013 between 8.30am and 4.30pm. We told the Manager and senior staff what we found at the inspection on 1 May 2013.

As requested by us the care service sent us an annual return. The service also completed a self assessment form.

In this inspection we gathered evidence from various sources including the relevant sections of policies, procedures and other documents including:

- Sampled support and care plans
- Reviews of support and care plans
- Risk assessments
- Support agreements
- Communication books and diaries
- Team meeting minutes
- Training records
- Support and supervision records
- Appraisal records
- Staff training records
- Incident and accidents
- Complaint records
- Quality assurance information
- Complaints policy
- Minutes of meetings for People using the services

Discussions and interaction with various people including:

- * the Manager
- * senior staff member
- * Six staff.
- * Physiotherapist

* Nurse.

Attending the daily planning staff meeting
Attending a meeting of Parents, Carers and Friends.

We observed staff practice in group and individual activities as well as staff interaction with people using the service and with staff colleagues.

We spent some time examining the environment and equipment.

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

There were no recommendations made at the last inspection.

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.

We received a fully completed self assessment document from the service provider. We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each of the headings that we grade them under.

The service identified what they thought they did well, some areas for development and any changes they planned. The service gave us good information about some of the changes that had taken place and improvements that had been made. The service told us about some of the more difficult issues they had addressed. This was very helpful. The service had graded itself and overall we agreed with the grades for each theme.

Taking the views of people using the care service into account

We spent time in the company of many service users during the inspection and observed group and one to one activities.

People using the service looked happy and were enjoying the activities. They were comfortable with staff and many shared a joke or good humoured banter. Staff were respectful in the ways they worked and ensured peoples' privacy when necessary.

Taking carers' views into account

We sent out 40 Care Inspectorate questionnaires to people using the service, carers and families. Twenty were returned before or during the inspection.

Fifteen people strongly agreed and four agreed with the statement 'overall, I am happy with the quality of care and support this service gives me'. One person disagreed.

Comments that were made included:

'very happy with the service Eliburn provides, but would prefer a centre of more mixed abilities'.

'Eliburn will always go that extra mile to help and support our son in any situation. For that we are grateful'.

'I am very happy with the care and support my daughter receives from this service'.

One person commented that sometimes health and safety concerns were put above their health needs and a service was not delivered.

Other comments that people made are included in the relevant quality statements.

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

The service encouraged service users and carers to participate in assessing and improving the quality of care.

The service used a number of methods to gather information from the people using the service. These included:

- * an annual questionnaire following the reviews of a person's care
- * reviews of the care plan at least every six months
- * relatives meetings
- * individual discussions with relatives
- * suggestion box
- * newsletter

The Manager also sent out letters to keep people informed about open days and fundraising events. This meant people knew what was planned.

The questionnaire asked people using the service and their carers to rate the service in relation to care, the service, staffing and management. The Manager had audited the responses and produced a report. We saw that recent questionnaires, for April 2013, rated the service highly.

We went to a meeting of the Elburn Parents, Carers and Friends Group during the inspection. They told us they thought their views and opinions were listened to and they were able to influence and direct how staff provided the service. We saw that people using the service and families/carers contributed to developing the care plans.

Parents often wrote specific instructions for the staff to follow and these were included in the plans.

The service used a diary to communicate directly with parents and carers (if they wanted this) on a daily basis. This let parents know what activities the person using the service had taken part in, what they had eaten for lunch and other relevant information. Carers were able to tell staff about issues or concerns they had. This meant the service could be adjusted for each person daily.

People using the service knew about the complaints procedure and were clear how to contact the Manager or key worker if required. The service kept a record of complaints. The Manager told us how each complaint was investigated and the outcome was fed back to the complainant.

The service had a clear commitment to ensure people's views were heard. If people had difficulty making their views known staff encouraged people using the service to make use of advocates. An advocate is independent of the service and helps a person make their wishes clear. The service had links with a local advocacy service and some staff used advocacy skills.

Areas for improvement

In its self assessment the service said it would continue to seek feedback from service users, parents and carers on a range of subjects using short (rather than long), more focussed questionnaires.

It was very good to see that a well established parents group met regularly to support the work at Eliburn and provide feedback to the Manager. The service could consider how to develop ways to get more consistent involvement with and feedback from the people who are more difficult to have contact with.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

The service was providing very good levels of care to the people using it.

Each person using the service had a personal care plan. We found detailed information about each person's needs and clear directions about how to meet these. Individual service user profiles were kept with each person in the part of the service where they were that day. This meant staff could refer to them when necessary. We

saw very good information was recorded about the person, their likes and dislikes in relation to, for example, food and activities. This helped staff and service users make choices about the food they wanted to eat that day and how it was to be prepared.

Some people required a lot of physical care and support. We found that care plans had precise instructions about how these should be met. Staff told us how they worked to ensure personal care, for example, was managed and that people's privacy and dignity were maintained.

The service was well supported by a range of health care professionals and services. These included physiotherapists, dietician, speech and language therapists and community learning disability nurses. A number of specialist clinics, in epilepsy and special needs, were also available. This meant people using the service were able to get the health care they needed at Eliburn.

Eliburn had a nurse on site. This meant they were available to help assess people who appeared unwell. They were also able to provide advice and support to care staff when concerns arose and were able to help deal with emergency issues.

Staff we spoke with said they were very familiar with the health needs of people using the service. We saw, in the groups and at meal times, good rapport was observed between staff and people using the service. Staff were able to discuss health issues that had affected people using the service and how they had dealt with these.

Where specific health needs were identified, training had been brought in to ensure staff had the knowledge and skills to deal with the needs people had. Some staff were to about to receive a session on dysphagia, which is to do with the difficulty in swallowing and how to manage this.

The families and carers we spoke with said they thought staff understood their relatives' health and wellbeing needs well and supported them to have these met. They talked very positively about Eliburn and made the following comments:

- * 'happy place forto be. A good humoured place. The Manager and staff are very good'

- * 'service excellent'

- * 'we have found Eliburn to have a very welcoming and happy atmosphere. Our son enjoys going there. We are impressed by the range and variety of activities and we know our son really enjoys taking part'.

Medication policies and procedures were in place and all staff had training in medication. The medication given was recorded by two staff using the pink and yellow Kardex system. We looked at a small sample of records and saw that these had been completed.

Peoples' well-being needs were also considered. People were able to choose from a range of activities to meet their individual needs. Efforts were made to ensure staffing levels were adequate to provide a range of activities. Staff also asked parents and carers peoples' likes and interests

Areas for improvement

Staff told us they were, on a few occasions, not invited to attend the medical or health care meetings that took place at Eliburn. This could be, for example, to protect peoples' rights to confidentiality. However this could mean that changes to a person's care were not passed onto the staff. We thought it was important that all the services work together with service users and families to ensure that everyone was aware of any changes to the care a person needed and these were recorded in the personal plan.

Staff told us and we saw that at times, activities outwith Eliburn were limited because of a shortage of staff. The Manager told us that various activities such as lunch out did happen when enough staff were available to allow this. It is hoped that the current recruitment of new staff will allow this to happen consistently. In the last inspection report we said that lunch in the dining room was very busy but that staff managed this skillfully and promoted a sociable and pleasant atmosphere. We saw that this was still the case and that senior staff helped ensure people were looked after.

We saw that having a nurse on site was very helpful in providing comprehensive health care on site. We were told that an additional part time nurse is to be employed in the service. We thought this would help ease pressure on existing resources and will consider what difference this has made at the next inspection.

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 also see the strengths in statement 1.1 and 4.1.

People using the service, families and friends had been asked for their opinions about the redecoration of parts of Eliburn. This had included changes in and out of the building. Many families had made suggestions about the garden areas. Some had made donations, including garden furniture. These had made the areas around the building more pleasant places to see or be in.

People and past users and families of the service were able to add items and plants to the outside gardens. This seemed to add to their feelings of ownership and belonging.

Areas for improvement

Please see statement 1.1.

The service should continue to involve people using the service in making improvements to the ethos and environment in Eliburn. The Manager told us these will be the focus of the next questionnaire.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

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

Service strengths

The service was providing a very good level of safety for people using it.

In the Care Inspectorate Care Standard Questionnaires that were sent back to us

thirteen people strongly agreed and seven people agreed with the statement 'I feel safe when I am in this service'.

We saw evidence the service maintained the equipment and safety systems in use. These included:

- * Fire systems checks
- * Heating systems
- * Building maintenance
- * Electrical equipment testing

The service's kitchen was visited by the local environmental health service. The most recent report available (September 2011) said that staff had maintained high standards of food hygiene and safety. At the feedback meeting we were told an environmental health inspection had just taken place. A 'Cook Safe' system was used. We saw that records and checks were kept, including daily fridge and freezer temperatures and hot and cold food temperatures. These helped ensure the meals provided to people were safe.

The service uses a lot of moving and handling equipment including floor and ceiling hoists. We saw that these were maintained regularly and that records were kept to ensure this took place. We noted that individual slings used for hoists were also checked for signs of wear. Each sling was numbered and identified for this purpose.

Cleaning records were available, as were daily, weekly and monthly cleaning plans and tasks.

Staff had a Protection of Vulnerable Groups (PVG) check completed before they start work in the service. There was also a robust recruitment procedure that ensured that references and other checks were completed before staff and volunteers started work in the service.

Areas for improvement

In its self assessment the service identified that it needed to complete all of the required general risk assessments for the work carried out and share these with the staff.

The service should maintain its very good levels of work in this statement.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 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

Please also see statement 1.1.

The questionnaires the service used asked parents and carers to give their views about staff skills and whether they were well trained. This gave people opportunities to comment on staff and their abilities.

We saw that information about staff qualifications, training, vacancies and recruitment was shared with relatives through the parents meetings. This meant parents had a better understanding of the staff currently employed in Eliburn, their skills and work experiences.

In the Care Inspectorate Care Standard Questionnaires returned to us sixteen family/ carers strongly agreed and three carers agreed that 'I am confident that staff have the skills to support me'.

Areas for improvement

At the last inspection we suggested that the Manager should discuss how relatives could be meaningfully involved in the recruitment of staff. We did not find that progress had been made. The service said it would consider ways to develop this and to approach people who would be interested. Training and support should be provided for those who are willing.

The service could consider ways to raise peoples' expectations about their role in improving and managing Eliburn.

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

The service had a comprehensive range of policies and procedures in place to support staff and practice. These included recruitment, protection of vulnerable adults, whistle-blowing and confidentiality. Policies could be discussed in team meetings and one to one supervision meetings when necessary. The staff we spoke with were familiar with the policies of the organisation.

The organisation provided staff with an induction when they began work. Training included principles of care in practice, personal care, food hygiene, manual handling and health and safety. Staff we spoke with told us how they supported new staff and students when they started at Eliburn, to settle into the work and get to know the people using it.

Staff we spoke to said they could request training relevant to their work and the particular needs of the people they worked with. The Manager and senior told us that they ensured staff attended mandatory and refresher training. They would also ensure that staff were trained to meet the needs of the people they were working with. We saw the service had a record of training completed by staff. This helped identify training needs and when to apply for refresher training. Where possible the service would try to access other relevant training.

Staff we observed and spoke with were very motivated in their work. They demonstrated very good knowledge of the needs of the people they worked with. Staff worked in small teams and this helped to ensure people using the service had good continuity of care. They said they would feel able to report poor practice. The Manager gave us an example of where this had happened and how this had been resolved.

We looked at a sample of support and supervision notes. Support and supervision is where staff meet with their Manager or senior in a one to one session to discuss work, performance and training needs. We were told that these sessions were held every three months and were recorded. Staff told us senior workers and the Manager were very supportive and could be contacted at any time for help and advice. Staff said they found support and supervision helpful.

Team meetings were held two weekly. The minutes showed a range of topics were discussed. Staff said they found meetings useful. They said they could raise issues at meetings and were listened to by colleagues and the Manager.

Nineteen Care Inspectorate staff questionnaires were returned to us before the inspection. Most staff did not identify training needs that were not being met.

Areas for improvement

We found there was a high level of commitment from staff and that they worked together to provide people using the service with high quality care. We noted however that there were fewer staff available than would be ideal. This was for a number of reasons including staff leaving, vacancies and absence from work. We were concerned that this increased the strain for staff and sometimes limited opportunities for people using the service in certain activities. We thought it was important the service found ways to minimise this difficulty. The Manager told us the service was interviewing for new staff and it was expected this would help ensure adequate numbers of staff were available to maintain the high standards of care. We will see what progress has been made at the next inspection and we have made a recommendation (see recommendation 1).

There were only four support and supervision sessions each year, one of which was for a personal review and development session where a review of work done took place and training and development were planned for the next year. This meant there was a fairly long period between sessions, especially where these were delayed through holidays or other absences. We did see that informal support was easily available and suggested that significant informal meetings were cross referenced to the management diary. This would provide a more comprehensive record of the supervision provided.

In its self assessment the Manager said they would continue to work on areas of poorer practice and provide additional training where required. They also said that they would continue to support and enable staff who raise concerns about poor practice, encouraging openness and honesty.

There were opportunities for developmental training for staff but this was sometimes limited. Getting access to training that was relevant to the staff and service had not always proved easy. Freeing staff to go to training was often not possible. Senior staff and the Manager told us that they tried to bring courses and training into Eliburn to ensure as many staff as possible could attend. This meant the training was tailored to meet the service's needs. We thought the service should continue to build on this. We also thought it was important that staff at all levels had access to developmental training that would equip them to apply for promoted posts if they wished to do so.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The service should ensure that it is staffed in ways that meet the needs and aspirations of the people using it.

National Care Standards, Support Services, Standard - 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

Please see also see statement 1.1.

The Parents, Carers and Friends group took part in fundraising for the service. This helped raise the profile of the service in the community and helped others understand how it worked to help the people that used it.

Consultations with this group and other people using or who had used the service had resulted in the development of a bereavement support group. This had influenced how the service worked with the losses suffered when people left the service, in pictures and in the remembrance garden.

At the last inspection we suggested the aims and objectives were given out to service users, families, carers and staff. The Manager told us the aims had been rewritten to reflect the current service and sent out to every one using or working in Eliburn, informing people about what the service was hoping to achieve.

Areas for improvement

The service should continue to seek and develop ways that people using the service and carers are involved in assessing and improving the quality of management and leadership. The service could, for example, seek wider discussion about the aims and objectives of the service, ways of working, staffing and how people would like the service, within and beyond Eliburn, to change to meet their needs.

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

The strengths identified in statements 1.1, 2.1, 3.1 and 4.1 are also relevant in this statement.

We found the service had a number of systems in place to help it assess the work being done. These included:

- * staff support and supervision meetings
- * performance reviews and development meetings
- * checks that care plan reviews had taken place
- * daily staff planning meetings
- * discussions about the progress of each person using the service.

The service had incident, accident and complaints procedures in place. Information about how to make a complaint was given to people when they started to use the service. When a serious incident or accident occurs the service has to tell the Care Inspectorate. This is called a notification. The service had told us about a number of concerns and how they had dealt with these.

The service is monitored by West Lothian Council. In its self assessment the service told us it contributes to the West Lothian Assessment Model (WLAM) and to the Customer Service Excellence (CSE) award. The service has to provide the Council with information about how it meets the requirements of the monitoring systems. This meant the service was able to get feedback about how well it is achieving outcomes.

Areas for improvement

The service was not able to provide us with information from other stakeholders. It should consider how to develop this aspect of its quality assurance.

The service could ensure that it continues to analyse and audit the feedback it collects from people using the service, carers and staff and clearly demonstrates how it will plan to deal with issues arising.

In its self assessment the Manager said they would ensure that staff members were aware of the quality assurance processes in use and how these impact on their work practice and the service. This would help staff understand how the quality of the service is monitored and improved. At feedback we discussed how the service planned to share tasks between senior staff, including the self assessment for the Care Inspectorate and develop staff involvement in improving the quality of the service.

The service had provided information for monitoring purposes but had not yet received feedback about its performance.

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

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

6 Inspection and grading history

Date	Type	Gradings
21 Apr 2010	Announced	Care and support 5 - Very Good Environment Not Assessed Staffing 5 - Very Good Management and Leadership Not Assessed
23 Jun 2009	Announced	Care and support 4 - Good Environment 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
18 Jun 2008	Announced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and Leadership 4 - 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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ہے بایں تہہ سہ ہونابز رگی د روا ولکش رگی د رپ شرازگ تعاشا ہی

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