

CarePlus Scotland Ltd - Home care services Support Service

Unit 18, Dunfermline Business Centre
Izatt Avenue
Dunfermline
Fife
KY11 3BZ

Telephone: 01592 747527

Type of inspection:
Unannounced

Completed on:
11 February 2021

Service provided by:
CarePlus (Scotland) Ltd

Service provider number:
SP2011011420

Service no:
CS2011281036

About the service

CarePlus Scotland Ltd - Home Care Services (hereafter referred to as CarePlus) is an independent provider of care at home support based in Dunfermline. The service operates 24-hours a day, seven days a week. The service was delivering approximately 625 hours per week across Fife, all funded by Fife Social Work department. The service was subject to a Large Scale Investigation (LSI) which came to an end in July 2020. Regular multi-agency monitoring and support has been in place since then. Recently, a number of concerns have re-emerged: adult support and protection (ASP), staffing levels, and the management of the service. There has been another management change after the previous manager left abruptly and the owner is now the current registered manager supported by a care co-ordinator.

This was a focused inspection to evaluate how well people were being supported during the COVID-19 pandemic. We evaluated the service based on key areas that are vital to the support and wellbeing of people experiencing care during the pandemic. We also reviewed the requirements that had been made at our last inspection.

This inspection was carried out by inspectors from the Care Inspectorate.

What people told us

We spoke to 12 people by telephone to find out more about their experience of the service provided by CarePlus. People told us they were happy with how the care staff treated them:

- Every wee while we get a questionnaire about how care is going - girls on the Cowdenbeath run are a credit to the company.
- They treat me well - they always ask if there is anything else they can do.
- They always talk to me about what is going on. I've had my first jab and they talked me through what would happen.
- I can be very lonely, I have a big family but can't see them. Would be lost without my visits (from carers).
- Carers are considerate. Good conversation.
- Girls are brilliant, always very attentive.
- Pretty good overall - happy that I've had the same girls for a while now. Sometimes they can move on.

There was some feedback about inconsistent wearing of PPE (Personal Protective Equipment)

- Staff wear gloves, masks and aprons most of the time.
- Double gloves, double aprons (front and back) and mask.
- Yes (they wear it) most of the time. Just if they're busy they can forget.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How good is our care and support during the COVID-19 pandemic?	2 - Weak
----------------------------------------------------------------	----------

Further details on the particular areas inspected are provided at the end of this report.

How good is our care and support during the COVID-19 pandemic? **2 - Weak**

7.1 People's health and wellbeing are supported and safeguarded during the COVID-19 pandemic

The focus of this inspection was to evaluate the care and support which people have received during the COVID-19 pandemic. We wanted to explore whether people's rights have been respected and whether their physical, mental and emotional health has been promoted. We found that the service was performing at a weak level. This means that strengths were identified but they were outweighed by significant weaknesses. The weaknesses substantially affect people's experiences and outcomes.

Families we spoke to were, on the whole, positive about the service they receive from CarePlus. People felt treated with dignity and respect and were happy with the standard of care.

Reviews of care plans had been undertaken, however, more could be done to improve the level of detail included in these. Reviews are important as they provide the opportunity for the person in deciding how their needs will be met as well as their wishes and choices. The care plans contained life history and a step by step plan of care for each visit. Of the care plans we reviewed, not all had been updated to include measures to minimise the spread of COVID-19. This had the potential to put people at risk of the infection.

The care co-ordinator and quality assurance spot-checks also identified that a number of care plans were not updated. These plans were being worked through, however progress was impeded by the care co-ordinator being frequently required to deliver care due to gaps in staffing. If care plans are not up to date to reflect current needs, this puts people at risk of their care needs not being met safely or appropriately. The manager must ensure that actions are completed as a result of the review and that care plans were updated appropriately (see requirement 1).

There was some feedback from relatives and staff regarding turnover of staff and consistency. Staffing rotas showed a reliance on the care co-ordinator to fill gaps in staffing and we saw evidence of two shifts within a two week period in January where only one carer was available for shifts that were scheduled to be delivered by two care staff. This meant that two people did not receive their scheduled personal care tasks as directed by the care plan. Only having one staff member to deliver care meant that people were unable to be supported to move safely using hoist equipment. As a result they may have had to spend more time in their bed or may not have the right support to manage their continence. This could mean people were left in discomfort and may not have had their dignity maintained. It could also result in skin being damaged due

to prolonged periods in soiled continence products or being left in the same position for long periods. The provider must ensure that enough staff are available (see requirement 2).

The service has still required prompting and support in relation to reporting adult support and protection and notifications to the Care Inspectorate. It is important that the service is proactive in ensuring that relevant authorities are informed of potential harm to people to ensure that people are protected. Requirements are restated (see requirements 3 & 4).

7.2 Infection prevention and control practices are safe for people experiencing care and staff

Staff described their use of PPE. They described wearing double gloves as well as double aprons (to the front and the back). This is not in accordance with Health Protection Scotland Guidance guidance for Social, Community and Residential Care Settings. This meant that staff could not put on and take off their PPE in accordance with the guidance. Not following the guidance for safe practice puts people receiving support and staff members at potential risk of infection.

Staff described disposing of their PPE appropriately. Managers and staff told us they have sufficient supplies of PPE and this could be readily accessed. Families we spoke to, told us that care staff were wearing PPE when they were in their homes, although there had been some missed occasions. Not wearing PPE while carrying out care tasks in a person's home puts people using the service and staff at an increased potential risk of COVID-19 infection. A complaint had been made to the service where PPE was not used appropriately. The service dealt with this using spot checks on practice. The service's spot check forms did not evaluate safe use of PPE and we advised that this should be included. We were not made aware of any training put in place to support care staff to ensure safe practice. The service must implement the latest guidance for Social, Community and Residential Care Settings published by Health Protection Scotland (see requirement 5).

Infection control is included in the induction materials dated 2017, however these materials had had not been updated to reflect the circumstances of the COVID-19-pandemic. Staff could not tell us about any COVID specific training they had received. The manager advised that she had trained staff, however we could not see evidence of this in the training records provided. It is important for accurate training records to be maintained to ensure that all staff have the training that they need to carry out their job safely and effectively. The service had not put in place training and updates in relation to COVID-19 and this puts service users and staff at risk of infection. The service must put in place COVID-19 specific training for all care staff (see requirement 5).

7.3 Leadership and staffing arrangements are responsive to the changing needs of people experiencing care

Since our last full inspection in October 2019 there have been three different managers at CarePlus, this has impacted on the management and leadership of the service. Changing leadership combined with the ongoing issues with recruitment and retention impacts on consistency and continuity of service as well as training and skills mix of staff. This means people who use the service may experience changes in the staff providing their care and have to build new relationships. The changes also impact on the service's ability to develop a culture of continuous improvement. Half of the care staff team have been recruited within the past 12 months. The constant changes of personnel meant that the service does not sustain improvements made and previous requirements have not been met.

Safer recruitment guidance was not always being followed and staff were working outwith timescales for required SSSC registration. If staff are not recruited properly this puts people using the service at potential risk of harm from people who have not had checks for their suitability of working with vulnerable people. Requirements are made (see requirements 6 & 7).

Staff we spoke to had knowledge of infection prevention and control including the importance of frequent handwashing and changing PPE for each person supported. However, the only training that we could establish that had been provided was infection prevention and control which was developed in 2017. Staff couldn't tell us about any COVID specific training that they had nor could we see any records of COVID specific training. The manager of the service told us that she had delivered training to staff, however it was clear that the information provided to staff was not in accordance with current guidance. It is essential that staff have COVID specific infection control training to ensure staff have the right knowledge to help reduce the risk of COVID infection for both the people they support and to protect themselves.

The registered manager has delegated a substantial amount of management tasks to the care co-ordinator. It is clear from the rota provided that a significant amount of the co-ordinator's time is taken covering gaps in staffing. This leaves limited time to undertake the delegated management tasks required to ensure the delivery of safe care and support for people using the service.

An evaluation of weak means that the service must improve as a matter of priority or the welfare or safety of people may be compromised or their critical needs not met. The service requires a sustained period of consistent management and leadership to ensure that structured and planned improvement is made, where requirements are met and safe practices are in place and sustained.

Requirements

1.

The provider must ensure that people's personal plan is right for them by 5 March 2021. In order to achieve this, the service must ensure that:

- six-month reviews are held with people using the service in good time;
- care plans and risk assessments are updated and reviewed regularly and/or when significant events occur; and
- a system to manage and audit reviews is put in place.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 5(2)(b)(iii) - Personal plans.

This is also to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

2.

The provider must ensure that there are enough available suitably qualified and competent persons working in the care service by 5 March 2021. This is to ensure that people's needs are met as agreed in their personal plan. In order to achieve this, the provider must be able to demonstrate that the following information has been used to inform staffing levels:

1) For everyone using the service, record direct care hours to be delivered in each care plan and number of staff required to deliver the care.

2) In respect of the delivery of the service, the provider should keep a record that identifies the minimum staffing levels and deployment of staff on each 'run' over a four-week period. This will take into account direct care hours to be delivered each day, realistic travel time, staff training, and staff supervision needs.

3) Communicate effectively with people using the service and their families and liaise with relevant organisations to ensure that adequate support is in place should staffing levels fall short.

This is order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - A provider must make proper provision for the health, welfare, and safety of service users.

This is also to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My needs are met by the right number of people.' (HSCS 3.15); and

'My care and support are consistent and stable because people work well together.' (HSCS 3.19).

3.

The provider must ensure that people are kept safe and that adult support and protection issues are recorded and reported properly by 5 March 2021. In order to achieve this, the provider must:

- fully risk assess any individual at risk of harm from their own or others' actions;
- ensure that care plans and risk assessments are updated and reviewed regularly and/or when significant events occur; and
- put in place a system to ensure that adult protection concerns are identified and referred to the correct agencies, including notifications to the Care Inspectorate.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - A provider must make proper provision for the health, welfare, and safety of service users.

This is also to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I am protected from harm, neglect, abuse, bullying, and exploitation by people who have a clear understanding of their responsibilities.' (HSCS 3.20).

4.

The provider must make proper provision for the health, welfare, and safety of service users. In order to do so, the provider must put in place a system, by 5 March 2021. This is to ensure that incidents, adult protection, and disciplinary processes that are notifiable to the Care Inspectorate are undertaken within the required timescales as detailed within the Care Inspectorate Guidance on Notification Reporting.

Additionally, the service must ensure all incidents include consideration as to whether other bodies require to be informed.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - A provider must make proper provision for the health, welfare, and safety of service users.

This is to also ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I experience high quality care and support based on relevant evidence, guidance, and best practice.' (HSCS 4.11);

'If I am supported and cared for by a team or more than one organisation, this is well coordinated so that I experience consistency and continuity.' (HSCS 4.16); and

'I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected.' (HSCS 4.18).

5.

The provider must implement the latest Social, Community and Residential Care Settings COVID-19 Guidance published by Health Protection Scotland. In order to achieve this, the provider must ensure that care staff complete specific COVID-19 infection prevention and control training that reflects the most recent Health Protection Scotland guidance by 5 March 2021.

This is in order to reduce the risk of infection for people using the service and for staff during the pandemic.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - A provider must make proper provision for the health, welfare, and safety of service users.

This is also to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I experience high quality care and support based on relevant evidence, guidance, and best practice.' (HSCS 4.11).

6.

The provider must improve records and practice to demonstrate safer recruitment practice in line with company policy and the Scottish Government's safer recruitment practice guidance by 5 March 2021. In order to achieve this, a robust system of checking must be put in place which gives a clear audit trail of dates and accuracy, before people commence employment.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 9(1) - Fitness of employees.

This is also to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I am confident that people who care and support for me have been appropriately and safely recruited.' (HSCS 4.24).

7.

The provider must ensure that all staff members working within the service are registered with the appropriate professional body within timescales by 5 March 2021. In order to achieve this, the provider must:

- adhere to the requirements set out in the Registration of Social Workers and Social Service Workers in Care Services (Scotland) Regulations 2013 (which states that all social service workers must be registered within six months of starting their role);
- develop a system of overview which identifies registration renewal dates and act in accordance with the regulations should registration lapse; and
- inform the appropriate professional bodies should a significant event occur regarding a staff member, following due process and notification guidance.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 9(1) - Fitness of employees

This is also to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice, and follow their professional and organisational codes' (HSCS 3.14).

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

In order to ensure that people's needs, as agreed in their personal plan, are fully met and their wishes and choices are respected, the provider should ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare, and safety of service users and the hours of care to be delivered. The provider must be able to demonstrate that the following information has been used to inform staffing levels:

- 1) For everyone using the service, record direct care hours to be delivered in each care plan and number of staff required to deliver the care.
- 2) In respect of the delivery of the service, the provider should keep a record that identifies the minimum staffing levels and deployment of staff on each 'run' over a four-week period. This will take into account direct care hours to be delivered each day, realistic travel time, staff training, and staff supervision needs.
- 3) Communicate effectively with people using the service and their families and liaise with relevant organisations to ensure that adequate support is in place should staffing levels fall short.

This should be in place by 31 January 2020.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: "My needs are met by the right number of people" (HSCS 3.15); "My care and support are consistent and stable because people work well together" (HSCS 3.19).

It is also necessary to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - A provider must make proper provision for the health, welfare, and safety of service users.

This requirement was made on 11 December 2019.

Action taken on previous requirement

We reviewed two weeks of staff rotas and it was clear that there are still issues in relation to having enough suitably qualified staff available to delivered scheduled care. We found that one staff member had worked 14 days in a row, the care co-ordinator had stepped in to provide care for 18 shifts over 14 days and two of the five runs each had a shift where only one staff member was available instead of two that was care planned for. This requirement has not been met and has been restated.

Not met

Requirement 2

In order to ensure that people are kept safe and that adult support and protection issues are recorded and reported properly, the provider must:

- Fully risk assess any individual at risk of harm from their own or others' actions.
- Ensure that care plans and risk assessments are updated and reviewed regularly and/or when significant events occur.
- Put in place a system to ensure that adult protection concerns are identified and referred to the correct agencies, including notifications to the Care Inspectorate.

This should be in place by 31 January 2020.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: "I am protected from harm, neglect, abuse, bullying, and exploitation by people who have a clear understanding of their responsibilities" (HSCS 3.20).

It is also necessary to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - A provider must make proper provision for the health, welfare, and safety of service users.

This requirement was made on 11 December 2019.

Action taken on previous requirement

There has been some improvement in relation to reporting however some of these have been in response to requests when issues have been discussed in the monitoring meetings. The last monitoring meeting included protection concerns that had been raised from a complaint made to the Care Inspectorate. The service had not been proactive in informing relevant authorities regarding these issues. Therefore this requirement is restated.

Not met

Requirement 3

In order to ensure that people's personal plan is right for them, the service must ensure that:

- Six-month reviews are held with people using the service in good time.
- Ensure that care plans and risk assessments are updated and reviewed regularly and/or when significant events occur.
- Put in place a system to manage and audit reviews.

This should be in place by 31 January 2020.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: "I am fully involved in developing and reviewing my personal plan, which is always available to me" (HSCS 2.17).

It is also necessary to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 5(2)(b)(iii) - Personal plans.

This requirement was made on 11 December 2019.

Action taken on previous requirement

Reviews are being undertaken. Minimal information is recorded in some of the reviews we looked at. We were told that the only updates made to the care plans by the previous manager was to update the cover sheet. No audit system was in place to pick this up until the new manager came into post. We could see that the spot checks are now in place and have picked up where care plans need to be updated. The new manager is updating care plans as the reviews are being undertaken. We have restated this requirement to ensure monitoring and updating of care plans is fully implemented.

Not met

Requirement 4

In order to ensure that all staff members working within the service are registered with the appropriate professional body the provider must:

- Adhere to the requirements set out in the Registration of Social Workers and Social Service Workers in Care Services (Scotland) Regulations 2013 (which states that all social service workers must be registered within six months of starting their role).
- Develop a system of overview which identifies registration renewal dates and act in accordance with the regulations should registration lapse.
- Inform the appropriate professional bodies should a significant event occur regarding a staff member, following due process and notification guidance. This should be in place by 31 January 2020.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice, and follow their professional and organisational codes" (HSCS 3.14).

It is also necessary to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 9(1) - Fitness of employees.

This requirement was made on 11 December 2019.

Action taken on previous requirement

New staff currently have up to 12 months to register during the pandemic. Checking the register we found that of 32 staff in total, 16 were registered within timescale, 14 staff still had time to register and there were two staff who were not included on the register that should have been. This would indicate the system for monitoring registration is not effective. This requirement is therefore restated.

Not met

Requirement 5

The provider must make proper provision for the health, welfare, and safety of service users. In order to do so, the provider must put in place a system, by 31 January 2020, to ensure that incidents, adult protection,

and disciplinary processes that are notifiable to the Care Inspectorate are undertaken within the required timescales as detailed within the Care Inspectorate Guidance on Notification Reporting.

Additionally, the service must ensure all incidents include consideration as to whether other bodies require to be informed. This should be in place by 31 January 2020.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: "I experience high quality care and support based on relevant evidence, guidance, and best practice" (HSCS 4.11); "If I am supported and cared for by a team or more than one organisation, this is well coordinated so that I experience consistency and continuity" (HSCS 4.16); "I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected" (HSCS 4.18).

It is also necessary to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - A provider must make proper provision for the health, welfare, and safety of service users.

This requirement was made on 11 December 2019.

Action taken on previous requirement

Although reporting has improved, there have been ongoing issues. Additional guidance was provided. The requirement is restated.

Not met

Requirement 6

Records must be improved immediately to demonstrate safer recruitment practice in line with company policy and the Scottish Government's safer recruitment practice guidance. A robust system of checking must be put in place which gives a clear audit trail of dates and accuracy, before people commence employment. This should be in place by 6 December 2019.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: "I am confident that people who care and support for me have been appropriately and safely recruited" (HSCS 4.24).

It is also necessary to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 9(1) - Fitness of employees.

This requirement was made on 16 October 2019.

Action taken on previous requirement

According to the records provided by the service, four of the last five staff recruited worked for ten days prior to the recruitment checks being in place. Risk assessments were requested for these staff. Two declarations signed by new starts confirming their PVG was still valid however no individual risk assessments were in place. The manager advised that only two staff had worked prior to the checks, however it was not recorded in that way. This requirement is restated.

Not met

Requirement 7

The provider should ensure there is managerial oversight of staff practice and the delivery of care and support on a regular basis. This is to ensure the assessed needs of the person receiving care and support are delivered as directed in the support plan. To achieve this, the service must ensure appropriate strategies are introduced to monitor and evaluate the assessed care and support and it's delivered as directed in the support plan. To be completed by 31 January 2020.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: "My care and support is delivered in a planned and safe way, including if there is an emergency or unexpected event" (HSCS 4.14).

It is also necessary to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - A provider must make proper provision for the health, welfare, and safety of service users.

This requirement was made on 11 December 2019.

Action taken on previous requirement

The manager advised that regular spot checks of staff were in place. We saw records of spot checks with staff evaluating staff practice and feedback. The service should ensure that actions are recorded in response to any issues that have been picked up. The spot checks should be enhanced to include checks in relation to correct use and disposal of PPE

Met - outwith timescales

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How good is our care and support during the COVID-19 pandemic?	2 - Weak
7.1 People's health and well being are supported and safeguarded during the COVID-19 pandemic	2 - Weak
7.2 Infection prevention and control practices are safe for people experiencing care and staff	2 - Weak
7.3 Leadership and staffing arrangements are responsive to the changing needs of people experiencing care	2 - Weak

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

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

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

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

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

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.