

Clever Clogs Nursery Day Care of Children

Stobhill General Hospital
133 Balornock Road
Glasgow
G21 3UW

Telephone: 01415 588 188

Type of inspection:
Unannounced

Completed on:
29 July 2021

Service provided by:
Clever Clogs Nursery Ltd

Service provider number:
SP2003001294

Service no:
CS2003005962

About the service

The Care Inspectorate regulates care services in Scotland. The service was registered with the Care Inspectorate on 1 April 2011.

Clever Clogs Nursery provides a day care service for 58. Of those 58, no more than 18 are aged under 2; no more than 18 are aged 2-3 and no more than 22 are aged 3 to those not yet attending primary school.

The service is in partnership with Glasgow City Council to provide commissioned places for children aged between three and five years. It operates from purpose-built, single storey modular building located within the grounds of Stobhill Hospital in the north area of Glasgow City. The nursery had designated playrooms for children in each of the age groups, a staff room, toilet, and kitchen facilities.

The service aims, vision and values include the following information: "working in partnership with parents and carers to ensure that each child achieves the very best they can."

As part of this inspection, we took into consideration Key Question 5 - Operating an early learning and childcare setting (including out of school care and childminders) during Covid-19 with a specific focus on Quality Indicator 5.2: Infection prevention and control practices support a safe environment for children and staff. We will report on the overall performance of this indicator in Theme 1 Quality Care and Support.

As part of the inspection process, we completed an onsite visit and virtual meetings with staff. The manager emailed a sample of documents. These included a sample of policies and procedures, personal plans, training records, meeting minutes and risk assessments.

In Scotland, the Getting It Right for Every Child (GIRFEC) approach puts wellbeing at the very heart of its approach. The eight 'indicators' of wellbeing that form the basis of GIRFEC are: Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible and Included, often referred to as 'SHANARRI'.

The GIRFEC approach is underpinned by the principles of prevention and early intervention. It's a consistent way for people to work with all children and young people. The approach helps practitioners focus on what makes a positive difference for children and young people, and how they can act to deliver these improvements. Getting It Right for Every Child is being threaded through all existing policy, practice, strategy, and legislation affecting children, young people and their families.

The Care Inspectorate is committed to improving the health and wellbeing of all children receiving a care service to ensure they have the best start in life, are ready to succeed and live longer, healthier lives. The Care Inspectorate has an important role to play in supporting this approach in inspecting care services for children.

What people told us

During the inspection we invited parents to provide feedback. All parents responded to us by email.

From the feedback provided by parents we found they were generally happy with the staffs support of their child/ren and that some parents found the manager's methods of communications to be effective. For example:

"I find the nursery staff to be really caring and considerate; committed and relaxed."

"We get an update via email on all the things happening within the nursery with regards to staff moves, training, refurbishment, activities and the meal menu. On the morning during drop off we usually get told what will be happening that day and then debrief on pick up too."

"Communicating with us verbally at the end of each session (is positive), the girls are always happy to tell us about our child's day and they keep us informed about his eating and if he has been upset or not."

Although some parent's feedback was positive, it was evident that this experience was not consistent across the setting and some parents highlighted their concerns. For example:

"We don't feel that involved."

"The one thing we feel is an issue at the nursery is lack of communication."

"I think some improvement on the journal updates would be great, just some more information on his days there and pictures would be fantastic."

Self assessment

Key Question 5 self evaluation was submitted in 2020 and detailed all of the actions taken to support children, staff and their families during Covid. This was taken into account during this inspection process.

From this inspection we graded this service as:

Quality of care and support	2 - Weak
Quality of environment	3 - Adequate
Quality of staffing	3 - Adequate
Quality of management and leadership	3 - Adequate

Quality of care and support

Findings from the inspection

Our focus in this inspection area was to establish how well the service met the needs of children that used it. We found some strengths; however, these were compromised by significant weaknesses.

Parents told us they wanted more information about their child's developmental progress and experiences. We found that children's personal plans could be improved to ensure they are current and more clearly illustrate how their individual needs should be met. In addition, a requirement set during the last inspection to improve staff's observations of children had not been met. Whilst we recognise the provider had invested in an electronic platform to support staff, progress had been slow. (See Requirement 1)

We were not satisfied that the service had appropriate infection control procedures in place to support a safe environment for children and staff. We identified areas that must be improved in respect of infection control procedures.

For example, responding to signs and symptoms of potential infection and the cleanliness of the environment. We report further on this within the theme areas of environment, staffing and management and leadership. (See Requirement 2)

Staff were aware children needed additional support when settling into an unfamiliar environment. This was helping children to feel safe and secure. Despite Covid-19 restrictions, parents were involved in the settling of their child as staff utilised the outdoor spaces. One parent told us they appreciated speaking "with one of the managers who wanted advice on how they could help my child feel more settled."

Staff had updated their child protection training and were familiar with the setting's current policy and procedure; however, they were not familiar with the supplementary national child protection guidance and the setting's policy had not been updated to reflect any changes due to Covid-19. The child protection and safeguarding policy and procedure should be reviewed and updated to ensure that children are better protected from harm because staff follow up-to-date best practice guidance, policies, and procedures. (See Recommendation 1 within Management and Leadership)

Children had opportunities to be social and physical through organised and freely chosen play experiences, including using open-ended and natural materials. To increase children's motivation for learning, staff should plan experiences based on their knowledge of individual children's interests and needs.

Children had choice in relation to their snacks and meals. Alternative food was provided if children disliked what was available. Whilst the meal experience was pleasant, we discussed ways it could be maximized with the senior leadership team. For example, better promoting children's independence.

Requirements

Number of requirements: 2

1. By 18 October 2021, the provider must ensure that every child has an up to date written personal plan in place outlining how the service will meet their health, welfare, and safety needs. Staff observations of children must reflect their individual experiences, with appropriate next steps in children's support identified and recorded.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15), and in order to comply with Regulation 5 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

2. To keep children safe and secure the provider should submit an action plan to us by 18 October 2021 outlining how they intend to improve current infection prevention and control procedures. The plan should state how improvements will be made in the following areas:

- implementing and raising awareness of national guidance within the service,
- risk assessments. These should better reflect changing circumstance, protocols, and systems,
- staff's implementation of training. This might include developing existing monitoring systems or creating more opportunities for professional discussions,
- deep cleaning frequency clarified with staff- particularly when circumstance change or when there is an outbreak,
- clearer guidance and procedures regarding the isolation of children with suspected Covid-19,

- system in place to ensure that the furniture and environment used by children are kept clean, uncluttered, and well maintained,
- appropriate use of Personal Protective Equipment (PPE),
- clearer guidance, procedures, and promotion of enhanced hand hygiene,
- limiting contacts: reducing the number of unnecessary interactions that children and staff have,
- Responding to the signs and symptoms of Covid-19 in staff and children.

This is to ensure care and support is consistent with Health and Social Care Standards, which state: 'My environment is secure and safe', (HSCS 5.17) and to comply with Regulation 4(1)(a) and (d) (welfare of users and procedures for the prevention and control of infection) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

Recommendations

Number of recommendations: 0

Grade: 2 - weak

Quality of environment

Findings from the inspection

Our focus in this inspection area was to evaluate the environment from which the service is delivered. In this area, we found some strengths; however, to ensure children achieve positive outcomes improvements must be made.

Some positive steps had been taken to promote a safe and hygienic environment and to support staff in keeping children safe. For example:

- to help ensure social distancing, procedures had been changed when picking up and dropping off children. This was helping to keep everyone safe and contributing to a relaxed atmosphere at drop off and collection,
- all staff participated (twice weekly) in the routine asymptomatic at-home testing using lateral flow devices (LFD). This was to contribute to the wellbeing of everyone in their setting and community,
- staff opened doors and windows to increase natural ventilation where it was practical, safe, and secure to do so.

Whilst we recognise the importance of these positive steps, we found that children were still unnecessarily exposed to potential risks from infection because not all staff working in the service were familiar with, or following, guidance on infection prevention and control. During Covid-19, the implementation of strict infection control procedures is necessary to keep people safe. (See Requirement 2: Care and Support). We identified potential risks to children and staff. For example:

- some of the staff undertaking enhanced cleaning tasks where unclear what procedures should be followed to minimise the risk of transmission across the setting,
- some staff did not follow best practice guidance regarding the doffing and donning of Personal Protective Equipment (PPE),

- almost all staff had completed Covid-19 and control of infection training; however, they require support to implement this into practice and systems to ensure continued compliance,
- the procedure for isolating a child with suspected Covid-19 did not reflect best practice. To better support the health and wellbeing of all children, we asked that an alternative arrangement be put in place,
- aspects of the Covid-19 risk assessment were not adhered to. For example, the requirement for all visitors, including parents, to wear a face covering, unless exempt.

All children benefited from daily opportunities to play outdoors and visit local green spaces. This reduced the risk of infections transmitting and provided regular opportunities for children to be physically active.

There was a variety of resources available to enhance children's play. We encouraged the staff team to increase the involvement of children in the planning and evaluation of their play environments. This is to increase children's sense of belonging and ownership of their learning.

During our site visit the management team were refreshing one of the playrooms. Whilst we recognised the need to improve children's spaces, we found that this had increased risks and clutter in other areas of the setting. For example, discarded resources and furniture had been piled at the side of the building and on the day of our inspection the entrance hallway was cluttered. Staff must ensure that the environment is safe for everyone that attends the service (see requirement 1). We highlighted our concern with the management team that potential risks to children's safety were not identified or controlled. To protect children's wellbeing the service should strengthen its approach to working with risk, ensuring a balance between safety and challenge. (See Recommendation 1 within Management and Leadership).

Requirements

Number of requirements: 1

1. By 18 October 2021, we must be provided with an assurance that the children's environment is safe. Priority action must be given to:

- the removal of furniture discarded at the side of the building,
- improving cleaning procedures,
- children's outdoor play areas have been cleared of rubbish and broken equipment,
- improving staffs visual risk assessment of the environment.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state: 'My care and support is provided 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 Regulation 4.1(a) (welfare of users- a provider must make proper provision for the health welfare and safety of service users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011).

Recommendations

Number of recommendations: 0

Grade: 3 - adequate

Quality of staffing

Findings from the inspection

Our focus in this inspection area was to evaluate the quality of the staff, including their qualifications and training. In this area, we found some strengths; however, to ensure children achieve positive outcomes improvements must be made.

All parents highlighted staff as a key strength within the service. For example, they told us; "staff are very friendly", "new staff have been nothing but friendly and really invested with the children" and "the staff are fantastic". The team described themselves as supportive and this was mirrored by management who were optimistic the current team would influence improvements across the setting. We also found the staff team to be friendly resulting in a friendly atmosphere within the service.

The team were at differing stages of their professional training and at times children were cared for by unqualified staff. To ensure children are kept safe and benefit from the differing abilities and expertise within the team, staff must be deployed based on their role, competencies, and experience. (See Requirement 1)

The management team had followed their safe recruitment of new staff procedure; however, they had not yet updated this to include a more robust induction. A robust induction is needed to ensure that all newly recruited staff have, or are working towards obtaining, the skills, knowledge and understanding required to maximise children's outcomes and keep them safe. (See Recommendation 1 within Management and Leadership)

A start had been made to promoting leadership roles within the team. For example, specific staff were responsible for food handling and training had been provided accordingly. We highlighted the need to continue to identify leadership roles within the team to foster professional wisdom and to support the whole service improvement journey.

At the time of our inspection visit we found "cohorts" were within the maximum capacity guidelines; however, staff were working across different "cohorts". The managers should revisit their approach to "cohorts" and ensure they reduce the number of interactions that children and staff have. This is to reduce the likelihood of Covid-19 transmitting and to minimise the impact "isolating" has on children, families, and staff. (See Requirement 2 within Care and Support)

Most interactions we observed were pleasant; however, there were missed opportunities to respond to children's verbal and non-verbal initiations despite an exceptionally low volume of children in attendance. The senior leadership team informed us this was a priority area of improvement within their improvement plan. We agreed that some staff's communication skills could be further developed to ensure that nurturing interactions are consistent across the service.

Requirements

Number of requirements: 1

1. By 18 October 2021, to ensure that children's care and support is provided in a planned and safe way you must:

- demonstrate that all members of staff working in the service understand their roles and responsibilities,
- ensure sufficient numbers of qualified staff are available to supervise, support and to meet the needs of the children.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state: 'I use a service and organisation that are well led and managed.' (HSCS 4.23), It is also necessary to comply with Regulation 4.1(a) (welfare of users- a provider must make proper provision for the health welfare and safety of service users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

Recommendations

Number of recommendations: 0

Grade: 3 - adequate

Quality of management and leadership

Findings from the inspection

Our focus in this inspection area was to evaluate the quality of management and leadership, including how the service is managed and how it develops to meet the needs of the children. In this area, we found some strengths; however, to ensure children achieve positive outcomes improvements must be made.

With support from Glasgow City Council's early years team, the managers had identified some key areas of improvement. However, despite this being a requirement from the previous inspection, they had not maintained a robust quality assurance system. To provide clearer and more consistent leadership which drives forward improvement and protects the wellbeing of children, the provider must implement a quality assurance system. (See Requirement 1)

During our visit we reviewed a sample of policies and procedures and identified areas that needed to be updated. To ensure safe care of children the manager should develop a cyclical system that supports them to regularly review and update the service policies and procedures. (See Recommendation 1)

Staff acknowledged the challenge of parents not entering the building; however, they felt they still had opportunities to share and receive information at the door and by making monthly phone calls. Some parents agreed that they had opportunities to speak with staff; however, some were dissatisfied with current approaches. We shared parents' feedback with the management team and highlighted the need for communication strategies to be consistently applied. This is so all children experience stability in their care and support from people who know their needs, choices and wishes, even if there are changes in the service or organisation.

We found that the provider and the registered manager worked in partnership to manage the service. We asked the provider to ensure that clear lines of responsibility and accountability are established. Policies and procedures should be updated to reflect this. For example, the service whistleblowing policy should clearly outline who will investigate concerns and who staff should report to if they are unsatisfied with the speed, conduct or outcome of any investigation.

Staff told us that the management team were approachable and that they had supported their wellbeing during the pandemic. This contributed to staff feeling part of a supportive team. Staff benefited from 'review' meetings to discuss their wellbeing and professional development. We suggested increasing the frequency of the meetings and, where necessary, including focused discussion about children's needs and constructive discussions about staff's practice, skills, and knowledge. This will ensure staffs one to one meetings contribute to the continual improvement of the service and encourage a culture of reflective practice.

We had previously asked the managers to formalise the service complaints procedure. During this inspection, we found a formal complaints policy was in place. The service had not received any complaints in the last year; therefore, we could not evaluate the impact of the new procedure.

Requirements

Number of requirements: 1

1. By 18 October 2021, to ensure that children receive high-quality care and support, the provider must improve the current quality assurance systems to have clearer priorities focussed on outcomes for children. The system should at least include:

- a clear and manageable monitoring calendar to look at the quality of provision,
- direct observations of children's experiences, including interactions with staff,
- proactive systems to source and research recent guidance and legislation,
- systems to support the review and update of policies and procedures,
- clear action plans for staff to improve practice in any areas identified,
- audits of information recording systems to ensure they support the work of the service and keep children safe. for example, personal plans, child protection and safeguarding, administration of medicine and risk assessments,
- the use of frameworks such as 'Realising our Ambition' or 'The Health and Social Care Standards' to benchmark quality,
- regular involvement of staff, parents, and children in evaluating the quality of the service.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state: 'As a child, I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance systems.' (HSCS 4.19).

It is also necessary to comply with Regulation 4.1(a) (welfare of users- a provider must make proper provision for the health welfare and safety of service users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

Recommendations

Number of recommendations: 1

1. In order to protect the health and wellbeing of all children, the provider should ensure that the service policies and procedures are regularly reviewed and further developed, in line with national best practice guidance and legislation. The provider should ensure that all staff are familiar with policies and procedures. This is to ensure that policies and procedures support staff to provide consistent, stable, and safe care and support.

Priority attention should be given to the following procedures:

- administration of Medication,
- infection Control and Prevention,
- risk,
- safer Recruitment,
- child Protection and Safeguarding,
- whistleblowing.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state; 'As a child, I use a service and organisation that are well led and managed' (HSCS 4.23) and 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.' (HSCS 4.14)

Grade: 3 - adequate

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

Previous requirements

Requirement 1

Management and staff's observations should reflect children's learning, with clearly identified individual next steps in children's learning. Next steps should be tracked to reflect children's progress.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15) and in order to comply with Regulation 5 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

Timescale for meeting this requirement: 31 March 2019.

This requirement was made on 6 February 2019.

Action taken on previous requirement

There had been some improvements made towards meeting this requirement. For example, the provider had invested in an electronic learning journal system and had evidently worked in partnership with Glasgow City Council to make improvements. However, we found that improvements were still required to increase the quality of staff's observations in relation to children's learning. Please refer to Quality Theme 1: Care and Support for further detail on our findings.

This requirement is not met.

Not met

Requirement 2

The provider and manager should develop robust systematic systems to monitor the quality of work of staff members and the service as a whole. Everyone should have clear focus on monitoring and evaluating the quality of children's learning and on tracking their progress and achievements. They should work effectively as a team.

This is to ensure management and leadership is consistent with the Health and Social Care Standards, which state: 'I experience high quality care and support based on relevant evidence, guidance and best practice'. 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes', (HSCS 4.11 and 4.19), and in order to comply with Regulation 4 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

Timescale for meeting this requirement: 31 March 2019.

This requirement was made on 6 February 2019.

Action taken on previous requirement

Whilst some improvements had been made prior to our inspection in 2019 these had not been maintained. The manager and provider of the service acknowledged that they had not managed to put in place a robust and transparent quality assurance system. Please refer to Quality Theme 4: Management and Leadership for further detail on our findings.

This requirement is not met.

Not met

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

Previous recommendations

Recommendation 1

Management and staff should review and amend their practice on nappy changing and infection control in accordance with Care Inspectorate Nappy changing guidance for early learning and childcare services and Health Prevention Scotland guidance on Infection Prevention and Control in Childcare Settings (Daycare and Childminding Settings).

This is in order to ensure that the environment is consistent with the Health and Social Care Standards, which state: 'My environment is secure and safe.' (HSCS 5.17)

This recommendation was made on 13 January 2020.

Action taken on previous recommendation

Significant improvements had been made to the nappy changing facilities used by children in the 0–2 years old playroom. Staff were clear about their role and responsibility in relation to providing safe, respectful, and responsive personal care because they had received recent training and were supported by senior staff. To ensure improvements are maintained the service should develop a personal care policy and procedure to promote best practice and guide staff. Please refer to Quality Theme 4: Management and Leadership for further detail.

This recommendation is met.

Recommendation 2

The provider and manager should provide more opportunities for staff to undertake leadership roles for identified areas within the service. These opportunities should be linked to the service annual improvement plan and staff development and review records and agreements.

This is to ensure staffing is consistent with the Health and Social Care Standards, which state: '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)

This recommendation was made on 13 January 2020.

Action taken on previous recommendation

The provider and manager had begun to encourage leadership within the team and some staff had designated areas of responsibility. For example, food handling and tracking learning. Whilst we recognise the improvements that had been made the manager and provider must ensure that a robust quality assurance system is put in place that promotes further leadership opportunities across the setting. Focus should be on enhancing the quality of children's everyday experiences and on keeping them safe. Please refer to Quality Theme 4: Management and Leadership for further details.

This recommendation is met.

Recommendation 3

Staff should have opportunities to continue to build the new team, and to have professional dialogue to share best practice to promote positive outcomes for children. They should be able to access external training and networking opportunities. It would be helpful if staff roles and responsibilities in relation to their SSSC registration Codes of Practice were discussed during this process.

This is to ensure staffing is consistent with the Health and Social Care Standards, which state: '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)

This recommendation was made on 13 January 2020.

Action taken on previous recommendation

Despite the challenges of Covid-19, the staff had participated in training using electronic communication platforms. Staff self-reported being part of a supportive team and were enthusiastic about moving forward as a new team. Team meetings were now in place, these could be maximised by focusing on and promoting professional dialogue in relation to best practice, self-evaluation, and children's experiences.

This recommendation is met.

Recommendation 4

The manager should support staff to improve and further develop home links and transitions for children.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state: 'My care and support meets my needs and is right for me.' (HSCS 1.19)

This recommendation was made on 13 January 2020.

Action taken on previous recommendation

Transition records were in place to gather information to support staff in planning for children during some transitions. For example, when children moved playrooms rooms or when preschool children transitioned to school. Please refer to Quality Theme 1: Care and Support for further details.

This recommendation is met.

Complaints

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

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings
26 Nov 2019	Unannounced	Care and support 3 - Adequate Environment 3 - Adequate Staffing 3 - Adequate Management and leadership 3 - Adequate
13 Dec 2018	Unannounced	Care and support 3 - Adequate Environment 2 - Weak Staffing 3 - Adequate Management and leadership 2 - Weak

Date	Type	Gradings	
30 Nov 2016	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good Not assessed
8 Oct 2014	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
26 Feb 2013	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 5 - Very good 5 - Very good 5 - Very good
16 Jun 2011	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 4 - Good 3 - Adequate 3 - Adequate
13 Aug 2009	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 2 - Weak 4 - Good
13 Oct 2008	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate

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.