

**Report To:** Community Health & Care  
Partnership Sub Committee

**Date:** 25th April 2013

**Report By:** Brian Moore  
Corporate Director  
Inverclyde Community Health &  
Care Partnership

**Report No:**  
CHCP/33/2013/BC

**Contact Officer:** Beth Culshaw  
Head of Health & Community  
Care

**Contact No:** 01475 715387

**Subject:** INSPECTION OF INVERCLYDE CHCP'S RESPITE UNIT

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## 1.0 PURPOSE

- 1.1 To advise members of the outcome of the inspection conducted by the Care Inspectorate in relation to Inverclyde's Respite Unit.

## 2.0 SUMMARY

- 2.1 The Care Inspectorate carried out an inspection of Inverclyde's Respite Unit in the last week of November 2012.

The service retained grade 5 Very Good for Quality of Care and Support and Quality of Staffing, and grade 4 Good for Quality of Environment, and improved to grade 5 Very Good for Quality of Management and Leadership.

## 3.0 RECOMMENDATION

- 3.1 To note the positive outcome of the inspection and Inverclyde's ongoing commitment to the provision of high quality Respite services.
- 3.2 To note that an action plan to progress the improvements and recommendations contained within the Care Inspectorate Report has been agreed.

**Brian Moore**  
Corporate Director  
Inverclyde Community Health & Care  
Partnership

#### 4.0 BACKGROUND

- 4.1 Inverclyde's Respite Unit, based at the Hillend Centre, was subject to an Unannounced Inspection in November 2012.
- 4.2 The service offers a short break and respite service to a maximum of 3 older people at any one time and is also open to those with a physical or learning disability or mental health problem.
- 4.3 The report commented positively on the services participation strategy, information and admission packs and the use of a performance pack based on the views of service users. Positive comments were also made regarding the use of feedback from service users and the benefit that service users obtained from the garden area.
- 4.4 The following recommendations were made in relation to Theme 2, Statement 2, which is..."We make sure that the environment is safe and service users are protected":-
1. The service should use the guidance from the Health and Safety Executive with the use of bedrails. A system should be adopted that records checks made when using this equipment and should reflect when the equipment is maintained. This is to comply with NCS Short Breaks and Respite Care services, Standard 9.5 Feeling Safe and Secure.
  2. The service should review the current domestic support, and ensure that standards of cleanliness are monitored and maintained. This is to comply with NCS Short Breaks and Respite Care services, Standard 9 Feeling Safe and Secure.
  3. The service should retain the signatures and initials of all staff who administer medication. The service should record the temperature of the fridge that is used to store any medicines. This is to adhere to The Royal Pharmaceutical Society Guidance: The Handling of Medicines in Social Care and NCS Short Breaks and Respite Care services, Standard 15.2 Keeping Well – Medication.

#### 5.0 PROPOSALS

- 5.1 Inverclyde CHCP will continue to strive to improve the services provided at the Hillend Respite Unit.

#### 6.0 IMPLICATIONS

- 6.1 Legal: None
- 6.2 Finance: There are no financial implications in respect of this report.

Cost Centre	Budget Heading	Budget Year	Proposed Spend this Report	Virement From	Other Comments

- 6.3 Personnel: None
- 6.4 Equalities: None

6.5 Repopulation: None

## **7.0 CONSULTATION**

## **8.0 LIST OF BACKGROUND PAPERS**

8.1 Care Inspectorate Report.



## Care service inspection report

# Respite Unit

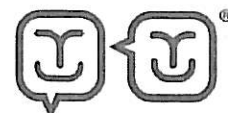
## Care Home Service Adults

Hillend Centre  
2 East Crawford Street  
Greenock  
PA15 2BT  
Telephone: 01475 715948

Inspected by: Gerry Tonner

Type of inspection: Unannounced

Inspection completed on: 27 November 2012



HAPPY TO TRANSLATE

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### **Service provided by:**

Inverclyde Council

### **Service provider number:**

SP2003000212

### **Care service number:**

CS2003001081

### **Contact details for the inspector who inspected this service:**

Gerry Tonner

Telephone 0141 843 6840

Email [enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

## Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

### We gave the service these grades

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

### What the service does well

The service is very good at ensuring continuity of care. We found that the care delivered was in line with the wishes and preferences of each service user and their relatives.

The service has a highly motivated staff group who are focused on the needs of each service user.

The service is good at communicating with service users and relatives before and after respite admissions.

The Manager is readily accessible to service users and relatives. We found her to be responsive to the changing needs of service users.

### What the service could do better

The service needs to improve the systems and checks used with bedrails to ensure the safety of service users.

The current domestic arrangements should be reviewed to ensure that standards of cleanliness improve.

The Manager should ensure that records associated with the safe storage and administration of medicines are developed further.

Staff meetings and appraisals should be carried out as planned.

### **What the service has done since the last inspection**

The service has commissioned the assistance of Your Voice Forum to capture the views of people who use the service and their carers.

The service has also produced a performance report.

### **Conclusion**

Hillend respite service continues to offer high standards of care to service users by an experienced and committed group of staff which is overseen by a highly motivated and responsive manager.

### **Who did this inspection**

Gerry Tonner



# 1 About the service we inspected

Inverclyde Council's Respite Unit has been registered with the Care Commission since July 2006 to offer a short breaks and respite service to a maximum of 3 older people (at any one time) with physical disability, a learning disability or mental health problem.

Social Care and Social Work Improvement Scotland (The Care Inspectorate) is the new regulatory body for care services in Scotland. It will award grades for services based on the findings of inspections. The history of the grades that previously have been awarded by the Care Commission will also be available on the SCSWIS website. The service is provided from a purpose built facility in a residential area of Greenock.

The stated aims of the service are;

- \* To provide an efficient and effective service that lets service users remain as independent as possible while promoting a high standard of care
- \* To create a safe, welcoming and friendly environment as well as respecting the service user's right to privacy, dignity, choice, safety and self expression.

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

**Quality of Care and Support - Grade 5 - Very Good**

**Quality of Environment - Grade 4 - Good**

**Quality of Staffing - Grade 5 - Very Good**

**Quality of Management and Leadership - Grade 5 - Very Good**

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website [www.careinspectorate.com](http://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**

An unannounced inspection was carried out by Inspector Gerry Tonner on the 26th and 27th November 12. The following activities were carried out over the course of the inspection; -

- \* Interviewing 3 service users
- \* Telephone interviews with 3 relatives
- \* Reviewing the content of 9 returned Care Inspectorate questionnaires
- \* Examining 3 support plans and associated material including contact records
- \* Reading the content of "Your Voice" and other participation material
- \* Checking the content of Information pack issued to service users
- \* Interviewing the Manager and 3 Respite Officers
- \* Reading staff meeting minutes, audits, complaint records and accident/incident records
- \* Carrying out an environmental inspection

Feedback was given to the Manager at the end of the inspection were the findings and grades awarded were accepted as an accurate reflection of current performance.

### **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](http://www.firelawscotland.org)

### **The annual return**

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

**Annual Return Received:** Yes - Electronic

### **Comments on Self Assessment**

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

The Care Inspectorate received a 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 heading that we grade them under.

### **Taking the views of people using the care service into account**

These are reflected throughout the quality statements.

### **Taking carers' views into account**

These are reflected throughout the 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**

Our examination of records, discussion with service users, relatives, staff and the manager supported that the service performs at a very good level in this quality statement.

The organisation has a participation strategy.

We noted that Hillend Respite service commissioned Your Voice (Inverclyde Community Care Forum) and held an event in June 12 to engage with service users and carers and gather their views on how the service ensures that they receive the highest quality respite care service. We read the associated findings. We found that a number of important areas were covered during this exercise including hearing individual's views on; - engagement, quality of staffing, management and leadership, areas of improvement, communication, activities and compatibility.

The findings revealed that overall there was very positive feedback gained from the carers involved and the service had responded to issues and any concerns raised.

We saw that the service has produced an information pack for people who use the service. We thought that it was appropriate that carers and people who use the service had been involved with the production of the pack.

Through checking the content we found that this provided essential information on the range of support and care provided by the service and provided information on the complaints procedure.

We thought that it was appropriate that service users are issued with an admission

pack when they use the service. This also contained a range of relevant information for service users.

We found that the service had also produced a Performance Report which was based upon the views of 45 service users who had used the service over the previous year. Further comments in connection with this are made in quality statement 4.4.

We received a number of comments from service users and relatives which supported that they are routinely involved with sharing their views on the service; -

"The staff phone you to find out if you have anything to say (about the service)."

"I attended the Your Voice Forum. They asked for my opinions at this. It was good. We carers suggested that there should be more respite services like this one."

"I have been invited to the Focus Group meeting and I have had conversations with the Manager, she asks for my opinions."

"I am very happy with the service, my relative looks forward to going to respite. Previously it was a battle of wills."

"They visited my relative at home before going into the respite unit; they took relevant details to ensure that she would get the same level of care."

"She (relative) is pleased with the service and this makes me pleased."

### **Areas for improvement**

We noted that the service was in the process of producing an action plan based upon the findings of the Performance report. This should be fully completed and shared with relevant parties including service users and carers who participated.

**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

Our examination of records, discussion with service users, relatives, staff and the manager supported that the service performs at a very good level in this quality statement.

We checked and found that accidents and incidents are being recorded. We thought that overall the system was good as it encouraged staff to check what actions need to be taken to prevent or reduce the risk of recurrence.

We sampled the content of 3 support plans and associated assessments and records. We found that there was good "person centred" information recorded. We found that considerable effort had been made to discover what each person's abilities are and what levels of support would be required when they come into the respite unit. We also found that staff were good at updating assessments including manual handling assessments.

Through carrying out observation of practice we found that staff provided support in line with an individual's support plan.

We noted that the service records (under the contact recording sheet) the individual service user's experiences and achievements whilst in respite.

We thought that it was good practice that staff encourage service users to maintain their interests and hobbies whilst in respite. Examples included working in the garden and being involved with local activities within the community.

The service also uses respite activity records and the daily log of care which details the social activities carried out.

We found that staff from the service attend review meetings to share information on the person's experiences whilst in respite. These are also used to gain feedback on the care and support provided during respite.

We received a number of comments from relatives which demonstrated that staff were proactive in referring service users to a range of professionals when there were concerns about their health needs; -

"The staff got the G.P. in to see my relative while she was in respite as she had become unwell. This was the right thing to do. They communicated with me to let me know what happened."

"They arranged for a diabetic nurse to come out and see my relative."

We received positive feedback from the completed Care Inspectorate questionnaires 8 out of 9 indicated that they strongly agreed with the statement; - "Overall, I am happy with the quality of care that I receive."

We checked and found that risk assessments were in place for service users. We thought that these were well structured and identified risks associated with mobility, independence, medical considerations, environment and need or use of equipment.

### **Areas for improvement**

We highlighted at the feedback session that there was an occasional entry made by staff that needed to be more clear and detailed e.g. food/snack provided and ensuring that this is aligned to the assessed need.

**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: 4 - Good

### **Statement 1**

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

#### **Service strengths**

Our examination of records, discussion with service users, relatives, staff and the manager supported that the service performs at a very good level in this quality statement.

We were informed that there had been refurbishment carried out earlier in the year. This had resulted in en suite wet floor shower areas and new carpeting throughout the unit.

We saw that service users had been involved with the selection of colours for decoration and carpets for the unit. We thought that it was very good that there had been direct involvement in this area.

We noted that feedback is sought from each service user after each respite admission. This gives them an opportunity to make comment on the environment.

We received very positive feedback from service users and relatives interviewed over the course of the inspection. The comments shared supported that people found the environment to be intimate, homely and comfortable. One relative described the unit as; - "A home from home."

We thought that the garden area was a real asset for service users. We found that this was well maintained and that individual service users have been involved in improving the garden through making suggestions about the need for new garden furniture. We were informed that new furniture was purchased by the service following receiving this feedback.

#### **Areas for improvement**

Continue involving service users and carers with the ongoing assessment of the quality of the environment.

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

**Number of requirements:** 0

**Number of recommendations:** 0

0. The service should review the current domestic support, and ensure that standards of cleanliness are monitored and maintained. This is to comply with NCS Short Breaks and Respite Care services, Standard 9 Feeling Safe and Secure.

### **Statement 2**

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

### **Service strengths**

Our examination of records, discussion with service users, relatives, staff and the manager supported that the service performs at a good level in this quality statement.

We carried out an environmental check and found that the overall standard of cleanliness was good. We saw that there are individual bedrooms and a number of communal areas including lounge/dining area and conservatory.

We also noted that there were some improvements that had been made to make the environment more homely. This included purchasing new bedding.

We found the new call system to be readily accessible to service users and that staff had positioned handsets appropriately for service users to use. One service user interviewed shared that she knew how to operate the system.

The service has a comprehensive range of policies and procedures to guide staff practice. Staff have also undertaken relevant training including COSHH.

Personal protective equipment such as disposable gloves and aprons were readily available and appropriately stored for staff member's use.

We checked and found that the service has carried out an environmental risk assessment.

We saw that the service has contracts in place with external companies for the maintenance and repair of equipment. This included mobile hoists and the door entry system.

We checked and saw that there is a system used for recording when repairs are required

We saw that Portable Appliance Testing (PAT) had been carried out in March 12 for all electrical equipment owned by the service.

We noted that each bedroom has a lockable facility for the safe storage of medication.

### **Areas for improvement**

We checked 2 bedrooms and noted that bedrails are attached to the beds. We could not see a record of checks that were being carried out with this equipment to ensure that they were safe and appropriate for use. We shall make a recommendation that

the service uses guidance from Health and Safety Executive with regards adopting a system and records of checks and maintenance carried out with using bedrails. See recommendation 1.

There were some issues with the standards of cleanliness within the unit. This included the cleaning of chairs and showerchairs. We would like to see the standards of cleanliness improve by reviewing the current domestic support arrangements and ensuring a robust system is adopted in order that standards of cleanliness are monitored and maintained. We shall make a recommendation in connection with this. See recommendation 2.

We noted that the service does not retain the signature and initials of staff who administer medication. This should be in place and retained by the service. The service should also record the temperature of the fridge where medications are stored. These records should be aligned to good practice such as The Royal Pharmaceutical Society Guidance; The Handling of Medicines in Social Care. A recommendation shall be made in connection with this. See recommendation 3.

We noted that storage is very limited within the unit. The service should consider alternative solutions to storing equipment within the staff toilet.

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

**Number of requirements:** 0

**Number of recommendations:** 3

### Recommendations

1. The service should use the guidance from the Health and Safety Executive with the use of bedrails. A system should be adopted that records checks made when using this equipment and should reflect when the equipment is maintained. This is to comply with NCS Short Breaks and Respite Care services, Standard 9.5 Feeling Safe and Secure.
2. The service should review the current domestic support, and ensure that standards of cleanliness are monitored and maintained. This is to comply with NCS Short Breaks and Respite Care services, Standard 9 Feeling Safe and Secure.
3. The service should retain the signatures and initials of all staff who administer medication. The service should record the temperature of the fridge that is used to store any medicines. This is to adhere to The Royal Pharmaceutical Society Guidance; The Handling of Medicines in Social Care and NCS Short Breaks and Respite Care services, Standard 15.2 Keeping Well - Medication.

### **Quality Theme 3: Quality of Staffing**

Grade awarded for this theme: 5 - Very Good

#### **Statement 1**

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

#### **Service strengths**

Our examination of records, discussion with service users, relatives, staff and the manager supported that the service performs at a very good level in this quality statement.

We noted that a keyworker system is used. When we carried out interviews relatives and a service user indicated that they were aware of the keyworker system and shared that they found this useful for promoting continuity of care.

We received many positive comments in relation to the quality of staff within the respite unit; -

"She (relative) likes them all (staff) and feels that she can speak to them."

"They (staff) are very friendly. I can ask them for anything. They are available at all times."

"The staff are very good. We get a report on how the respite period went. You get a sense that the staff are getting to know my mum."

"I am reassured (based on the feedback from the relative who uses respite) that the staff are fine at assisting her with her medication."

"The staff balance who else is in respite. They are friendly and are "tuned in" to my relative."

"The staff accept her for who she is."

We found that there the service has a small team of very experienced staff who carry out support and care.

We thought that it was good practice that the keyworker will phone service users and relatives in advance of a respite admission to check if there have been any changes to their care and support needs or if the individual's preferences have changed.

The service has used an informal "meet and greet" system involving service users with the recruitment of new staff.

### **Areas for improvement**

The service is proposing to involve the focus group with a future training session with staff. We would like to see this followed through.

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

**Number of requirements:** 0

**Number of recommendations:** 0

### **Statement 3**

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

#### **Service strengths**

Our examination of records, discussion with service users, relatives, staff and the manager supported that the service performs at a very good level in this quality statement.

We sampled minutes of team meetings. We thought that it was good that feedback from carers and care managers was given to staff.

We thought that it was good that the Manager uses development meetings to discuss practice issues with staff.

We noted at the point of inspection 92% of staff working within the respite service had obtained recognised SVQ qualifications.

Through interviewing staff it was shared that staff morale has recently improved. It was communicated that they acknowledge that there has been improvements including working more cohesively as a team. We found that staff were very client focused and motivated to meet the needs of service users who come into respite.

Staff interviews revealed that staff were of the opinion that there are good training opportunities. These include "core" training and tailor made training. At the point of the inspection a training session was arranged with a Speech and Language Therapist.

Staff communicated that they found supervision sessions to be a positive experience and assisted with identifying development needs.

#### **Areas for improvement**

We checked and found that there are planned dates throughout the year for team meetings. However, we discovered a number of these did not occur. We would like to see these being carried out as planned. This should assist with creating a consistency of approach and make clear expectations of staff.

We saw that there was a training matrix in place. We found that there was some information in relation to non core training offered to staff. We think the service could improve records to reveal what measures have been taken to access non core training for staff e.g. who will be approached to provide the training, when and timescales for completion.

We noted that there has been slow progress in implementing the new appraisal

system with staff. However, there are now dates in place for this to be carried out with each staff member. We would like to see this fully implemented.

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

**Number of requirements:** 0

**Number of recommendations:** 0



## **Quality Theme 4: Quality of Management and Leadership**

Grade awarded for this theme: 5 - Very Good

### **Statement 1**

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

#### **Service strengths**

Our examination of records, discussion with service users, relatives, staff and the manager supported that the service performs at a very good level in this quality statement.

See comments under strengths in quality statements 1.1, 2.1. and 3.1.

We saw that the Manager was directly involved with responding to questions and findings from the piece of work carried out by Your Voice.

Through checking records and carrying out interviews we found that the manager was directly involved in assessments prior to admission to the respite unit, review meetings and there was supporting evidence that she communicates with relatives post admission.

We received a number of positive comments from a service user and relatives in connection with the accessibility and responsiveness of the manager; -

"I met the manager before coming in here. She wrote up notes about my needs."

"The manager always makes a point of coming out to see me when I visit the unit."

"The Manager visited our house before my mum went into respite. I felt relevant details were taken. This meant the care was delivered as she would have expected."

#### **Areas for improvement**

See area of improvement in quality statement 1.1.

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

**Number of requirements:** 0

**Number of recommendations:** 0

### **Statement 4**

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

#### **Service strengths**

Our examination of records, discussion with service users, relatives, staff and the manager supported that the service performs at a very good level in this quality statement.

We saw that the Respite Service had been awarded Pride of Inverclyde 2011 award within the Health Care and Community section. This was a result of nominations made by service users and carers for their outstanding work.

The Manager carries out quality sampling audits on a quarterly basis. We noted that these are used to identify areas that require improvement within records and details action plans.

We noted that the Manager is proactive in dealing with the few complaints that have been made against the service. We noted that these are used to identify remedial actions and improve performance.

The end of respite reports are also used to make any improvements to the service.

The organisation has produced a Performance report based upon feedback from service users and relatives over the course of 1 year (September 11 - September 12). We checked the content of this and thought that this offered valuable feedback from 45 people who had used the service. Feedback reflected within the report was highly complimentary of the service. We would like to see the findings shared with those who participated.

Information obtained from interviews with service users and relatives supported that the manager is responsive to any concerns or queries made.

#### **Areas for improvement**

See recommendations made in quality statement 2.2.

See comments made in connection with staff meetings and staff appraisals in quality statement 3.3.

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

**Number of requirements:** 0

**Number of recommendations:** 0

## 4 Other information

### **Complaints**

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

### **Enforcements**

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

### **Additional Information**

No additional information recorded.

### **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

<b>Quality of Care and Support - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
<b>Quality of Environment - 4 - Good</b>	
Statement 1	5 - Very Good
Statement 2	4 - Good
<b>Quality of Staffing - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
<b>Quality of Management and Leadership - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 4	5 - Very Good

## 6 Inspection and grading history

Date	Type	Gradings
7 Jan 2011	Unannounced	Care and support 5 - Very Good Environment Not Assessed Staffing Not Assessed Management and Leadership Not Assessed
14 Jul 2010	Announced	Care and support 5 - Very Good Environment Not Assessed Staffing 5 - Very Good Management and Leadership Not Assessed
25 Mar 2010	Unannounced	Care and support 5 - Very Good Environment Not Assessed Staffing 5 - Very Good Management and Leadership Not Assessed

## Inspection report continued

3 Sep 2009	Announced	<table style="width: 100%; border: none;"> <tr> <td style="width: 70%;">Care and support</td> <td style="text-align: right;">5 - Very Good</td> </tr> <tr> <td>Environment</td> <td style="text-align: right;">4 - Good</td> </tr> <tr> <td>Staffing</td> <td style="text-align: right;">4 - Good</td> </tr> <tr> <td>Management and Leadership</td> <td style="text-align: right;">4 - Good</td> </tr> </table>	Care and support	5 - Very Good	Environment	4 - Good	Staffing	4 - Good	Management and Leadership	4 - Good
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Staffing	4 - Good									
Management and Leadership	4 - Good									
27 Oct 2008	Announced	<table style="width: 100%; border: none;"> <tr> <td style="width: 70%;">Care and support</td> <td style="text-align: right;">4 - Good</td> </tr> <tr> <td>Environment</td> <td style="text-align: right;">4 - Good</td> </tr> <tr> <td>Staffing</td> <td style="text-align: right;">4 - Good</td> </tr> <tr> <td>Management and Leadership</td> <td style="text-align: right;">4 - Good</td> </tr> </table>	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 ہبایتسد می ہونابز رگیدی روا ہولکش رگیدی رپ شرازگ تعاشا ہی

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

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