
Report To: Community Health & Care Partnership Sub Committee **Date:** 27 February 2014

Report By: Brian Moore
Corporate Director
Inverclyde Community Health & Care Partnership **Report No:**

Contact Officer: Beth Culshaw
Head of Health & Community Care **Contact No:** 01475 715387

Subject: INSPECTION OF THE RESPITE UNIT, HILLEND CENTRE

1.0 PURPOSE

- 1.1 To advise members of the outcome of the inspection conducted by the Care Inspectorate in relation to the Respite Unit at the Hillend Centre.

2.0 SUMMARY

- 2.1 The Care Inspectorate carried out an unannounced inspection of the Respite Unit at Hillend on 9 December 2013.
- 2.2 The grades achieved continue to demonstrate the sustained improvement achieved by the service in recent years.

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

3.0 RECOMMENDATIONS

- 3.1 That the Sub-Committee note the outcome of the Inspection.

Brian Moore
Corporate Director
Inverclyde Community Health & Care
Partnership

4.0 BACKGROUND

- 4.1 Inverclyde Council's Respite Unit is registered to provide a short break and respite service to a maximum of 3 people (at any one time) with a physical disability, a learning disability or mental health problem. A respite service is also provided to carers and relations in the community. The service also provides support to clients outwith the Hillend Centre. For example, staff will support someone in their own home providing a break for their main carer.
- 4.2 The Respite Unit sits within the Hillend Centre in Greenock. There are currently 3 single bedrooms each with full en-suite facilities, with plans to extend to a 4th bedroom in the coming months. Those on respite can spend time in their bedrooms or the Unit's sitting/dining room and conservatory. Residents have access to a large, well maintained, secure garden.
- 4.3 The inspection resulted in no recommendations or requirements for the service, within the three recommendations from the previous inspection in November 2012 outlined below all recommendations are now met.

- First recommendation:

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.

- Second recommendation:

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.

- Third recommendation:

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.

- 4.4 Throughout the Inspection Report, there are a number of comments in relation to the staff and culture of the unit, coming together to reflect an overall very positive insight into the service provided at Hillend. Several examples of these are outlined below.

Within the Quality Theme, Care and Support, it is noted that people on respite and their relatives said that the manager has an "open door policy", that staff are approachable and always make time to talk and listen to their comments or concerns. Families said this put them at ease when a relative was on respite.

The Respite Unit uses the key worker system. Key workers keep in touch with families, make sure support files and plans are up to date and that respite periods are enjoyable and meaningful.

- 4.5 Additionally, it is noted that support plans show that the service has good relationships with the social services and GP practice. There were good examples of professional co-operation. Staff will contact GP's if they have any questions regarding a client's health or medication. During the inspection we saw that staff were friendly and respectful. In conversation it was obvious they worked well as a team and displaying a positive attitude.

Building upon this, within the Quality Theme, Staffing, it is highlighted that staff said that the manager encourages a transparent and open culture. Staff said they feel comfortable discussing areas of their and colleagues' practice.

5.0 PROPOSALS

5.1 The Inspection highlighted no further requirements or recommendations.

6.0 IMPLICATIONS

Finance

6.1 No financial implications.

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (if Applicable)	Other Comments
N/A					

Legal

6.2 No specific Legal implications.

Human Resources

6.3 No specific Human Resource implications.

Equalities

6.4 No specific Equalities implications.

Repopulation

6.5 No specific repopulation implications.

7.0 CONSULTATIONS

7.1 No specific consultation required.

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: Colin Goldie

Type of inspection: Unannounced

Inspection completed on: 9 December 2013



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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:

Colin Goldie

Telephone 0141 843 6840

Email enquiries@careinspectorate.com

Summary

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

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

We gave the service these grades

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

What the service does well

We found that the manager and staff were experienced and familiar with the likes, dislikes and support needs of people receiving respite. We decided this after reading support files and talking to the manager, staff, relatives and people on respite.

Respite can be provided in the three bedroom Respite Unit or for a few hours in someone's home. This allows families and carers time to relax and have a break from caring.

The service is very good at finding out people's views and opinions. One way it does this is by using the Your Voice Forum.

When we talked to people using the service they said that they were very happy with the support provided.

People are encouraged to choose what they do when receiving support, for example activities, gardening, socialising, trips out and meals.

We found the service and staff to be warm, welcoming and homely. The service was seen to be very responsive to people's changing needs and wishes.

What the service could do better

The manager should consider how those on respite and their relatives can be involved in completing the service's self assessment.

What the service has done since the last inspection

There were three recommendations arising from the last inspection. These have been met.

Please read the report for details.

Conclusion

Everyone spoken with during the inspection was very committed to making sure that the Respite Unit meets people's expectations and needs.

When speaking with staff and observing their practice it was evident that they work hard to make people's respite break enjoyable and meaningful.

We saw that people on respite were confident about exercising choice, and that they were provided with individualised care and support.

Who did this inspection

Colin Goldie

1 About the service we inspected

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

This care service was previously registered with the care commission and transferred its registration to the care inspectorate on to 1 April 2011.

Requirements and Recommendations

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

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.

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

Inverclyde Council's Respite Unit is registered to provide a short break and respite service to a maximum of 3 people (at any one time) with physical disability, a learning disability or mental health problem. A respite service is also provided to carers and relatives in the community. This service provides support to clients outwith the Hillend Centre. For example staff will support someone in their own home, providing a break for their main carer.

The Respite Unit sits within the Hillend Centre in Greenock. There are three single bedrooms, each with full ensuite facilities. Those on respite can spend time in their bedroom or the units sitting/dining room and conservatory. Residents have access to a large, well maintained, secure garden. One of the residents takes great pride in this areas upkeep.

The service aims to -

- provide an efficient and effective service that lets service users remain as independent as possible while promoting a high standard of care

- 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 5 - Very Good

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - Grade 5 - Very Good

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

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

This report was written by Colin Goldie (Inspector) following an unannounced inspection on Monday 9 December 2013.

During this inspection information was gathered from a number of sources:

We spoke at length with:

The manager, key workers and clients.

We looked at:

Support files.

Review minutes.

Risk assessments.

Daily notes.

Quality assurance questionnaires.

Your Voice audit and recommendations.

The service's action plan.

Maintenance and safety checks.

Supervision records.

Training records.

Training diary.

Staff meeting minutes.

Returned staff and clients/family questionnaires.

Registration Certificate.

Private and public areas of the service.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality

themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

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

There were three recommendations in the last inspection report;

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.

We saw that the manager had addressed this issue. HSE guidelines were in place and in use.

The recommendation is met.

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.

There were no areas of concern regarding cleanliness during the inspection. We were informed that domestic services are available Monday to Friday with respite staff having responsibility at the weekend.

This recommendation is met.

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.

Signatures had been obtained.

This recommendation is met.

The annual return

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

Annual Return Received: Yes - Electronic

Comments on Self Assessment

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

We received a fully completed self assessment from the manager.

We were satisfied with the way this had been completed and with the information provided.

Taking the views of people using the care service into account

Care standard questionnaires returned by clients and relatives noted a high level of satisfaction with the service:

"Could not ask for better bedrooms."

"First class all round service and support."

"My daughter loves her stay in the service."

"I am very happy with the service."

"Excellent and clean environment."

"First class."

People spoken with said they are happy with the service:

"Very happy."

"I wish I could stay here."

"It's good."

People were seen to be at ease with staff, interactions were respectful and supportive.

Taking carers' views into account

Care standard questionnaires returned by relatives commented positively. See above for comments.

One questionnaire raised an issue concerning resources available in the service. This

was discussed with the manager who explained the reason and solution to this matter.

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

At this inspection we found that the performance of the service was very good for this statement. We found that the service consulted and encouraged participation on a day-to-day basis very effectively. We spoke with the manager, staff, relatives and people on respite. We read support files, review minutes, meeting minutes and the service's satisfaction questionnaires and subsequent audit/action plan.

Everyone spoken with said that the Respite Unit could only develop if the views and suggestions of people receiving support and families are sought and acted on.

We saw that people on respite had a relaxed and comfortable relationship with staff. The latter promoted a respectful and attentive atmosphere. By doing this staff show that they are listening to people, making them feel relaxed and "at home."

The service's welcome pack provided a range of information including the range of support and care provided and how to complain. Those using the service had been involved in developing this pack.

When we spoke with people on respite they said that they were always asked for their opinions and felt involved in their support. They said that staff were quick to act on their requests. When people arrive for a respite break they talk to staff and plan activities.

The service's participation policy encourages people on respite and relatives to take part in decisions about their support and the service. It describes the ways in which information is shared and consultation carried out, for example: holding a Your Voice

forum, satisfaction surveys, pre respite contact, reviews and 1:1 meetings with their key worker. Reviews and 1:1 meetings are used to discuss the service and check that people are happy with their support.

In 2013 the service asked Your Voice to ask people using the service (those attending and relatives/carers) for their ideas and opinions. Your Voice produced a report which covered a number of areas including: quality of staffing, management and leadership, areas of improvement, communication, activities and compatibility. When we read this we saw that areas and strength were identified and recommendations made on how the service could improve. An action plan is written to address areas the latter. The results being made available to clients and relatives. By doing this people are given information about the service, its strengths and areas of development.

Those on respite and their relatives said that they knew about the service's complaints procedure and that they would use it if needed. People said that any concerns they had raised were attended to quickly and resolved to their satisfaction.

People on respite are fully involved in developing their support file. By doing this staff are reminded that the service is geared round the needs of those on respite not the organisation. On reading support files we saw that these follow a standard format, focused on the needs and wishes of the person on respite, well laid out and easy to understand. This made sure that staff were consistent in their support and approach.

Support plans are reviewed at the end of each respite period. This helps people to reflect on their stay. Staff also contact families to tell them what their relative has done during their break.

People on respite and their relatives said that the manager has an "open door policy", that staff are approachable and always make time to talk and listen to their comments or concerns. Families said this puts them at ease when a relative was on respite.

The Respite Unit uses the key worker system. Key workers keep in touch with families, makes sure support files and plans are up to date and that respite periods are enjoyable and meaningful.

Areas for improvement

To continue to build on very good practice.

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

At this inspection we found that the performance of the service was very good for this statement. We decided this after speaking to people on respite, relatives and staff. We also read support plans, risk assessments and review minutes. This showed us that the Respite Unit supported people's health and well-being very effectively.

The Respite Unit works to policies and procedures issued by Inverclyde's Community Health and Care Partnership (CHCP) addressing residents' health and wellbeing needs. These include medication, food hygiene, infection control, whistle blowing and protection of vulnerable adults. When talking to staff we found that they had a very good knowledge of these and could explain how they worked. We saw evidence of this by talking to people on respite and reading support plans.

Staff receive a range of training appropriate to individual's support needs such as induction, adult protection, epilepsy, medication and Scottish Vocational Qualifications in Social Care (levels 3 and 4). Staff said that training is provided if a client has a support need that they have not previously had to address.

We found that the service has an experienced and knowledgeable staff team. By talking to staff, observing practice and reading support plans we saw that staff work to support, maintain and improve people's health and wellbeing. Staff do this by supporting/reminding people to take their medication, keep active, eat well and be involved in things they like to do such as working in the garden. People are encouraged to socialise and one to one or group activities are organised. A number of client's are supported to attend the Hillend Centre.

Freshly cooked meals are provided from the Hillend Centre.

When we read support plans we saw they were clearly written, easy to follow and contained a range of information about the individual's daily routines and health needs. These include a medication consent form, activities record, record of care, pre-admission information and risk assessments. The latter are well documented and updated before each respite break. Plans were very person centred, showing that the individual is fully involved and consulted. By doing this the service encourages people to be in control of their respite break. It also reminds staff that the service is designed around the person on respite not the organisation. We saw that there was a strong focus on positive outcomes for the person concerned, such as planning activities, meeting friends and outings.

When someone is coming in for a respite break their keyworker will phone them and their relative in advance to check if there have been any changes to their medication and care needs or preferences.

Support plans show that the service has good relationships with the social services and GP practice. There were good example of professional cooperation. Staff will contact GPs if they have ant questions regarding a clients health or medication.

During the inspection we saw that staff were friendly and respectful. In conversation it was obvious they worked well as a team and displaying a positive attitude.

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 potential risk.

Areas for improvement

To continue to develop practice and keep up to date with developments in the field of respite.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 5 - Very Good

Statement 1

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

Service strengths

The service was found to be operating at a very good level for this Quality Statement.

We saw that relatives and those on respite had the opportunity participate in assessing and improving the quality of the environment within the service.

See service strengths at Quality Statement 1.1 of this report.

Areas for improvement

See service strengths at Quality Statement 1.1 of this report.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

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

Service strengths

At this inspection we found that the performance of the service was very good for this statement. We spoke with people on respite, relatives and staff. We looked round the unit and read the: maintenance book, accident/incident records, registration certificate and risk assessments. The later covered a range of matters addressing both the environment and person on respite.

People we spoke with during the inspection said that were happy being at respite.

The Respite Unit is on one level and fully accessible, with wide corridors and specialised bathing equipment. There are a range of private and public areas including a large TV/dining room, conservatory and garden. All areas of the unit were clean, well maintained, comfortably furnished and personalised.

Bedrooms were well furnished, personalised, clean and homely. People can bring in personal possessions to make them feel at home. To help people keep their independence and dignity a number of bedrooms have built in aids, such as specialised beds. Moving and Handling equipment such as hoists and baths were clean and well maintained. Bedrooms are fitted with a call system that can be used to call for assistance.

Bedrooms have a lockable cabinet to store medication. This can be used by either staff or, if appropriate, the person on respite.

When we observed staff practice we saw that they were respectful of resident's confidentiality, individuality and privacy. They were seen to knock on bedroom doors and wait to be asked before entering.

Support plans note what staff must do to keep people safe and well. When a risk assessment is needed these are reviewed before and after each respite period.

The Respite Unit has policies to make sure that the safety of the service is maintained, for example records are kept of daily and weekly checks. These included fire, fridge, medication and cooking temperatures. Personal protective equipment, such as disposable gloves and aprons, were available.

Accidents and incidents are recorded. This included any remedial action taken to address any concerns raised as a result of an accident or incident.

The Respite Unit has a secure entry system and visitors are asked to sign in and out of the service.

Areas for improvement

To continue to build on very good practice.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 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

The service was found to be operating at a very good level for this Quality Statement.

People using the service are, as far as practical, involved in staff recruitment.

See service strengths at Quality Statement 1.1 of this report.

Areas for improvement

See service strengths at Quality Statement 1.1 of this report.

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

At this inspection we found that the performance of the service was very good for this statement. We saw that Inverclyde CHCP and the manager makes sure that staff are professional, trained and motivated. We spoke at length with people on respite, relatives and staff. We observed staff practice.

We found that there was a consistent and experienced staff team. Staff had worked for Inverclyde CHCP (previously Social Work) and the Respite Unit for a number of years. This had provided them with a range of experience and a sound knowledge base. The outcome of this was that people on respite had the advantage of being supported by staff who knew them well.

In conversation staff spoke with respect and consideration of people, had a clear understanding of the unit's aims and objectives. They said that the Respite Unit had a transparent, supportive and open culture. The benefits of this for those on respite is that staff feel confident raising issues of practice.

When we spoke with people on respite and relatives they said that they feel secure speaking to staff if they have any concerns.

Staff receive a wide range of training such as induction, protection of vulnerable adults, food hygiene, first aid, medication and Scottish Vocational and Scottish Vocational Qualifications in Social Care (levels 3 and 4). The benefits of this training is that staff have the skills to meet people's needs. Staff spoke highly of the organisation's training programme. Induction training informs staff of the Council's and the service's expectations and their role in promoting and maintaining individual's dignity, independence and wellbeing.

To make sure that staff continue to maintain good practice they have regular supervision sessions. At these a range of areas are discussed such as people's support needs and staff practice. A supervision and appraisal programme for 2013 was in place. Records showed that target dates had, by and large, been met.

Staff confirmed that supervision sessions take place regularly. By doing this the service can assure those on respite and families that any issues with staff practice are addressed and their work quality maintained.

Staff are encouraged to identify their own training needs and to develop their professional skills and expertise.

Staff attend team meetings and development days. Meeting minutes showed that a range of matters are discussed such as support needs, staff practice and service developments. Minutes evidenced issues and actions taken to address any points raised by staff.

Staff said that the manager encourages a transparent and open culture. Staff said they feel comfortable discussing areas of their and colleagues' practice.

Areas for improvement

To look at ways that those on respite can be involved in staff supervision and appraisal.

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

At this inspection we found that the performance of the service was very good for this statement.

We saw that those people on respite and families play a key part in helping the service to develop.

The manager responds to questions and findings from Your Voice forums and questionnaires.

See Quality Statement 1.1 for further evidence of service strengths.

Areas for improvement

See Quality Statement 1.1 for further evidence of service strengths.

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

At this inspection we found that the performance of the service was very good for this statement. We talked to the manager, staff, people on respite and relatives. We looked at a range of quality assurance paperwork. We found that people on respite are always asked for their views and opinions, with their comments being listened to.

The manager outlined how she and the CHCP monitors and evaluate performance by meeting with people on respite, using satisfaction questionnaires, completing a management report and having external audits (Your Voice).

As noted elsewhere in the report the service has a complaints policy. We found that people were aware of the right to complain. People said that any issues they have raised had been resolved to their satisfaction. This shows that the service listens to and acts on people's comments and suggestions.

The manager submits annual returns, self evaluations, notifications and action plans as expected.

Areas for improvement

To continue to build on very good practice.

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

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 the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

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

6 Inspection and grading history

Date	Type	Gradings	
27 Nov 2012	Unannounced	Care and support	5 - Very Good
		Environment	4 - Good
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good
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

Inspection report continued

25 Mar 2010	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 5 - Very Good Not Assessed
3 Sep 2009	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 4 - Good 4 - Good 4 - Good
26 Feb 2009	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good 4 - Good
27 Oct 2008	Announced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good 4 - Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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Translations and alternative formats

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

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

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ہے-بایتسرد میم وونابز رگی دی روا ولکش رگی دی رپ شرازگ تعاشا ہی

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