

Care service inspection report

Time 2 Help Ltd

Support Service Care at Home

Blueton Stables

Braco

Dunblane

FK15 0NA

Type of inspection: Announced (Short Notice)

Inspection completed on: 27 January 2015



HAPPY TO TRANSLATE

Contents

	Page No
Summary	3
1 About the service we inspected	5
2 How we inspected this service	7
3 The inspection	15
4 Other information	26
5 Summary of grades	27
6 Inspection and grading history	27

Service provided by:

Time 2 Help Ltd

Service provider number:

SP2012011815

Care service number:

CS2012307932

If you wish to contact the Care Inspectorate about this inspection report, please call us on 0345 600 9527 or email us at 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 Staffing	4	Good
Quality of Management and Leadership	4	Good

What the service does well

The service ensured service users' health and wellbeing were met with very high quality outcomes for them. We were impressed by the service's personalised approach to service users' care and wishes. The manager worked closely with all staff to offer support and guidance. The service routinely consulted service users and staff about the quality of the service and improvements to be made and responded to service users' changing needs or wishes.

What the service could do better

The service should;

- use its staff supervision system
- provide formal training on assistance with medication, protecting vulnerable adults and moving and handling training
- write an annual development plan
- ensure staff delete anonymised messages about service users.

What the service has done since the last inspection

The service had met five requirements and three recommendations from the last inspection. The service needed to take action on two recommendations.

Conclusion

Service users and relatives had a very high level of satisfaction with the quality of the service.

1 About the service we inspected

Time 2 Help Ltd is registered since 12 July 2012 to provide a support service - care at home. The service is provided by Time 2 Help Ltd, a company.

The service users are primarily older people, but other adults can also be supported. At the time of the inspection the service was supporting seven service users.

The service is provided in the Stirling Council area and western Perthshire by the manager, two senior support workers and six support staff.

The service aims state: "Time 2 Help Ltd is a best in class personal support service with a strong identity providing support 365 days of the year. Our aim is to have totally satisfied clients that will help spread the word in the circle of their lives."

Requirements and recommendations

If we are concerned about some aspects of a service, or think it could do more to improve, 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. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.

* A requirement is a statement, which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 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 Care Inspectorate.

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

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 Staffing - Grade 4 - Good

Quality of Management and Leadership - Grade 4 - Good

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

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0345 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 high intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

What we did during the inspection

This was a short notice inspection by an inspector, with notice so that arrangements could be made to visit service users at home. The inspection took place on 26 and 27 January 2015. The manager and director of the provider were told the results of the inspection in a meeting on 27 January.

Before the inspection the provider had submitted an annual return and self assessment as requested by us.

During this inspection we gathered evidence from various sources, including;

- discussion with the manager,
- discussion with one staff member,
- visits to two service users' homes,
- discussion by a relative in person,
- examining two service users' care plans,
- examining the services' records of staff induction, supervision meetings and training,
- accident and incident records.

We sent out ten questionnaires service users and five were completed and returned to us.

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 requirements we made at our last inspection

The requirement

The provider must review service users' personal plans in consultation with them and their representatives at least once in every six month period.

This is in order to comply with SSI 2010/210, regulation 5(2)(b)(iii). This is a requirement for providers to review the personal plan service users' personal plans in consultation with them and their representatives at least once in every six month period. Timescale for completion. Within six months of the receipt of this report.

What the service did to meet the requirement

The service was routinely holding six monthly reviews of service users' personal plans.

The requirement is: Met - Within Timescales

The requirement

The provider must ensure staff prepare thickened drinks according to the description of the consistency set out by the prescribing healthcare professional, and that this advice is recorded in the service users' personal plans so that staff can prepare the drink as expected and safely.

This is in order to comply with SSI 2010/210, regulation 5(2)(b)(ii). This is a requirement for providers to review the personal plan when there is a significant change in a service user's health, welfare or safety needs. Timescale for completion. Within one day of the receipt of this report.

What the service did to meet the requirement

The service had prepared written detailed instructions for staff to follow to ensure a service user's drinks and soft foods were prepared to a safe, suitable consistency.

The requirement is: Met - Within Timescales

The requirement

The provider must ensure that all service users' personal plans are written with a detailed and comprehensive account of service users' needs and wishes, and how staff are to meet these for consistency and safety.

This is in order to comply with SSI 210/2011, regulation 5(1). This is a requirement for providers prepare a written plan which sets out how service users' health, welfare and safety needs are to be met. Timescale for implementation: Within four weeks of receiving this report.

What the service did to meet the requirement

The service had revised service users' personal plans to provide a detailed and comprehensive account of how their needs and wishes will be met.

The requirement is: Met - Within Timescales

The requirement

The provider must ensure that it reports concerns about the welfare of service users to the council responsible for their welfare, as good practice, and as part of its adult support and protection procedures.

This is in order to comply with SSI 2010/2010, Regulation 4(1)(a). This is a requirement for providers to make proper provision for the health, welfare and safety of service users. Timescale for completion: Within one day of the receipt of this report.

What the service did to meet the requirement

The service had identified potential risks for service users where they did not have capacity to make decisions for themselves. The service had acted on its concerns and contacted the councils responsible for service users' welfare about these concerns.

The requirement is: Met - Within Timescales

The requirement

The provider must notify the Care Inspectorate when it has reported concerns about the welfare of service users using its adult support and protection procedures.

This is in order to comply The Social Care and Social Work Improvement Scotland (Registration) Regulations 2011 (SSI 28/2011) regulation 4(1)(b). This is a requirement for providers to make notifications to the Care Inspectorate as required by the Care Inspectorate. Timescale for implementation: Within one day of receiving this report.

What the service did to meet the requirement

The service had notified the Care Inspectorate when it has reported concerns about the welfare of service users using its adult support and protection procedures.

The requirement is: Met - Within Timescales

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

Quality of Care and Support, Statement 1, Recommendation 1.

The provider should record the views of service users and relatives in reviews and show how these had influenced how the service is provided.

National Care Standards, Care at home, Standard 3, Your personal plan.

There were records of the discussions the service had with service users and relatives about their needs and wishes and how the service had been changed in response to these.

Quality of Staffing, Statement 3, Recommendation 1.

As part of safer recruitment practice the service should include space for referees to sign and date the reference form. National Care Standard, Care at home, Standard 4, Management and staffing.

Referees now had a space to sign and date their references.

Quality of Staffing, Statement 3, Recommendation 2.

As part good practice in supporting staff development and monitoring staff performance, the service should adhere to its system of reviewing staff progress and following up on actions plans made at the previous review. National Care Standard, Care at home, Standard 4, Management and staffing

The service was not consistently using supervision meetings with staff at the end of their induction period to formally record their progress, performance and learning plans. See the revised recommendation in Quality of Staffing, Statement 3.

Quality of Staffing, Statement 3, Recommendation 3.

As part of good practice in recording staff development and monitoring staff performance during the induction period the service should retain sufficient evidence that staff had met the services' expectations.

National Care Standard, Care at home, Standard 4, Management and staffing.

The service was not consistently using supervision meetings with staff every six months thereafter to formally record their progress, performance and learning plans. See the revised recommendation in Quality of Staffing, Statement 3.

Quality of Management and leadership, Statement 4, Recommendation 1.

The provider should provide a confidential, written system for maintaining a record of staff observation of changes to service user's needs or any concerns, and actions taken by the service as a result.

National Care Standard, Care at home, Standard 4, Management and staffing.

Staff write a detailed record of the care provided and their observations of service users' welfare after each visit. The record is kept in service users' homes for staff and the manager to consult.

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 an appropriately completed self assessment in which the service set out its strengths and areas for improvement.

Taking the views of people using the care service into account

We met two service users in person during the inspection. Their comments included.

"The staff are lovely. I couldn't manage without them. They help me with my personal care. They sit and talk to me and take me for walks. They're helping me get a hospital bed and other equipment to help me get up and about . This service helps me stay at home where I want to be."

When we met with a service user with dementia they pointed to the carer and told us: "She's my best one."

We received five questionnaires from service users and relatives. All service users and relatives who responded said they were overall happy or very happy with the quality of the service. Most of the responses were that people were very satisfied with all aspects of the service.

- Staff treat service users with respect.
- Service users have a personal plan which contains information about support needs.
- Service users are confident the staff have the skills to provide support.
- Service users know the names of the staff who provide care.
- Service users' needs and preferences have been detailed in the personal plan.
- The service checks with service users that they are meeting needs.
- Staff have enough time to carry out the agreed care.
- The service asked for service user's opinion about it could improve.

One service user made a comment in the questionnaires returned to us.

- "100% reliable. They make themselves available. As a result of their excellent care I am able to remain living in my own home."

Taking carers' views into account

We spoke to one relative in person. Their comments included:

- "The service is outstanding. They really care for mum. The dignity they give her though their care is fantastic. My mum likes talking to the older carers as she feel they can relate more to what she is going through. I like the detail they record about her in her care plan and their notes as it shows how much they know about her and try to get right all the time. They responds straight away whenever they see a need. I get daily update, sometimes several times a day on how my mother is doing. We get emotional support as a family it is a difficult time for relatives too, and this is reassuring."

Four relatives made comments in questionnaires returned to us.

- "The service is tailored and has the ability to adapt to meet the specific needs of a person with dementia. I trust and have confidence in both the care and carers to provide the highest level of care at all times. On many occasions this provider has gone the "extra mile". With their help mum looks good, feels good and is happy in their company."
- "Time 2 Help provided a male carer, who was an excellent match for my husband and readily took up my suggestions for activities they could do together. I found the service very helpful and supportive with any issues I encountered."
- "I am very pleased with the service provided for my mother. On occasion I have requested a change they have always responded quickly and positively. Communications with the agency are excellent and I receive regular reports on the visits made. Any concerns they have for my mothers' condition, or state of mind, are brought to my attention immediately, along with helpful advice on possible action required."
- "Time 2 Help go way beyond the call of duty. They were invaluable to my mother, sister and I. we cannot praise them highly enough. Nothing was too much trouble. A totally reliable and caring company."

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

We examined the service's practice and outcomes by examining their care records, questionnaires returned to the service and speaking to service users and a relative during the inspection.

The service was routinely holding six monthly reviews of service users' personal plans. There were records of the discussions the service had with service users and relatives about their needs and wishes and how the service had been changed in response to these.

The manager was formally reviewing service users' care plans every 28 days and updating the care plans, which is written on a computer, where they needed to be changed. Where changes to the care plan had occurred between these reviews these were handwritten onto the care plan. This is good practice.

The service has routinely used questionnaires to get written feedback of service users' and relatives' views of the quality of the service and how it was meeting their needs and wishes. Some of the comments we read in the questionnaires included;

- "The service was able to suggest ways to simplify life for my mum, such as de-cluttering her cupboard, using reminder notes and a dementia clock and calendar. My mum feels good about herself, as she is well dressed with her hair kept nice and wearing her jewellery. The service is reliable, friendly and consistent."
- "The care and personal attention and service for our relative is very reassuring. The care starts and finishes at the agreed time. Having one main carer allows a relationship and knowledge of routines to build which is critical for a person with dementia."
- "I get regular feedback. My mum is happy and well cared for and treated as an individual."

Service users and relatives told us they found the service responded quickly to changing needs and wishes. There was an example of the service agreeing with a service user and relatives to adjust the use of care hours to give more time for staff to sit and chat with the service user during some visits. During the winter the visit to settle a service user in bed was brought forward as the service user was showing by their actions that they wanted to go to bed as it was darker earlier.

Service users and relatives told us they felt consulted by the service about their needs and wishes for their service, and how well it was being provided. We saw the manager visit service users as part of providing their personal care and speaking to relatives in person or by phone and speaking directly with the service users. The manager visits each service user at least once a week, and several service users more often.

We were satisfied that the service systematically sought service users' and relatives' views about the quality of the service and improvements it could make, and responded to service users' changing needs or wishes.

Areas for improvement

When changes were made to the care plans as part of the 28 day review it is good practice to record who else was consulted about the change and what changes were made to the plan. The service was also advised to retain the previous versions of care plans as part of the record of service users' care over time.

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

We examined the service's practices and outcomes in this statement by speaking to service users and relatives, and examining the service's care records for two service users.

We found that the service provided continuity of staff who knew service users and their needs well, and that service users knew the staff who provided their care. Relatives told us how much they valued this and how much difference this made to the quality of the service. One relative's feedback was: "Having one main carer allows a relationship and knowledge of routines to build which is critical for a person with dementia."

Service users can be confident that the service will meet their care needs and personal preferences. We saw in our visits to two service users' homes how staff knew how service users wanted their care and routines met; such as when to prepare their drink, how to provide reassurance during care tasks and to have a general chat. Working consistently with service users meant that staff had insight into service users' changing needs over time, such as when they required more assistance. One relative commented; "I like the detail they record about her in her care plan and their notes as it shows how much they know about her and try to get right all the time." We saw the staff promote service users' independence, such as when a service user manoeuvred their wheelchair between their bedroom and bathroom as they could do this by themselves.

Service users can be confident that staff will look out for changes in their health and care needs. The service provided intensive support arrangements for some service users who were very frail or dependent. The service had helped the service user's relatives to arrange the furniture in a service user's home so that the layout and specialist equipment helped in their care. The service used its knowledge and experience to liaise very well with healthcare staff, such as the GP and visiting nurses, to assist service users and relatives to make enquiries about appropriate care and treatment for the service user as their needs increased over time.

The service developed personal plans that detail service users' needs and preferences and sets out how these will be met in a way service users find acceptable. The plans were very comprehensive and detailed about how staff were expected to meet service users' needs and preferences in a sequence during each visit. For example we saw how a service user with dementia was offered a choice of their meal, as set out in the plan, which the staff member then heated. The service had improved the content and structure of its care plans for service users. The plans were written in a personal centred approach about how the service users' need should be met safely and consistently and in accordance with service users' wishes. The care plans had heading to guide readers through the content of the plans. The care plans were now available in all service users' homes for them, their relatives and staff to consult at any time.

When the service had identified potential risks for service users where they did not have capacity to make decisions for themselves the service contacted the councils responsible for service users' welfare about these concerns. The service also proactively involved the service users' relatives in this process by telling them why the service was getting in touch with the council. The service made an appropriate, detailed records of its concerns and the actions it had taken and who it had informed of its concerns.

The service's practice ensure that service users' health and wellbeing needs are met results in very high quality outcomes for service users. We were overall impressed by the service's personalised approach to service users' care and wishes and how staff were trained to meet service users' needs.

Areas for improvement

The service could improve practice and outcomes by agreeing with service users and relatives the outcomes to be achieved at the beginning and over the course of a service and monitoring how these outcomes are being met through its reviews.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

Statement 1

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

Service strengths

The grade for this quality statement comes from the grade awarded for Quality of Care and Support, Statement 1.

Areas for improvement

The grade for this quality statement comes from the grade awarded for Quality of Care and Support, Statement 1.

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

To examine practice and outcomes in this statement we spoke to the manager and a staff member and examined the service's staffing records.

We found that the service ensured that new start staff were inducted into their role, through essential on-line courses, by reading and understanding the services' policies, shadowing more experienced staff, being supervised directly in care tasks by the manager, and being introduced to each service user and their needs in detail before they provided care to the service user. The service used an external training provider for on-line courses for staff to cover essential knowledge and good care practice, which included; basic food hygiene, infection control and moving and handling theory. The management monitored that staff had satisfactorily completed the courses.

The staff member we spoke to were very positive about the ethos of the service, where each service user's service was tailored according to their wishes and needs, and which gave staff time to get to know the service user. Staff read about service users' needs in their care plans before providing care needs and for the first visits they were accompanied by the manager and introduced to how to provide the care as expected by the service user and manager. The staff member also confirmed they had read the service's policies and had training courses and was supervised regularly by the manager during care visits.

The service had processes of staff supervision meetings, unannounced visits and staff meetings to promote good care practice by staff. The manager had formally monitored some staff member's performance and development of their skills through six monthly review meetings. The manager made unannounced visits to service user's homes while care was taking place to monitor that the service was being provided as agreed. There had been a staff meeting to promote consistent use of the service's policies and procedures, to reinforce expected practice and discuss how to better meet service users' needs and wishes.

The service had appointed a second senior support worker to better monitor quality of practice, ensuring service users' care records are kept up to date, and to support the manager and staff by providing out of hours advice to staff and service users. The newly appointed senior support worker had applied to register with the Scottish Social Services Council (SSSC) as a practitioner in a care at home service, which is a new requirement.

The manager is registered with the SSSC, and as a condition of registration has started an SVQ 4 in Care. The manager commented that they found the course materials and feedback from their tutor to help with reflection on their practice and how they could develop the service.

The service had good practice in this quality statement. The manager worked closely alongside all staff to offer support and guidance and is taking steps to promote team working, and to delegate responsibility for quality assurance to senior staff. The need to improve documentary evidence for induction and on-going staff supervision and to improve the training programme prevented a higher grade being awarded.

Areas for improvement

The service was not consistently using supervision meetings with staff at the end of their induction period and every six months thereafter to formally record their progress, performance and learning plans. Recommendation 1.

The service did not have formal training in induction, and at refresher intervals, for assisting service users with medication and protecting vulnerable adults. Moving and handling training for staff was by distance learning and by the manager and senior staff who though experienced in moving and handling are not accredited trainers. Recommendation 2.

To evidence and evaluate staff performance the manager could make written records of observations of staff practice with service users.

To encourage staff involvement in team meetings the service could discuss the application of specific care standards, codes of practice and good practice guidance in practice.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 2

Recommendations

1. The provider should support staff development and monitor staff performance and ensure actions have been taken by the provider and staff for improvements through the use of its staff supervision system. **National Care Standard, Care at home, Standard 4, Management and staffing.**
2. The service should provide staff with formal training at induction, and at suitable refresher intervals, on assisting service users with medication, protecting vulnerable adults and moving and handling training with an accredited trainer. **National Care Standard, Care at home, Standard 4, Management and staffing.**

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 4 - Good

Statement 1

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

Service strengths

The grade for this quality statement comes from the grade awarded for Quality of Care and Support, Statement 1.

Areas for improvement

The grade for this quality statement comes from the grade awarded for Quality of Care and Support, Statement 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

We examined the service's practice and outcomes in this statement by speaking to the manager and a staff member, examining the service's care records for service users and speaking to service users and relatives.

This is a small service, with about seven service users and ten staff, at the time of the inspection. The management of the service closely consulted service users and staff about the quality of the service and improvements to be made with the following practices;

- The manager had a close, personal oversight of the quality of service users' care by providing care herself to each service user once, or several times a week. The manager also carried out unannounced visits.
- Staff wrote detailed records of the care provided with their observations of service users' welfare during each visit. Other staff and the manager can read this to make themselves aware of service users' wellbeing since their last visit.
- The staff contacted the manager with an update about each service user after each visit. This meant the manager was immediately aware if there is a need for follow-up actions or a need to communicate any concerns to a service user's family.
- The manager provided updates to relatives about the outcomes of visits.
- Questionnaire surveys were used with service users and relatives to get feedback.
- The manager worked closely alongside all staff to offer support and guidance when working with each service user.
- The service had held a team meeting to promote consistent good practice and to involve staff in the development of the service.

Overall the service was very responsive to service users' and relatives' needs and views, and routinely sought feedback on the service was going for them, and it was promoting consistency of practice, and involving staff in improving the quality of the service.

Areas for improvement

To further improve the service's practices and outcomes for service users, relatives and staff it would develop an annual development plan setting out the goals to be achieved, and when and how they will be achieved. Recommendation 1.

Staff text or email the manager with details of visits to service users using service users' initials to ensure confidentiality, however as these messages are on staff's personal phones or computers the service should ensure these messages are routinely deleted. See Recommendation 2.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 2

Recommendations

1. The provider would develop an annual development plan setting out the goals to be achieved, and when and how they will be achieved. **National Care Standard, Care at home, Standard 4, Management and staffing.**
2. The provider should ensure that staff delete anonymised messages about service users from their phones or computers. **National Care Standard, Care at home, Standard 4, Management and staffing.**

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 noted.

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

6 Inspection and grading history

Date	Type	Gradings
14 Mar 2014	Announced (Short Notice)	Care and support 4 - Good Staffing 4 - Good Management and Leadership 3 - Adequate

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

To find out more about our inspections and inspection reports

Read our leaflet 'How we inspect'. You can download it from our website or ask us to send you a copy by telephoning us on 0345 600 9527.

This inspection report is published by the Care Inspectorate. You can get more copies of this report and others by downloading it from our website: www.careinspectorate.com or by telephoning 0345 600 9527.

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 iarrrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ہے بایتسرد می م وونابز رگی دی روا ولکش رگی دی رپ شرازگ تعاشا ہی

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

ی.رخأ تاغل بو تا قیسن تب بل طلا دن ع رفاو تم روشنم الا اذه

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.

Telephone: 0345 600 9527

Email: enquiries@careinspectorate.com

Web: www.careinspectorate.com