

Care service inspection report

Kincarrathie House

Care Home Service Adults

Pitcullen Crescent

Perth

PH2 7HX

Telephone: 01738 621828

Inspected by: Linda Weir

Type of inspection: Unannounced

Inspection completed on: 14 August 2013



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Service provided by:

Kincarrathie Trust

Service provider number:

SP2003002118

Care service number:

CS2003009760

Contact details for the inspector who inspected this service:

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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

All residents we spoke with spoke very highly of their staff team. They felt valued and told us that staff were always respectful to them.

What the service could do better

The service should ensure that the audit systems and environmental checks are robust enough to help staff identify areas required for improvement.

What the service has done since the last inspection

The service was in the middle of recruitment for a deputy manager. They had taken a different approach to recruitment by inviting six interested residents to meet themselves with candidates and feedback their views to the manager. We spoke with the residents involved who felt that this had been a valuable opportunity and felt their views were taken into account by the manager.

Conclusion

The service offers a very high quality service both in the care provided and the standard of environment and extensive and attractive tended grounds.

Who did this inspection

Linda Weir

1 About the service we inspected

Kincarrathie House is a care home for older people which has been registered since 2002. The service is run on a voluntary basis by Trustees of the Kincarrathie Trust.

Accommodation is offered within an extended detached Victorian House and comprises of 44 single rooms, 43 of which are en suite. There are also a number of sitting rooms, dining areas, sun rooms and a sun terrace. Many of the rooms have panoramic views over the grounds and beyond to Perth City.

The care home has extensive garden grounds which are accessible for wheelchairs. A walled garden is maintained within the grounds and provides fruit and vegetables to the care home.

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

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Requirements and recommendations

If we are concerned about some aspect 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 Regulations, Orders or Conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

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

We wrote this report following an unannounced inspection. This was carried out by Inspector Linda Weir. This inspection took place on 7 August between 10am and 4pm and on 12 August 2013 between 11am and 4pm. We gave feedback to the manager on 14 August 2013.

As part of the inspection, we took account of the completed annual return and self assessment forms that we asked the provider to complete and submit to us.

We sent thirty Care Standards Questionnaires to the manager to distribute to residents. Twenty two residents sent us completed questionnaires. We also sent fifteen to the manager to distribute to relatives and carers. Relatives and carers returned eleven completed questionnaires before the inspection.

We also asked the manager to give out ten questionnaires to staff and we received four completed questionnaires.

During this inspection process, we gathered evidence from various sources, including the following:

We spoke with:

- Ten residents
- Three relatives
- The manager
- Three senior care workers
- Three care workers
- Two visiting professionals (a GP and a District Nurse)

We looked at:

- the participation strategy (this is the service's plan for how they will involve service users')
- minutes of residents' meetings
- minutes of relatives' meetings
- newsletters
- residents' and relatives' questionnaires
- care plan audits
- care plans, accident and incident records
- the environment and equipment.

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

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 provider. We were satisfied with the way the provider completed this and with the relevant information included for each heading that we grade services under.

The provider identified what it thought the service did well, some areas for development and any changes it had planned. The provider told us how the people who used the care service had taken part in the self assessment.

Taking the views of people using the care service into account

For this inspection, we received views from 32 of the 43 people using the service. Twenty two people gave their views via the Care Standard Questionnaires and we spoke with a further ten people during the inspection process.

All said that they were either happy or very happy with the quality of the service.

Most people confirmed that they knew who to speak to if they had any problems. Five people in the returned questionnaires did not know about the services complaints policy and eight people were not aware of the Care Inspectorate's complaints system. (This information is available in several locations in the home. We have asked the manager to refresh this in meetings or newsletters with residents.)

Most said that they had a say in the running of the service and we have reported this under Quality Theme 1, Statement 1.

Residents' comments and references to our questionnaires are included throughout this report.

Taking carers' views into account

Feedback about the service consistently positive.

Eleven relatives returned completed Care Standard Questionnaires. We had the opportunity to speak with a further three relatives individually during our inspection.

Relatives' comments and references to our questionnaires are included throughout this report.

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

The service was able to evidence excellent opportunities for people who use the service to comment on the quality of care and support they receive.

These included:

A participation strategy which provided details of how people could choose to be involved in commenting on the service. An easy to read version of the strategy was displayed on noticeboards and included in the introductory pack for new residents.

Regular meetings took place for residents and relative separately. There was also a residents committee.

A suggestion made by residents at a recent meeting had been to get a speaker in to talk on the history of the Perth and Kincarrathie area. The Activity Organisers had contacted Perth Museum to make arrangements for this.

During the recent very hot weather residents had requested additional fans for the dining room at their meeting. Residents we spoke with told us that this had been arranged promptly.

The service provided an information pack which was given to prospective residents. This included information on the last inspection report, the aims of the service, resident and relative questionnaire results and information on how to raise a concern or complaint.

The last residents satisfaction survey carried out by the service in February 2013 was returned by 30 of the 40 residents. Overall, the majority of people found the care and support, environment, meals, staff and management to be either excellent or very good.

The results of the survey were fed back to residents and where additional comments were made, action taken to make improvements were included.

Similarly relatives were asked to complete a questionnaire, 30 responded and they also mostly found the service to be excellent or very good.

Comments from relatives included:

- 'My relative is happier than she has been in the last few years.'
- 'I cannot fault the wonderful way you treat and care for my relative. The staff are excellent and she is well looked after.'
- 'Five star, great package. Very much appreciated.'

Sixteen of the twenty two residents responding to the Care Inspectorate questionnaires either agreed or strongly agreed that the service asks for their opinions on how it could improve (others did not know).

Ten of the eleven relatives felt that their relative was able to feedback their views about the quality of the service, and the management of the service takes these seriously.

Quarterly seasonal newsletters were produced for residents. These included information on events taking place, the garden, staff and resident news. The manager had informed residents of a new Care Inspectorate guide for what residents can expect of everyday living in a care setting.

Residents we spoke with told us that they found the newsletter interesting.

When anything arose between meetings or newsletters the manager wrote a memo for noticeboards to keep residents updated. This has included feedback on fundraising at the recent garden party and the resurfacing of approach roads.

The service was in the process of recruiting for a deputy manager. On the day of inspection one candidate attended for an informal interview with six residents. The residents met with the candidate alone for half an hour where they asked questions they themselves decided.

At the end of this the manager met with the residents to seek their views. (The inspector sat in on this feedback by invitation). They openly discussed their views of

the strengths and weaknesses of all candidates. They agreed which candidates should be taken forward to formal interview by the manager and trustees.

The inspector then met with the six residents herself. They told us that they always felt that their views were taken into account and that their views for recruitment were valued by the manager.

Care plan records evidenced that residents and their relatives (where appropriate) were involved in agreeing their plans. Regular reviews took place every six months. This allowed further opportunities for people to comment on the quality of the service.

Areas for improvement

The service should continue to build on their current practices exploring ways to involve residents and their relatives in commenting on the service.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Statement 3

We ensure that service users' health and wellbeing needs are met.

Service strengths

The service was able to provide very good evidence in support of this statement.

We spoke with ten residents during this inspection. All we spoke with commented very favourably about the staff team, the care and support provided by them and how friendly they were.

We examined care plans of five residents. The plans held health assessments including risk of falls, nutrition and safe handling. Where a risk was identified a care plan had been implemented.

The care plans were written in a person-centred way that informed staff of residents' needs, likes, dislikes and preferences. Residents told us that staff supported them in their preferred ways.

For example, one resident we spoke with told us that they enjoyed a bath twice a week. They told us that they were always supported by the same staff member where possible and that she was supported to soak in the bath for up to an hour which she enjoyed.

Residents were registered with the GP of their choice and had regular access to other healthcare professionals as required.

We spoke briefly with a visiting District Nurse. She told us that the medical practice and the home had good relationships and that staff sought their assistance for residents appropriately.

The home had their own car which was used to support people to hospital or GP appointments (and for social activities). Staff supported residents to appointments or if admitted to hospital until a relative was available.

Residents were offered choices of drinks, and whilst the chef spoke with residents each morning about their meal choices for the day, these could be changed up to the point of service. Menu cards were on dining tables to remind residents of the meals available.

We found that lunch time was a very relaxed meal time with residents and staff chatting together. Residents told us that the meals were of a very high quality and that this was consistent. They enjoyed the variety of fruit provided.

The chef demonstrated a good understanding of the dietary needs and preferences of individual residents. He told us that some produce was sourced from the home's gardens.

There was a range of activities available. These took place at different times of day which made these more accessible to residents. During the inspection one group of residents were taking part in an exercise group.

The home had extensive gardens. In order for residents with limited mobility to access these home had two mobility scooters. The activity noticeboards invited residents to ask for driving lessons for the scooters to allow them to be as independent in the gardens as possible. (Staff also made time to assist residents to access the grounds if this was preferred).

Residents told us that they felt privileged to have such lovely tended gardens. Having access to the outdoors is very important to many people contributing to their health and wellbeing.

Relatives comments made through returned Care Service Questionnaires regarding the quality of care included:

'My father is now in hospital. It has been determined that his care needs are more involved than the care that can be provided for him at Kincarrathie. So he's moving to a nursing home. Throughout this process the management team and staff have been

supportive and very helpful to both my father and to me. I'll miss Kincarrathie House very much.'

'I do not think there can be many better care home than this. The staff are excellent, the accommodation first class, good food and lovely grounds'.

'We are all very happy and would find it hard to improve.'

'My mother has lived at Kincarrathie for almost a year, she is treated with respect by staff, her dignity and privacy is maintained at all times. Staff are polite, helpful to me. The manager runs a tight ship. There are a few outstanding staff. Kincarrathie has a great reputation and deserves it.'

'My mother has been taken to A & E twice since she has been there and each time the news has been broken to me/family sensitively and a member of staff has gone with mum and stayed until I got to the hospital. This was much appreciated.'

'Overall, exemplary care.'

Residents comments made in the returned questionnaires included:

'The care is first class.'

'Satisfactory. Quality of care is paramount.'

'I am satisfied with all the care I am given. The staff are very supportive and caring which is a great comfort.'

'Excellent/'

'I had six months experience of another care home. This is so much more open, friendly and clean environment. I just couldn't believe my luck from management to cleaning staff, handyman and gardeners. They are a friendly, polite bunch who enjoy a bit of banter.'

'The management and leadership shown here at Kincarrathie House are excellent.'

'The home certainly lives up to the high assessment from the last inspection and the management provide excellent outings and activities to entertain all its residents.'

'The quality is very high especially outside the home where, in the park land and gardens, we have paths to take walks or where there are scooters to ride and enjoy the sight of roe-deer, squirrels and varied colours of the plants'.

'We are very fortunate, with an excellent team of gardeners providing us with so

much from the gardens and vegetable garden.'

'I cannot speak too highly of all those provisions for our benefit and pleasure.'

'I can confirm that the home provides everything I need and I am happy to stay in such a well provided home.'

'Quality of care varies with individual carers - some better than others.'

'Opportunity is given through meetings to make suggestions or request answers to possible concerns.'

'Due to my wife living here with me (the only couple) we are able to enjoy the benefit of a sitting room and double bedroom, thus we were able to bring special items from our previous home.'

'The standard of care is generally very good. The staff in most cases are very helpful and supportive. Residents appreciate the high standard of the help provided. An example of the special attention given to my wife and self, we had a 70th Wedding Anniversary in February. The management provided a special day for us in which all the residents participated.'

Areas for improvement

We carried out a medication audit. Overall, the medication system appeared to be well-managed. We identified that where hand written entries were made these were not always double signed to verify the information on the prescription.

One resident was taking multivitamin tablets at the request of her family. We could find no supporting evidence of this or homely remedy policy being implemented. This should be kept in the current care plan for easy reference.

Where one resident had not had their medication (at one session) we found no information about why this had not been given on the MAR sheet.

(See Recommendation One)

Whilst the service had various quick reference ways of identifying if a resident wished to be resuscitated, not all Do Not Artificially Resuscitate (DNAR) forms were up to date. One had expired, another stated review in '3' it was not clear what time period this was. Another stated indefinitely.

(See Recommendation Two)

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 2

Recommendations

1. It is recommended that where homely remedies are used that the supporting documentation (agreements with GP) are kept with the current care plan to ensure that staff administering medication are able to refer to this promptly.

National Care Standards - Care Homes for Older People - Standard 15 Keeping Well - Medication.

2. It is recommended that all DNACPR forms are reviewed to ensure that these are within agreed timescales and that these are updated as necessary.

National Care Standards - Care Homes for Older People - Standard 6 Support Arrangements and Standard 19 Support and care in dying and death.

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

Please see Quality Theme 1, Statement 1 for areas of strength which are also relevant to this statement.

Areas for improvement

Please see Quality Theme 1, Statement 1 for areas for improvement which are also relevant to this statement.

Grade awarded for this statement: 6 - Excellent

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

The service was able to provide very good evidence in support of this statement.

We carried out an audit of recruitment practices. We found these to be satisfactory. In addition to standard practice the manager checks with SSSC for all staff registration status.

The service had individual resident risk assessments which were updated on a regular basis. These described risks and steps taken to reduce identified risks.

The environment was seen to be clean and free of odours. Domestic staff told us that there had been enough cleaning supplies and equipment to keep the home clean.

There were ample supplies of gloves and aprons for staff when supporting people with personal care. We saw that staff consistently demonstrated appropriate infection control procedures.

The main entrance door had a keypad for household security. The number was available for use by residents and their visitors.

The service employed a maintenance officer. There was a system in place for staff to report minor repairs. The maintenance officer co-ordinated outside contractors for larger work.

The service had received visits from both the fire and rescue and environmental health departments. Both were satisfied with standards maintained.

One resident commented in a returned care service questionnaire;

'All rooms here are single and private. The environment couldn't be better.'

Areas for improvement

The service identified that staff training was up to date and that staff had individual training folders. Whilst we found that staff had access to a range of training opportunities some training folders appeared not to have been kept fully up to date. We found some staff files where we could not find evidence that they had up to date manual handling refresher training. **(See Recommendation one in Quality Theme 3, Statement 3)**

We carried out a walk-through of the home. We noted that two water outlets that were accessible to residents had water that was very hot to the touch. One outlet had a thermostatic regulator which was adjusted by a plumber (who was called in during the inspection to attend this) and the other outlet which was in a pantry and required a higher temperature of water for dishwashing was signed during the inspection to be kept locked.

(See Recommendation one)

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. It is recommended that the provider reviews the frequency of environmental audits. This is to ensure that any faults are identified promptly and action taken to address.

National Care Standards - Care Homes for Older People - Standard 4 Your Environment.

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

Please see Quality Theme 1, Statement 1 for areas of strength which are also relevant to this statement.

Areas for improvement

Please see Quality Theme 1, Statement 1 for areas for improvement which are also relevant to this statement.

Grade awarded for this statement: 6 - Excellent

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

The service was able to provide very good evidence in support of this statement.

We saw that staff continued to have access to a range of training opportunities with a continuous programme of mandatory and additional training. This was provided both in-house and through external providers.

The service had supported approximately 95% of their care team to achieve the relevant level of SVQ for their post. Supervisors had undertaken mandatory supervisory units to meet the registration requirements of the SSSC.

We spoke with a member of staff who recently commenced in the service. They told us that they felt very well supported and had a senior staff member as a mentor. They had worked with them closely in their first few weeks in post.

Weekly senior team meetings were held with the manager to discuss the running of the home and resident support. Approximately every two months each supervisor held a care team meeting.

Minutes of these meetings were kept and signed by all staff to confirm that these had been read.

Regular supervision was held approximately every two months. We saw that these covered practice issues, training and personal issues (if required).

Staff we spoke with told us that these supervision sessions were very supportive and that they felt able to approach the management team at any time to discuss issues out-with supervision.

We observed staff whilst working with residents. They remained calm, friendly and professional. Staff ensured that they spend time with individuals and supported them without rushing them.

They respected residents' dignity by involving them in decision making, offering them choices and by knocking on doors prior to entering respecting their privacy.

We asked three staff about what they would do if they suspected a resident was being mistreated. They demonstrated a good understanding of adult protection measures.

These observations demonstrated to us that staff worked to the principles of the National Care Standards.

Areas for improvement

The provider identified that they would continue to arrange training updates for staff.

They told us that a staff member was developing a computer programme to track training undertaken and highlight updates when required.

As discussed in Quality Theme 2, Statement 2 records were not always complete.

This would help ensure that there were clear records of training and that all staff received updates timeously.

(See Recommendation One)

Whilst we saw that minutes of staff meetings were kept and signed by staff, these could be further developed with more detailed information about discussions, any actions to be taken and who was responsible. This would make the minutes more meaningful to staff who had not attended.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The provider should ensure that all staff receive mandatory training including refresher training as assessed for their role. This should include keeping records of all training up to date.

**National Care Standards - Care Homes for Older People - Standard 5
Management and Staffing.**

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

Please see Quality Theme 1, Statement 1 for areas of strength which are also relevant to this statement.

Areas for improvement

Please see Quality Theme 1, Statement 1 for areas of strength which are also relevant to this statement.

Grade awarded for this statement: 6 - Excellent

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

The service was able to provide very good evidence in support of this statement.

Regular meetings were held with all staff. Staff felt that their views were listened to and responded to appropriately. They told us that the management team and trustees were very supportive to them and they felt confident to discuss issues.

The manager has regular meetings with the trustees to ensure that they are kept up to date with developments in the service and can agree any changes or improvements.

The service had good maintenance systems in place, with outside contractors who attended the service promptly when defects were identified.

The service had a clear system for dealing with any concerns or complaints. There

had been no complaints made to the service since the last inspection.

Residents and relatives we spoke with felt that the management team were very approachable, would feel able to raise any issues and felt confident that issues would be dealt with promptly.

In assessing this statement we also took into consideration areas of strength in Quality Theme 1, Statement 1, Quality Theme 2, Statement 2 and Quality Theme 3, Statement 3.

Areas for improvement

The provider identified that they would ensure that all documentation reflected up to date legislation in their self assessment.

As described in Quality Theme 2, Statement 2 the service should review the frequency of environmental audits.

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

None.

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 | 6 - Excellent |
| Statement 3 | 5 - Very Good |
| Quality of Environment - 5 - Very Good | |
| Statement 1 | 6 - Excellent |
| Statement 2 | 5 - Very Good |
| Quality of Staffing - 5 - Very Good | |
| Statement 1 | 6 - Excellent |
| Statement 3 | 5 - Very Good |
| Quality of Management and Leadership - 5 - Very Good | |
| Statement 1 | 6 - Excellent |
| Statement 4 | 5 - Very Good |

6 Inspection and grading history

| Date | Type | Gradings |
|-------------|-------------|--|
| 14 Aug 2012 | Unannounced | Care and support 5 - Very Good Environment 6 - Excellent Staffing 5 - Very Good Management and Leadership 5 - Very Good |
| 9 Nov 2010 | Unannounced | Care and support 5 - Very Good Environment Not Assessed Staffing Not Assessed Management and Leadership Not Assessed |
| 7 Jun 2010 | Announced | Care and support 5 - Very Good Environment Not Assessed Staffing Not Assessed Management and Leadership 5 - Very Good |

Inspection report continued

| | | | |
|-------------|-------------|--|--|
| | | | |
| 15 Jan 2010 | Unannounced | Care and support Environment Staffing Management and Leadership | 5 - Very Good Not Assessed 5 - Very Good Not Assessed |
| 2 Jul 2009 | Announced | Care and support Environment Staffing Management and Leadership | 5 - Very Good 5 - Very Good 5 - Very Good 5 - Very Good |
| 4 Mar 2009 | Unannounced | Care and support Environment Staffing Management and Leadership | 5 - Very Good Not Assessed Not Assessed 5 - Very Good |
| 11 Dec 2008 | Announced | Care and support Environment Staffing Management and Leadership | 4 - Good 5 - Very Good 5 - Very Good 5 - Very 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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