



Inspection report

Newberry Rooney Support Service Without Care at Home

100 Newpark Street
Hamilton
ML3 0BN
01698 826346

Inspected by: (Care Commission officer)	Marjorie Bain
Type of inspection:	Announced
Inspection completed on:	19 August 2010

	Page Number
Summary of this inspection report	3
Section 1: Introduction	
About the Care Commission	5
About the National Care Standards	6
What is inspection?	7
How we decided what to inspect	9
What is grading?	10
About the service we inspected?	11
How we inspected this service	12
Section 2: The inspection	15
Section 3: Other information	
Other Information	25
Summary of Grades	26
Terms we use in our reports and what they mean	27
How you can use this report	29
People who use care services, their relatives and carers	29

Service provided by:
South Lanarkshire Council

Service provider number:
SP2003003481

Care service number:
CS2008175553

Contact details for the Care Commission officer who inspected this service:

Marjorie Bain
Telephone 01698 208150 Lo-call: 0845 600 8336
Email enquiries@carecommission.com

Easy read summary of this inspection report

There is a six point grading scale. Each of the Quality Themes we inspected, is graded using the following scale:

We can choose from six grades:



We gave the service these grades

Quality of Care and Support 😊 **5** **Very Good**

Quality of Environment N/A

Quality of Staffing N/A

Quality of Management and Leadership 😊 **4** **Good**

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

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

What the service does well

The service offers an environment of very high quality. It is furnished and decorated to a high standard. Staff are very person centred in their approach to providing care and support for people using the service.

What the service could do better

The service should ensure that it creates a culture of participation opportunities for service users and carers in all aspects of its activities.

What the service has done since the last inspection

The service has introduced new personal plans for service users and these have been completed to a high standard. Close links have been established with Alzheimer's Scotland in developing services for people with dementia.

Conclusion

This is a person centred service which adopts a holistic approach to personalising services for service users.

Who did this inspection

Lead Care Commission Officer

Marjorie Bain

Other Care Commission Officers

Lay Assessor

Please read all of this report so that you can understand the full findings of this inspection.

About the Care Commission

We were set up in April 2002 to regulate and improve care services in Scotland.

Regulation involves:

- registering new services
- inspecting services
- investigating complaints
- taking enforcement action, when necessary, to improve care services.

We regulate around 15,000 services each year. Many are childminders, children's daycare services such as nurseries, and care home services. We regulate many other kinds of services, ranging from nurse agencies to independent healthcare such as hospices and private hospitals.

We regulate services for the very young right through to those for the very old. Our work can, therefore, affect the lives of most people in Scotland.

All our work is about improving the quality of care services.

We produce thousands of inspection reports every year; all are published on our website: www.carecommission.com. Reports include any complaints we investigate and improvements that we ask services to make.

The "Care services" area of our website also:

- allows you to search for information, such as reports, about the services we regulate
- has information for the people and organisations who provide care services
- has guidance on looking for and using care services in Scotland.

You can also get in touch with us if you would like more detailed information.

About the National Care Standards

The National Care Standards (NCS) set out the standards that people who use care services in Scotland should expect. The aim is to make sure that you receive the same high quality of service no matter where you live.

Different types of service have different National Care Standards. When we inspect a care service we take into account the National Care Standards that the service should provide.

The Scottish Government publishes copies of the National Care Standards online at: www.scotland.gov.uk

You can get printed copies free from:

Booksource
50 Cambuslang Road
Cambuslang Investment Park
Glasgow
G32 8NB
Tel: 0845 370 0067
Fax: 0845 370 0068
Email: scottishgovernment@booksource.net

What is inspection?

Our inspectors, known as Care Commission Officers (CCOs), check care services regularly to make sure that they are meeting the needs of the people in their care.

One of the ways we check on services is to carry out inspections. We may turn up without telling the service's staff in advance. This is so we can see how good the care is on a normal day. We inspect some types of services more often than others.

When we inspect a service, typically we:

- talk to people who use the service, their carers and families, staff and managers
- talk to individuals and groups
- have a good look around and check what quality of care is being provided
- look at the activities happening on the day
- examine things like records and files, if we need to
- find out if people get choices, such as food, choosing a key worker and controlling their own spending money.

We also use lay assessors during some inspections. These are volunteers who have used care services or have helped to care for someone who has used care services.

We write out an inspection report after gathering the information. The report describes how things are and whether anything needs to change.

Our work must reflect the following laws and guidelines:

- the Regulation of Care (Scotland) Act 2001
- regulations made under this Act
- the National Care Standards, which set out standards of care that people should be able to expect to receive from a care service.

This means that when we register or inspect a service we make sure it meets the requirements of the 2001 Act. We also take into account the National Care Standards that apply to it.

If we find a service is not meeting these standards, the 2001 Act gives us powers that require the service to improve.

Recommendations, requirements and complaints

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

- 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 Act 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 Commission.

Complaints: We have a complaints procedure for dealing with any complaint about a registered care service (or about us). Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints. Depending on how complex it is, a complaint may be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

How we decided what to inspect

Why we have different levels of inspection

We target our inspections. This means we spend less time with services we are satisfied are working hard to provide consistently high standards of care. We call these low-intensity inspections. Services where there is more concern receive more intense inspections. We call these medium or high intensity inspections.

How we decide the level of inspection

When planning an inspection, our inspectors, or Care Commission Officers (CCOs) carefully assess how intensively each service needs to be inspected. They do this by considering issues such as:

- complaints
- changes to how the service provides care
- any notifications the service has given us, such as the absence of a manager
- what action the service has taken in response to requirements we have made.

The CCO will also consider how the service responded to situations and issues: for example how it deals with complaints, or notifies us about incidents such as the death of someone using the service.

Our inspections take account of:

- areas of care that we are particularly interested in (these are called Inspection Focus Areas)
- the National Care Standards that the service should be providing
- recommendations and requirements that we made in earlier inspections
- any complaints and other regulatory activity, such as enforcement actions we have taken to improve the service.

What is grading?

We grade each service under Quality Themes which for most services are:

- **Quality of Care and Support:** how the service meets the needs of each individual in its care
- **Quality of Environment:** the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?);
- **Quality of Staffing:** the quality of the care staff, including their qualifications and training
- **Quality of Management and Leadership:** how the service is managed and how it develops to meet the needs of the people it cares for
- **Quality of Information:** this is how the service looks after information and manages record keeping safely.

Each of the Quality Themes has a number of Quality Statements in it, which we grade.

We grade each heading as follows:

6	5	4	3	2	1
excellent	very good	good	adequate	weak	unsatisfactory

We do not give one overall grade.

How grading works.

Services assess themselves using guidance that we given them. Our inspectors take this into account when they inspect and grade the service. We have the final say on grading.

The Quality Themes for this service type are explained in section 2 The Inspection.

About the service we inspected

Newberry Rooney is operated by South Lanarkshire Council and provides Community Support Services for a maximum of 24 older people, 12 frail elderly and 12 with dementia, aged 60 plus. The support service is provided in two separate wings of the centre.

The centre was built in 2008 and has been registered with the Care Commission since 24 June 2008. The centre is set in a park land area and has landscaped external areas for outdoor use.

The service is operational 52 weeks of the year, excluding public holidays and is currently open between 9 am and 5 pm Monday to Friday. Patterns of use are flexible dependent on the needs of the people using the service and range from one to five days a week. The aim of the service is to maximise independence and support good physical and mental wellbeing.

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

Quality of Care and Support	5 - Very Good
Quality of Environment	N/A
Quality of Staffing	N/A
Quality of Management and Leadership	4 - Good

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

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

You can use the "Care services" area of our website (www.carecommission.com) to find the most up-to-date grades for this service.

How we inspected this service

What level of inspection did we make this service

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 activities did we undertake during the inspection

We compiled this report following an announced inspection. The inspection was carried out by Care Commission Officer Marjorie Bain. The inspection was carried out on 19 August 2010 between the hours of 8.40 am and 5.25 pm.

As requested by us, the care service sent us an annual return. The service also sent us a self assessment form.

In this inspection we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents, including:

- * Evidence from the service's most recent self assessment
- * Personal plans (7) of people who use the service
- * Pre review document
- * CAST audit record
- * Accident and incident records
- * Staff meeting minutes (3)
- * Results of service questionnaire
- * Service invite to carers to participate in inspection
- * Reviewing internal and external audit reports (3)
- * Emergency contingency plan
- * Minutes of service user committee minutes (3)
- * Draft new Newsletter - The Weekly Sparkle
- * Draft staff briefing note - The Weekly Sparkle
- * Discussion with service users (3)
- * Discussions with the Resource Manager, Senior Day Care Officer, 2 care staff and a student on placement
- * Observing how staff worked
- * Examining the internal and external of the building

Inspection Focus Areas (IFAs)

Each year we identify an area, or areas, we want to focus on during our inspections. We still inspect all the normal areas of a care service; these are extra checks we make for a specific reason.

For 2010/11 we will focus on:

- Quality assurance for care at home and combined care at home and housing support services.

You can find out more about these from our website www.carecommission.com.

Fire safety issues

The Care Commission no longer reports on matters of fire safety as part of its regulatory function. Where significant fire safety issues become apparent, we will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Care service providers can find more information about their legal responsibilities in this area at: www.infoscotland.com/firelaw

Actions Taken on Recommendations Outstanding

Recommendations from the previous inspection have been reported upon under the relevant Quality Theme in this report.

The annual return

We use annual returns (ARs) to:

- make sure we have up-to-date, accurate information about care services; and
- decide how we will inspect services.

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care (Scotland) Act 2001, Section 25(1). These forms must be returned to us between 6 January and 15 February.

Annual Return Received

Yes - Electronic

Comments on Self Assessment

We received a fully completed self assessment document from the service provider. The service provider identified what they thought they did well, some areas for development and any changes they planned. The service provider told us how the people who used the care service had taken part in the self assessment process. It would be helpful if the service provided more service specific examples in their self evaluation to support their perceived strengths.

Taking the views of people using the care service into account

We spoke to four service users during our inspection. We were told people liked coming to the centre and enjoyed the company of others.

Taking carers' views into account

We were unable to speak to any carers during this inspection. However, the service had carried out a survey of carers and the results indicated high levels of satisfaction with the service being provided.

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

On a daily basis service users are consulted about the type of activities they would like to pursue.

Service users and carers are actively involved in developing personal care plans. The plans document individual needs and preference, in relation to routine, eating and drinking and activities enjoyed.

Service user meetings are held every two months. They monitor quality of meal provision, equipment to be purchased and activities and fund raising events to be organised.

Service users via their committee meetings and in daily liaison with staff were monitoring the quality of meals being provided. Service users felt the quality of meals had slightly improved during the summer period when community services had not been providing the meals. Staff have taken on board service user concerns and are in touch with management of their own department and with community services facilities manager to ensure food quality is improved. Staff had also been consulting with service users about meal choice and menus were being reviewed.

Carers have an open invite to attend a Carers Group organised by Alzheimer's Scotland which meets monthly in the centre and has guest speakers on a range of topics. Participation from carers from this service is variable.

Each service user has a Meaningful Activities and Activities of Daily Living Plan which details the activities they wish to participate in and evaluates the benefits they are obtaining.

In June 2010 the service issued service users with a questionnaire to help inform the service's self evaluation which it submits prior to each Care Commission inspection. Twenty five service users participated in the survey, although not everyone submitted answers for every question.

In relation to this Quality Theme service users indicated their satisfaction with the service being provided.

Excellent	8
Good	14
Fair	1
No comment	2

Areas for Improvement

In the previous inspection report we made one requirement and four recommendations.

Requirement

The service must ensure that the premises are wind and water tight at all times.

SSI 114 - The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002 - Section 10 (2)(b) - are of sound construction and kept in a good state of repair externally and internally;

Timescale for implementation: three months from the publication of this report.

Roof repairs had been undertaken and an agreement reached that technical staff would inspect the condition of the roof on a quarterly basis. More frequent technical inspections will be carried during the autumn months to ensure foliage is not blocking guttering or downpipes. This requirement has been met.

The service should consider how it can maximise use of the touch screen monitor, by providing sufficient advance notice of its presence in the centre and having it located in an area where people wishing to complete the survey can do so in private.

National Care Standards - Support Service - Standard 12 - Expressing your views

The provider continues to review how it may, or may not use this system in the future. Account will be taken of the Care Commission view on this matter as part of the ongoing review. This has been met.

The access road into the service could benefit from improved lighting to ensure the safety of people accessing the service by foot.

National Care Standards - Support Service - Standard 5 - Your environment

This matter is still under consideration and to date there has been no proposed solution to the problem. This recommendation will be repeated.

To ensure the safety of people seeking to access the centre by foot, the service should investigate, the reasons for parts of the access road flooding in poor weather and take appropriate remedial action to resolve the matter.

National Care Standards - Support Service - Standard 5 - Your environment

Work had been undertaken to improve the drainage of this access road by the Council Department with responsibility for roads and pathways. This recommendation has been met.

The service should consider developing a range of opportunities to involve people using the service and their relatives and carers in the recruitment, induction and performance review of staff.

National Care Standards - Support Services - Standard 12 - Expressing your views

The service had consulted with service users and carers as to how they might want to be involved in staff recruitment. The majority view was that people wanted to be involved, by for example identifying key qualities they would look for in care staff and by proposing questions which could be asked at interview. People did not wish at this point in time to be involved in formal staff interviews. The provider was currently reviewing care staff core competencies. Once reviewed, this will take more account of the views of service users and carers, and offer more opportunities for them to be involved in future recruitment, induction and appraisal of staff. This recommendation has been met.

This service has achieved good progress in relation to this quality statement. However, it needs to further develop their participation strategy and its implementation, by ensuring that a culture of participation is developed and is at the heart of all that they do. For example, staff consulted service users about equipment they might wish to purchase. It would have been nice to see some service users offered the opportunity to accompany staff to purchase the equipment. Additionally, service users from two other services had attended the service on a temporary basis while their own premises were being refurbished. The service could have provided more evidence as to how service users at Newberry Rooney had been involved in preparing for the addition of new service users. When they had returned to their own centres, then service users could have evaluated the success, or otherwise of the temporary arrangement. (See Recommendation 2)

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

2

Recommendation

1.
The access road into the service could benefit from improved lighting to ensure the safety of people accessing the service by foot.

National Care Standards - Support Service - Standard 5 - Your environment

2.
The service should seek to develop a continual culture of service user and carer participation in all key aspects of the service's development.

National Care Standards - Standard 4 - Management and staffing - and -
Standard 11 - Expressing your views

Statement 3

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

Service Strengths

The service was operating at a very good level in relation to this Quality Statement.

Staff undertake a pre assessment of individuals before they start with the service. This is to ensure that the service can meet their individual needs. We inspected a care plan for a service user who had only been in attendance for a very short time. Needs assessment, including risk assessments were completed to a high standard and the plans set out clear advice for staff when working with the individual. New service users have a review after 4 weeks to ensure that the service continues to meet their needs. Thereafter reviews are undertaken on a regular basis with full service user and carer involvement.

In total we examined seven person care plans for people using the service. All were completed to a very high standard. There was clear guidance on administration of medication. Reviews were dated and signed off and daily communication sheets gave a clear picture of each person's progress. Service user files are audited by senior staff internally and externally to ensure care standards remain high.

Staff liaised with a range of health professionals to signpost service users to specialist services, to ensure consistency of care and to ensure that people with complex medical needs were given maximum support.

Dependency levels were reviewed on a regular basis and staff support varied to address changing needs.

Alzheimer's Scotland continued to work closely with staff to assist, for example, in identifying meaningful activities which would be enjoyable and prove beneficial to service users. The service had for one service user, created a scrapbook to provide familiar images with which the person could identify and help others to communicate with them.

During our visit, we observed staff playing a game with service users which encouraged participation and use of imagination and helped with number and colour recognition. Service users were observed to be fully engaged and enjoying themselves.

The service works closely with carers to try and ensure that the service is able to meet the needs of each individual. When the service is no longer able to meet a person's needs, then staff liaise with colleagues in other services to support the service user and carer to access services more appropriate to their needs.

Areas for Improvement

The service should continue to deliver high standards of care by continuing to work with carers, service users and other professionals.

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: 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

In June 2010 the service had undertaken a survey of service users. One section of the survey questionnaire asked four questions relating to the Quality of Management. Overall people rated this element as follows:

Excellent	0
Good	10
Fair	3
Poor	1
No comment	2

Responses to individual questions provided the following:

Do you have input in assessing the quality of management? Six people replied 'No' and one person commented that they would like to attend managers meeting.

Are you involved in the direction for future of service? Six people said 'No' and one person was non specific.

Is there good quality of care throughout the workplace? Six people responded 'Yes'.

Are you as a service user aware of agencies involved within daycare, for example, Care Commission? Two people replied 'Yes', three people said 'No' and two people were unspecific.

The people surveyed rated the overall service on all elements as:

Excellent	8
Good	14
Fair	1
No comment	2

Areas for Improvement

Responses to the service survey outlined above, indicate that while there is overall satisfaction with the quality of the service being provided, service users do not feel involved in the assessment of the quality of management. (See Recommendation 1)

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

1

Recommendations

1.

The service should consider ways in which it can evidence service user and carer involvement in assessing and improving the quality of management and leadership.

National Care Standards - Standard 4 - Management and staffing - and -
Standard 11 - Expressing your views

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 has the Charter Mark, Customer Service Excellence award and has Investor in People status. External and internal audits are carried out on a regular basis to ensure care standards remain high.

Regular fire and health and safety audits are undertaken and any required remedial action identified is pursued by staff.

A selection of the service user personal plans is audited on a regular basis by service senior staff and by external managers. Any areas for improvement identified are documented and follow up action is required.

Service users and carers are surveyed on a regular basis.

Service users have begun to be involved in producing the service's self evaluation for Care Commission inspections.

Areas for Improvement

Where service users and carers have provided comment on the service being provided, it was not always clear what actions the service had taken to address any issues or concerns identified. For example, a recent survey indicated service users did not feel particularly engaged with management, yet no evidence was presented as to how this would be addressed. (See Recommendation 1)

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

1

Recommendations

1.

The service should produce clear evidence, that where issues or concerns have been identified by service users and carers, that appropriate action has been

taken to have these addressed.

National Care Standards - Standard 4 - Management and staffing - and -
Standard 11 - Expressing your views

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

Since the last inspection the Senior Day Care Officer responsible for organising the day to day activities at the centre had been on temporary secondment but had returned in April of this year. Other Senior Day Care Officers and Co-ordinators had provided cover during this period overseen by the Resource Manager. The current Senior Day Officer is due to leave and arrangements are being put in place to find a replacement member of staff.

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 Commission re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

Summary of Grades

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Environment - Not Assessed	
Quality of Staffing - Not Assessed	
Quality of Management and Leadership - 4 - Good	
Statement 1	4 - Good
Statement 4	5 - Very Good

Inspection and Grading History

Date	Type	Gradings
30 Nov 2009	Announced	Care and support 5 - Very Good Environment 4 - Good Staffing 4 - Good Management and Leadership 4 - Good

Terms we use in our report and what they mean

Action Plan - When we inspect a service, or investigate a complaint and the inspection report highlights an area for improvement; either through recommendations or requirements, the action plan sets out the actions the service will take in response.

Best practice statements/guidelines - This describes practices that have been shown to work best and to be achievable in specific areas of care. They are intended to guide practice and promote a consistent and cohesive approach to care.

Care Service - A service that provides care and is registered with us.

Complaints - We have a complaints procedure for dealing with any complaint about a registered care service or about us. Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints which can have more than one outcome. Depending on how complex the complaint is, the outcomes can be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

Enforcement - To protect people who use care services, the Regulation of Care (Scotland) Act 2001 gives the Care Commission powers to enforce the law. This means we can vary or impose new conditions of registration, which may restrict how a service operates. We can also serve an improvement notice on a service provider to make them improve their service within a set timescale. If they do not make these improvements we could issue a cancellation notice and cancel their registration.

Disclosure Scotland- Disclosure Scotland provides an accurate and responsive disclosure service to enhance security, public safety and protect the vulnerable in society. There are three types or levels of disclosure (i.e. criminal record check) available from Disclosure Scotland; basic, standard and enhanced. An enhanced check is required for people whose work regularly involves caring for, training, supervising or being in sole charge of children or adults at risk; or to register for child minding, day care and to act as foster parents or carers.

Participation - This describes processes that allow individuals and groups to develop and agree programmes, policy and procedures.

Personal Plan - This is a plan of how support and care will be provided. The plan is agreed between the person using the service (or their representative, or both of them) and the service provider. It is sometimes called a care plan mostly by local authorities or health boards when they commission care for people.

How you can use this report

Our inspection reports give care services detailed information about what they are doing well and not so well. We want them to use our reports to improve the services they provide if they need to.

Care services should share our inspection reports with the people who use their service, their families and carers. They can do this in many ways, for example by discussing with them what they plan to do next or by making sure our report is easily available.

People who use care services, their relatives and carers

We encourage you to read this report and hope that you find the information helpful when making a decision on whether or not to use the care service we have inspected. If you, or a family member or friend, are already using a care service, it is important that you know we have inspected that service and what we found. You may find it helpful to read previous inspection reports about his service.

The Care Commission

We use the information we gather from all our inspections to report to Scottish Ministers on how well Scotland's care services are performing. This information helps us to influence important changes they may make about how care services are provided.

Reader Information

This inspection report is published by the Care Commission. It is for use by the general public. You can get more copies of this report and others by downloading it from our website www.carecommission.com or by telephoning 0845 603 0890.

Translations and alternative formats

This publication is available in other formats and other languages 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।

هذه بایتسد سیم وونابز رگید روا رولکش رگید رپ شرازگ تعاشا هی

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

ی.ر.خ.أ تاغلبو تاقيسينتت بلطلا دن ع رفاوتم روشنملا 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: 0845 603 0890

Email: enquiries@carecommission.com

Web: www.carecommission.com

Improving care in Scotland