

Care service inspection report

Campsie View

Care Home Service Adults

Canal Street

Kirkintilloch

G66 1QY

Telephone: 0141 777 8880

Inspected by: Ann McKinnon

Susan Donnelly

Type of inspection: Unannounced

Inspection completed on: 19 July 2013



HAPPY TO TRANSLATE

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Service provided by:

Four Seasons Health Care (Scotland) Limited, a member of the Four Seasons Health Care Group

Service provider number:

SP2007009144

Care service number:

CS2003010436

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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	4	Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership	5	Very Good

What the service does well

We observed staff practice and interaction with residents and found that this was supportive, with staff members responding promptly where assistance was required.

We found that improvements had been made to the environment, with new flooring and updated décor.

What the service could do better

We found that the service should continue to review and improve care plan information to reflect the needs of residents and how assessed needs should be met. This is in order to guide staff in their practice.

What the service has done since the last inspection

We found that the service continues to offer a very good standard of care and support, with regular consultation with residents and their carers/friends.

Conclusion

We made one recommendation at the previous inspection which was completed in December 2012. We will reiterate this recommendation in this report.

Who did this inspection

Ann McKinnon

Susan Donnelly

Lay assessor: Mrs Rhona Short

1 About the service we inspected

Campsie View Care Home is located in the Kirkintilloch area of East Dunbartonshire and is situated near to local amenities and transport. The service is managed by Four Seasons Health Care Ltd.

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.

The service provided care to a maximum of 90 older people, with three places allocated to provide respite care. At the time of the inspection there were 87 residents.

Accommodation consists of three separate units. Wallace and Rob Roy are located on the ground floor. Within these units, support is delivered to individuals with needs associated to dementia. Bruce unit covers the upper floor. Individuals are admitted to this unit who have been assessed as frail elderly.

All bedrooms within the service are single with en-suite toilet facilities. Each unit has a communal lounge, dining area and shared bathing and showering facilities. Access to a garden area is available.

The organisation's aims and objectives stated that the service would:

"Respect the rights, dignity, individuality and lifestyle of the service user. Expected goals and outcomes which are realistic and achievable will be identified and documented in an individual plan."

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

Quality of Care and Support - Grade 5 - Very Good

Quality of Environment - Grade 4 - Good

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - Grade 5 - Very Good

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

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com 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 medium 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

We wrote this report after an unannounced inspection which took place over a period of four days. This inspection took place on 10th July, 7pm to 11pm: 11th July, 9.30am to 4.30pm: 12th July, 9am to 4pm, with feedback given on 19th July 2013.

Ann McKinnon, Inspector carried out this inspection, with Susan Donnelly, Professional Advisor Mental Health, also present for part of the visit.

Liz Cochrane, Inspector with the Care Inspectorate's Registration Team, was also present for part of the inspection.

The following was used as sources of evidence:

Discussion with 12 residents and 5 carers/friends of service users.

We sent Care Standards Questionnaires to the service, with 20 completed and returned by residents, their carers/friends.

Additionally, one family member contacted the Care Inspectorate by e-mail and one family member contacted the Care Inspectorate by telephone.

We observed staff practice and interaction with residents.

We met with :

The Manager

Deputy Manager

Team leader

-7 members of nursing staff,

-3 Senior carer,

-10 Care staff

-1 members of housekeeping staff.

We looked at the following documents:

- Care plan information and associated documents such as risk assessments, food & fluid monitoring charts, care reviews meeting minutes and care plan audits
- Mealtime arrangements, food and fluid monitoring charts
- Activities for residents, including weekly activity rota
- Accident and incident records for staff and for residents
- Observation of environment, repairs log and maintenance records
- Staff records including registration, recruitment (including residents/carers involvement), induction, training, supervision and appraisal information
- Minutes of staff meetings March 2013 to July 2013
- Minutes of Clinical Governance meetings March to June 2013 and reports
- Records of staff who are care champions including additional training
- Records of complaints
- Insurance certificates
- Quality assurance systems, records and reports
- Nine resident and relative satisfaction survey issued by the service to residents, their carers/friends in 2013
- Minutes of residents and relatives meetings, including action plan on 21st May 2013 (residents), 18th April and 6th June 2013 (relatives)
- The service's dependency information and overall dependency rating for May and June 2013.

Grading the service against quality themes and statements

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

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

Inspection Focus Areas (IFAs)

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

Fire safety issues

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

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

We made one recommendation at the previous inspection which was completed in December 2013. We will reiterate this recommendation in this report.

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 service completed its self assessment prior to the inspection.

Taking the views of people using the care service into account

The views of residents are contained throughout this report.

Taking carers' views into account

The views of the carers/friends of residents are contained 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

We found that the service continues to perform at a very good level in the areas covered in this statement.

We looked at the minutes of residents' and relatives' meetings and found that residents and their carers/friends had the opportunity to give their views on menus, laundry and activities. Discussion was also held on staff numbers and planned improvements to the garden. We found that an action plan had been developed and implemented following each meeting, with progress reviews at future meetings.

We found that the service continues to maintain links with a local advocacy service, with information about the advocacy service on display throughout the care home. A drop in service was ongoing to raise awareness about the advocacy service and the support provided. Some residents also had individual support from an advocate.

We found that an activities committee was in place with residents and their carers/friends involved, continuing to seek views on preferred activities and outings.

We found that the residents had recently been involved in discussions in relation to preferred activities, with a lifestyle passport proforma completed to assist in activity planning.

We looked at resident and relatives grading forms which had been completed and returned to the service.

Comments included:

- I have been very happy with the care and attention he has been given in this home.
- All very satisfactory
- Communication is excellent across the board
- Mum especially likes the trips and the music which staff are good at persuading her to join in
- Key worker information is patchy, but doesn't cause any problems
- Manager usually available when we need to speak to her
- Very happy and contented
- The staff are excellent
- I grade 6 to all questions. The staff are happy and help
- Excellent home

We found that residents and their carers/friends had selected preferred colours schemes for re-decoration of bedrooms and communal areas.

We found that residents had been involved in staff recruitment, with residents suggesting preferred questions or topics or meeting with candidates, with their views taken into account as part of the recruitment process.

Areas for improvement

We looked at resident and relatives' grading forms which had been completed and returned to the service.

Comments from grading forms included:

- Not all senior staff communicates between residents/relative, certain staff do.
- The issue of shortage of staff, some residents sit staring into space.
Unfortunately the staff shortage has a lot to do with communication

We found that the service should continue to work with residents and their carers/friends in relation to comments.

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 found that the service was performing at a very good level in the areas covered by this statement.

We looked at Care Plan information and associated documents such as dependency assessments, risk assessment and minutes from previous reviews of care. We found that information was in a good level of detail, with care plans completed by nursing and senior staff. We found that care staff were also involved in providing updated information.

We found that a system was in place to update staff with changes to care plans, with summary of information from handover meetings.

We found that there was an audit system for care plans. We sampled care plan audits and found that where further work was identified, this had been addressed within the identified timeframe.

We sent Care Standards Questionnaires to the service for residents, their carers/ friends and staff. We found that 20 Questionnaires had been returned by residents, their carers/ friends. We found that Care Standards Questionnaires 'strongly agreed' or 'agreed' with the statement:

- 'Overall, I am happy with the quality of care'.

We looked at the activity plans for residents and found that activity staff have worked with residents and their families to identify preferred activities. We found that there were activity staff on each day, with a planned activity programme.

We looked at the activity plans for the service which included activities within the service, such as household tasks, gardening, reminiscing and discussion groups, as well as outings to places of interest. On the day of the inspection there was an entertainment group organised.

We sent Care Standards Questionnaires to the service for residents, their carers/ friends and staff.

We found that 20 Questionnaires had been returned by residents, their carers/ friends. We found that Care Standards Questionnaires 'strongly agreed' or 'agreed' with the statement:

- There are frequent social events, entertainment and activities organised.

We observed mealtimes in 2 of the units in the care homes. We found that residents were supported to take their meals either within the dining area or in the sitting area.

A choice of food options were offered with additional options available, if menu was not suitable or the resident indicated that they would prefer another meal/snack.

We found that staff members were available to assist residents. Food and fluid intake charts were in place and up-to-date, where residents required this additional monitoring and support.

We found that the service had reviewed the dining experience, with the views of residents, their carers/friends obtained. Comments from the review included:

- don't get asked choice of food
- chips aren't very good

We looked at accidents and incidents and notification to the Care Inspectorate. We found that accident and incident reports were completed, with ongoing monitoring in place where necessary.

We found that where residents were at a high risk of falls and had a number of falls over a short period of time, referrals were made to other professionals, for advice and support.

We found that falls assessment documentation was complete within sampled care plans.

The Lay Assessor, who has experience of using care services, noted that:

People were happy with the support they received. Comments were:

- The staff ask me what I want
- If you want anything you get it.
- I get a shower anytime I want
- There is always plenty to drink

People thought the food was okay. Comments were:

- The food is ok, you get used to it
- The food's fine but nothing special

One person commented:

- I have lost weight since I came in and feel better for it....healthier.

One person commented that they would like a baked potato "now and again".

Some of the people I spoke to were happy with the activities in the home. The comments were:

- They arrange different things. People come in and do music and entertain us sometimes
- I can take part in what I want.
- They tell me what is coming up and ask if I would like to join in but don't force me

One person said they would like to go out more.

Three people I spoke to stated that they were asked about what they wanted and felt they were listened to but no-one was aware of "care plans".

I had the opportunity to observe the supper time whilst I was speaking to people. Everyone was asked what they would like to drink (Tea, Coffee juice, milk) and offered either toast or sandwiches. I observed one person asking for a particular type of biscuit and the member of staff going and getting this for her. Everyone was given a table within easy reach of them and one person was offered assistance to drink their tea when it was obvious they were struggling.

I observed two of the staff clearing the area after supper and throughout the time I was there I observed them ensuring a safe environment was maintained (clearing tables away, picking up items that had fallen).

Additional comments from residents and their carers/friends included:

- My mother's dementia has improved since entering Campsie view. I believe that this is due to regular hydration, nutrition and medication. Also freedom from anxiety as there is always a staff member to reassure her.
- There is a very consistent level of care across the staff which to me shows good management.
- I think care and support received is very good
- I am writing to commend Bruce Unit...for the level of care given to my father..... He was resident there for almost 14 months and, in that time, had found the staff to be very loving and caring. This level of care was displayed even more strongly when dad declined very quickly over his last 3 days. The staff could not have done any more to make sure he was clean, comfortable and pain-free, and that care extended to the whole family during this time.
- I think the care here is very good. I enjoy the food and like the activity pals.
- Liked the entertainment, singer was very good.

Areas for improvement

We found that the service should continue to develop care plan information, with involvement of the residents and their carers/friends. (See recommendation 1, detailed below).

We found that the service should continue to develop care plan information in relation to welfare and financial guardianship.

We found that the service should continue to look at ways in which the service's dependency tool could be used to influence the number and skill mix of staff at appropriate times during the day and evening.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. Recommendation with reference to Theme 1, Statement 3:
The service should continue to develop care plan information which records and implements the individual's likes, dislikes, preference and needs in relation to their care and support. The service should ensure that review information is in a good level of detail.
National Care Standards Care Homes for Older People, Standard 6 Support Arrangements.

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 4 - Good

Statement 2

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

Service strengths

We found that the service continues to perform at a good level in the areas covered by this statement.

We found that there were monthly audits of accidents and incidents. We sampled care plan information where it was noted through accident & incidents reports that there was an increased number of falls for an individual resident. We found that accident reports and follow up information was in place, with advice and support obtained from other professionals such as the GP, liaison nurse or NHS falls team.

We sent Care Standards Questionnaires to the service for residents, their carers/ friends and staff. We found that 20 Questionnaires had been returned by residents, their carers/ friends. We found that completed Care Standards Questionnaires 'strongly agreed' or 'agreed' with the following statements:

- I feel safe and secure in the care home
- I am confident that my relative/ friends is safe and secure in the care home

We looked at maintenance records and found that regular checks were carried on moving and handling equipment; staff call system, window restrictors, wheelchairs, water quality and water temperature records.

We found that portable appliance tests were carried out when new electrical goods were purchased or brought in by residents and/or their carers/ friends

We looked at the service's repair information and found that repairs were addressed without undue delay.

We found that the service had updated the décor within the care home. Garden areas were maintained and used by residents during our inspection visit.

Areas for improvement

We found that the service should continue to work with residents and their carers/friends obtaining their views in relation to the environment.

Comments from residents and their carers/friends included:

- Room provided is very small and dated with poor ventilation
- Greater care should be provided for relative's personal belongings. I am constantly providing new clothes.
- Only small criticism I could say is that there is normally a bit of a smell within the lifts
- The health & safety aspects of the care home needs addressing, in a more realistic and organised manner, with respect to clothing and home garden areas.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

The environment allows service users to have as positive a quality of life as possible.

Service strengths

We found that the service was performing at a good level in the areas covered in this statement.

We found during our inspection visits that improvements had been made to the décor of the care home.

We found that residents had access to enclosed garden areas, with many of the residents opting to sit in the garden during the inspection visit.

We found that residents and their carers/friends had been involved in colour choices where redecoration was undertaken.

We found that new flooring had been completed within one unit.

We found that residents and their carers/friends could bring in on admission to the care home preferred items including family pictures which assisted in making resident's bedroom homely and comforting.

We found there were no offensive smells evident in the care home during the inspection.

The Lay Assessor, who has experience of using care services, noted that

People I spoke to were happy with their rooms. Comments were:

- I'm happy in my room; I've got everything I need.
- My room is comfy and I have a comfy bed.
- It's nice and bright

I had the opportunity of seeing a room from a distance. The room was clean and personalised and appeared well maintained.

People I spoke to were happy about how the rooms were maintained: Comments were:

- They (the staff) keep it very clean. I have my window open at night.
- It's always very tidy

Areas for improvement

We found that the service should continue to work with residents and their carers / friends in relation to improvements to the environment, including communal bathrooms and bath/shower areas.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 2

We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

Service strengths

We found that the service was performing at a very good level in the areas covered by this statement.

We sampled recruitment files for 5 staff members who had recently been recruited.

We found that there was an application form in place which was completed by the candidate prior to interview.

We found that references were obtained as part of the interview process, with 1 reference obtained for the most recent employer.

We found that references gave detail of where the reference was obtained. Where this was from a previous employer, a copy stamp or covering letter / e-mail was in place.

We found evidence that references and Disclosure Scotland (PVG) record checks had been carried out prior to the commencement of employment.

We found that interviews were carried out by 2 members of the management or staff team, with written information relating to the questions asked and responses given.

We found that residents had the opportunity to take part in the recruitment process, with their views taken into account as part of the decision as to whether the candidate was suitable for employment.

We looked at the service's induction plan, which was completed over a 3 day period. We found that training on moving and assisting, care planning and documentation, nutrition and hydration, activities, continence care, and the resident's experience was completed during the 3 day period.

We found that the service had recently introduced an extended induction period for staff members, with the Team Leader providing further training within her role. This included further training observation of practice and additional support where necessary.

Areas for improvement

We found that the service should continue to develop and implement the 'resident's experience' training programme with new and longstanding staff.

We found that the service should continue to work with residents and their carers/ friends to identify any additional training necessary to meet the care and support needs of residents.

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

We found that the service was performing at a very good level.

We observed staff practice and interaction with residents and found that this was supportive, with prompt action where additional support was required.

We found that staff members had access to regular meetings, with a minute of the meeting available if staff were unable to attend. We found that an action plan was developed following meetings.

We looked at minutes from the Clinical Governance meeting in May and June 2013 which was attended by 9 nurses. Discussion was held on 'what is clinical governance', with weights/must, food and fluid charts and distress reaction incidents discussed.

We found that staff members had the opportunity to discuss policy/procedures, training, quality assurance and any complaints/concerns about the service.

We found that the service had a system in place to support staff as part of supervision and appraisal. We looked at a proforma which was completed in relation to the role of named nurse or Senior nurse care assistant. We found that this assisted in discussion in relation the staff member's role, where the staff member performs well and areas where further training/support would be advantageous.

We looked at staff records and found that staff members had the opportunity to discuss training and support needs and comments on their role within the service. The service had developed the key worker role, with staff members allocated to provide support.

We sent Care Standards Questionnaires to the service for residents, their carers/ friends and staff. We found that 20 Questionnaires had been returned by residents, their carers/ friends. We found that completed Care Standards Questionnaires 'strongly agreed' or 'agreed' with the following statement:

-I am confident that staff have the knowledge and skills to care for me (my relative/ friend).

The Lay Assessor, who has experience of using care services, noted that People I spoke to were positive about the staff. Comments were:

- They (the staff) are great in here....no complaints.
- I'm very well looked after. Nothing is a bother
- Staff always knocks before they come in my room. They are very well mannered.

I observed the staff to be attentive and interactive with the people with one person in particular spending lots of time talking to people individually. This was drawn to the attention of the lead inspector.

All of the people I spoke to knew that they had a buzzer in their room and could use this to call for staff assistance but no one felt they needed to.

Comments from resident, their carers/friends included:

- I find the staff very helpful
- I would have no hesitation in asking for staff help and I trust them 100%
- I get help when I need it. Staff are very pleasant to me and very understanding. Day Shift, backshift and Nightshift, all very good.
- I am not always able to speak to key workers as they have been changed without telling me. Despite this I am extremely impressed by the very obvious communication amongst staff members. Both regular and bank staff know my mum, where she is and how she is.
- The staff themselves all appear to be very caring people as well as being well trained and effective. When any issue arises, they are quick to put things right and encourage me to advise of any issues.

Areas for improvement

We found that the service should continue to work with residents and their carers/friends and staff members to identify and address any concerns or additional training needs.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

Statement 3

To encourage good quality care, we promote leadership values throughout the workforce.

Service strengths

We found that the service was performing at a very good level in the areas covered by this statement.

We found that the service was promoting leadership values through involving staff members, with additional training in place, to lead on aspects of care such as infection control, palliative care, continence care, dementia and dignity.

We found that the service has promoted 'resident experience' training, with the Team Leader implementing this practical experience training for new staff on induction. Staff members who had completed this training programme commented positively on the learning experience.

We found that nursing and senior care staff members had taken on the role of quality assurance in relation to audits including medication and care planning.

We found that Senior Care staff had been supported to register with the Scottish Social Services Council, undertaking appropriate duties in line with the category of registration.

We found that staff members were aware of the role of the Scottish Social Services Council and its code of conduct.

We found that staff members were aware of the National Care Standards.

Areas for improvement

We found that the service should continue to promote training relevant to the role of staff members.

We found that the service should continue to develop and implement the 'resident's experience' training programme with new and longstanding staff.

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 found that the service was performing at a very good level in the areas covered by this statement.

We found that the service held 'head of department' meetings each morning. We attended this meeting during the inspection and found that this helped to improve communication within the service and also identify any concerns which should be addressed.

We found that the service had regular 'clinical governance' meetings, where an overview of the clinical needs of residents were identified. This assisted in ensuring that where additional support or guidance was required.

We found that the service had a Quality Assurance system in place, with a number of quality audits relating to medication, nutrition, falls and care plans.

We found that audits were completed by members of the management and staff team. We noted that where concerns were identified, an action plan was completed to address concerns.

We looked at a completed Quality Audit which had recently been introduced by the service. This audit was completed on a monthly basis by the Regional Manager and covered areas such as medication management, care planning and documentation, clinical governance, health and safety, staff recruitment and training and the environment.

We found, through discussion with residents and their carers/friends that the management team were available to discuss any concerns which there may be. Resident and their carers/friends advised that they felt able to approach the manager, nursing or senior staff to discuss any issues.

We looked at notifications made to the Care Inspectorate, accident/incident and other information. We found that the service had notified the Care Inspectorate of relevant accidents and incidents and other events.

We spoke with staff in relation to their understanding about Adult Support and Protection and training in this area. We found that staff members had an understanding of Adult Support and Protection and what action should be taken if concerns were found.

Areas for improvement

We found that the service should continue to develop its quality assurance systems to assist in identify any concerns.

We found that the service may wish to consider involving residents and their carers/ friends in any audits, where appropriate.

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

N/A.

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

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

6 Inspection and grading history

Date	Type	Gradings
4 Dec 2012	Unannounced	Care and support 5 - Very Good Environment Not Assessed Staffing 5 - Very Good Management and Leadership Not Assessed
4 Dec 2012	Unannounced	Care and support 5 - Very Good Environment Not Assessed Staffing 5 - Very Good Management and Leadership Not Assessed
16 May 2012	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing Not Assessed Management and Leadership 4 - Good

Inspection report continued

20 Feb 2012	Unannounced	Care and support Environment Staffing Management and Leadership	Not Assessed Not Assessed Not Assessed 4 - Good
6 Oct 2011	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good Not Assessed Not Assessed
20 Apr 2011	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good 4 - Good
8 Nov 2010	Unannounced	Care and support Environment Staffing Management and Leadership	3 - Adequate Not Assessed 3 - Adequate 3 - Adequate
29 Sep 2010	Announced	Care and support Environment Staffing Management and Leadership	3 - Adequate 3 - Adequate 2 - Weak 3 - Adequate
25 Mar 2010	Unannounced	Care and support Environment Staffing Management and Leadership	3 - Adequate Not Assessed Not Assessed 2 - Weak
18 Nov 2009	Unannounced	Care and support Environment Staffing Management and Leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
30 Jul 2009	Unannounced	Care and support Environment Staffing Management and Leadership	Not Assessed Not Assessed Not Assessed 2 - Weak

Inspection report continued

15 Jun 2009	Announced	Care and support Environment Staffing Management and Leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
27 Feb 2009		Care and support Environment Staffing Management and Leadership	2 - Weak 2 - Weak 3 - Adequate 2 - Weak
22 Dec 2008		Care and support Environment Staffing Management and Leadership	1 - Unsatisfactory 2 - Weak 3 - Adequate 1 - Unsatisfactory
6 Nov 2008		Care and support Environment Staffing Management and Leadership	1 - Unsatisfactory 2 - Weak 3 - Adequate 1 - Unsatisfactory
12 Jun 2008		Care and support Environment Staffing Management and Leadership	2 - Weak 3 - Adequate 3 - Adequate 2 - Weak

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

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