

Care service inspection report

Full inspection

Saltire Neighbourhood Centre Support Service

Scholars Gate
Quarry Road, Whitehills
East Kilbride
Glasgow

Service provided by: South Lanarkshire Council

Service provider number: SP2003003481

Care service number: CS2003001345

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

Contact Us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

www.careinspectorate.com

 [@careinspect](https://twitter.com/careinspect)

Summary

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

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

We gave the service these grades

Quality of care and support	5	Very Good
Quality of environment	5	Very Good
Quality of staffing	5	Very Good
Quality of management and leadership	5	Very Good

What the service does well

We found that the service uses a variety of methods to engage with service users and relatives to hear their views on key aspects of the service.

The service is provided from a clean, comfortable and relaxed environment.

The service is good at actively identifying good practice material, utilising the same and encouraging staff to apply to their day to day work.

The management team are responsive to issues raised and we concluded that the service is well managed.

What the service could do better

Support plans should be developed further with key assessment completed in full.

Minutes of meetings with carers (relatives) should reflect progress made between each meeting.

Relatives or service user representatives should sign if they are in agreement with review minutes.

Training and development plans for staff should be fully completed and include training sessions on the use of MUST assessment tool and reflect strategy for staff obtaining SVQ qualifications.

What the service has done since the last inspection

The service has met the recommendation made at the previous inspection in connection with staff meetings.

The service has continued to build on good practices and introduced additional quality assurance systems to help identify areas of improvement.

Conclusion

Based upon the findings of the inspection we have concluded that there are very good standards of care and support provided to service users and their carer's, by a motivated staff group, overseen by an experienced and committed management team.

1 About the service we inspected

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

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

The Saltire centre is a modern, purpose built, day care facility for older adults. It is part of South Lanarkshire Council's Social Work Resources system of care for older adults and shares a management team with Meldrum House and the Ashley Grant centre. Saltire centre is identified as the unit which caters for service users who have dementia.

The service is provided between 9:00 and 5:00 pm seven days a week. Service Users are picked up from and returned to home in the unit's own transport. Older adults attending the centre are offered a choice of activities, outings and lunch. The Saltire Centre also provides support for personal care.

Recommendations

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

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

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 0345 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a 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

An unannounced inspection was carried out to the service by one Inspector on 14 & 15 July 15. Over the course of the inspection we carried out the following activities:

- Speaking with eight service users and observing staff interactions
- Having a face to face discussion with a relative and telephone interview with another relative
- Reviewing the content of 17 completed and returned Care Inspectorate questionnaires from service users and relatives
- Interview with the Manager, Senior Day Care Worker, Day Care Coordinator, three Day Care Workers and Housekeeper
- Examining the content of three support plans and associated assessments
- Carrying out an environmental inspection of the premises
- Looking at records associated with environmental checks and maintenance
- Checking staff training and development records
- Reading minutes of meetings between service users & staff and between the management team and staff
- Examining the quality assurance systems and audits carried out by the service.

We shared our findings with the registered Manager and Senior Day Care Worker at the end of the inspection. Both of which accepted the findings and associated grades awarded as being an accurate reflection of current performance.

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.firescotland.gov.uk

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 service provider. We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each heading that we grade them under.

Taking the views of people using the care service into account

We observed how service users responded to supports offered by staff and could see that they enjoyed attending the centre and participating in activities offered.

Taking carers' views into account

These are reflected throughout the quality statements.

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

Our examination of records, discussion with service users, staff and the Manager supported that the service performs at a very good level in this quality statement.

We found that the service uses a variety methods to hear the views of people who use the service.

We looked at a survey which had recently been carried out with relatives of the service users who attend the service. We found that there were four key themes looked at as part of the survey which mirror the quality themes that the Care Inspectorate looks at on inspections. At the point of inspection the service were in the process of collating responses. We suggest that the service uses this information to inform future self assessment submitted to the Care Inspectorate.

We found that there was a record of meetings which took place and associated minutes reflected the content of meetings. We found that meetings with carers (relatives) had resulted in the formulation of action plans which detail how the service will respond to make improvements or changes. Examples include making changes to the times that meetings occur to promote maximum attendance. We also found that the service had arranged to have guest speakers attend to help inform and act as additional information source/ support. We found that the service had acted to help carers overcoming some difficulties in accessing services to help meet the health needs of service users e.g. arranging for an optician to visit the service user.

We looked at information relating to the work carried out by the Focus Group - we understood two of the current service users who attend day-care are members of this group. The Focus Group has been active in capturing feedback on aspects of the service as well as promoting national events.

The service uses a variety of medium in an attempt to capture feedback on the service. We saw that a wish tree had been introduced and we found examples of responses and supports provided to address the requests made.

We looked at the welcome pack and concluded that there is an appropriate and useful range of information provided. This details what service users and carers can expect to receive from the service.

The service has introduced a daily diary which accompanies each service user when they attend the service. We regarded this as a useful method for keeping carers up to date with what their loved one was involved in when they attended the day care service.

Feedback from the relatives that we spoke with confirmed that there are good communications between staff from the service and that their views are taken into account as far as the supports provided.

The service uses a range of medium to involve service users in the inspection process including viewing the dvd produced by the Care Inspectorate on the grading system.

Areas for improvement

We noted that an organisation wide Day Care Consultation was carried out in the previous two years (summer 13 and summer 14). The leaflet detailing the findings of the survey however there were not always clear outcomes reflecting how the organisation responded to changes in key areas of performance. We concluded that this is an area that the organisation should develop further.

However, we found that there were overall high levels of satisfaction in a number of areas including the quality of staff.

Through examining minutes of meetings we concluded further improvements could be made by reflecting progress made from one meeting to the next or providing details as to why specific actions had not been carried out. We shared examples at the feedback session.

Grade

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

Our examination of records, discussion with service users, staff and the Manager supported that the service performs at a very good level in this quality statement.

We examined three support plans and associated assessments. We found that the service has involved relatives and or representatives with review meetings. Support plans contained useful information on social history, interests and preferences of each service user. It was evident that staff within the service had worked with service users and their carers when formulating support plans.

We observed the meal time experience and found that staff had created a relaxing, homely environment. Staff provided an appropriate level of support and encouragement to each service user. We could see that they offered choice in terms of food and drink options and physically showed service users what options were available to encourage decision making. Staff demonstrated a good knowledge of what foods may tempt service users to eat when they exhibited poor appetite.

We found a good range of activities offered to service users over the course of the inspection. We observed service users participating in a bakery group and also a sing song. We found that activities are offered within the service and also within the local community e.g. singing for the brain sessions and participating in going for gold sessions at a local care home. It is evident that the service uses good practice material to shape how they deliver support and care to service users.

We found staff were good at encouraging service users to maintain skills and abilities through offering an appropriate level of support. Staff have undertaken condition specific training which has helped give them insight as to how certain medical conditions may affect individual service users.

We heard a number of positive comments in relation to the outcomes for people who attend the service:

"My Mum seems to enjoy when she comes here. The change of scene and company are good for her. They asked my views about Mum's interests I believe that they try and offer activities linked to these when she goes to day care."

"***** (service user's name) enjoyed bowling before, I was informed that he took part in a competition which he enjoyed."

Areas for improvement

We identified that further improvements could be made with the assessments used to monitor the nutritional status of service users. We also identified some other areas that could be improved upon within support plan records. We shared examples at the feedback session which we suggest the service develops these further.

The organisation is currently looking at the way forward as far as supporting service users who have an identified support need in relation to medication. We will look at progress in this area in future inspections.

Signatures from relatives or any representative of service users should be reflected with minutes of review meeting to demonstrate agreement with content.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 5 - Very Good

Statement 2

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

Service Strengths

Our examination of records, environmental inspection, discussion with service users, staff and the Manager supported that the service performs at a very good level in this quality statement.

We carried out an inspection of the environment. We noted that the unit was clean, comfortable and well maintained. Staff work hard at ensuring that a warm and welcoming environment is created.

The access was found to be secure and a signing in system is used for visitors. This means that staff are able to monitor people within the building at any time for fire safety and security purposes.

The internal environment has a number of signs and graphics to help service users orientate themselves to the building. We noted that call systems were in place to help service users alert staff when they need assistance.

We checked and found equipment such as mobile hoists (used for moving and handling people who are unable to weight bear) were being serviced as per legislative requirements.

Contenance aids are discreetly stored and the storage follows good infection control practices. We also found that personal protective equipment such as disposable gloves and aprons were readily available for staff use and were being used in line with good infection control practices.

We looked at food handling practices and noted that the service had been awarded a "Pass" Food Standard Agency certificate which supports that the storage, handling and serving of food adhere to safe practice. We checked and found that meals brought into the unit are heated and temperatures recorded by staff to ensure they are within safe limits. The above supports that staff are aware of the importance of adhering to good safe handling procedures.

There have been changes made to the arrangements to having repairs carried out within the service. Staff now report any repairs to the Housing and Technical services of South Lanarkshire Council. We sampled records and found that service had responded quickly to requests from the service. Feedback from staff supported that this was accurate.

We looked at the work place audit carried out in February 15. The associated risk level indicated was a low level and we noted that an associated action plan had been devised and actions completed by the Senior Day Care Worker within the same month of production. We found no obvious hazards when we carried out our environmental inspection.

Staff within the service continue to carry out weekly and monthly checks on the environment and associated records are held within the service. These records include checks carried out to the water system.

Accident and incident records (including violent incident records) were in place and we checked the content. It was evident that these were completed to a good standard and reflected actions that had been taken post event to reduce the likelihood of recurrence.

Winter strategy and contingency plan was in place (dated June 15). This details what actions would be taken in the event that the service was unable to operate or if service users were unable to attend the service.

Areas for improvement

We noted that travel plans formulated for service users contained no dates and it was difficult to see how current these may be. We shared this information at the feedback session with an expectation that they be dated or amended with new dates.

When we carried out the environmental inspection we highlighted that taps within the toilets were very difficult to operate and recommend that the service ensure that this area is addressed.

Grade

5 - Very 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

Our examination of records, environmental inspection, discussion with service users, staff and the Manager supported that the service performs at a very good level in this quality statement.

We found supporting evidence that the staff and management have involved service users with the on-going development and improvement of the environment e.g. signage purchased and trialling with service users to check if they understand what it means and if it has been fitted at the correct height?

We found that the building that the service is delivered is attractive, offers a choice of different rooms and creates a calm environment.

The enclosed garden is overall well maintained and is regarded as a real asset for service users to use when the weather permits.

There was a good range of group activities offered over the course of the inspection including baking cookies, singing session as well as individual activities including sensory stimulation using a feely bag. We observed that service users engaged well with the activities and it was evident that they enjoyed participating in the same.

We found that there were photographs on display within the unit which showed a range of activities and events that service users had been involved in through the preceding months. These are good way of engaging with service users and can be used as talking points as well as a method of sharing with relatives what their loved ones activities that they had been involved in.

We heard of the links that had been developed by staff within the unit and local amenities including a local restaurant and bar. This means that additional resources are made available to meet the social and recreational needs of people who use the service.

Areas for improvement

The service should continue with the very good practices.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 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

Based upon the findings of the central recruitment check the service performs at a very good level in this quality statement.

Care Inspectorate Safer Recruitment Exercise

Three Care Inspectors visited South Lanarkshire Council (SLC) Headquarters on 15-7-2015 between 14.00 pm to 16.45 pm. and checked SLC Recruitment and Selection Policy and Procedures as part of the Care Inspectorate Safer Recruitment exercise. We looked at a selection of staff recruitment files covering services for adults and older people throughout their registered service in Lanarkshire

We found the following:

Recruitment Policy

We found that SLC had robust systems in place to ensure safe recruitment practices were followed through the implementation of SLC Recruitment and Selection Policy and Procedures.

Application Procedure

We found a fully completed application form in all of the files we sampled.

Understanding The Service Aims

We found good evidence that SLC provides staff with appropriate information on SLC aims and objectives.

References

We found that two references were in place one of which was from the previous employer.

Physical and Mental Fitness

A confidential health questionnaire and declaration was in place in all the files we sampled.

Necessary Skills

We found that this varied in the files that we sampled. The quality and detail of the interview records that we sampled varied with some hand written notes and some consisted of a checklist.

We suggest that the process of how interviews are recorded should be reviewed to ensure consistency and quality.

Protection of Vulnerable (PVG) Groups Check

It was good to see PVG and Disclosure checks were in place.

However, we found photocopies of disclosures in files which this is contrary to PVG procedure for the storage of these documents.

This should be addressed.

Register Check Recording

We found that appropriate register checks were taking place. e.g SSSC, NMC

Assessment

Overall, we found the SLC recruitment practices to be performing at a very good level.

Areas for improvement

Continue with very good practices.

Grade

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

Our examination of records, discussion with service users, staff and the Manager supported that the service performs at a good level in this quality statement.

We interviewed a range of staff when we carried out the inspection. Feedback from staff interviews indicated that there are positive working relationships, overall good training opportunities, staff are of the opinion that they are well supported by the management team, they have opportunities to be involved with the on-going development of the service, are encouraged to identify best practice material and consider how it can be used to improve the service.

We found in practice that best practice material is available within the service and is being used to shape the support offered to service users. Examples include publications from Mental Welfare Commission of Scotland, Standards of Dementia Care in Scotland and promoting good nutrition and hydration for service users produced by Care Inspectorate.

We looked at records associated with staff training and development and found that there were records in place relating to each staff member. The service was in the process of having transferred into a typed format. The training records reflected that staff had undertaken Promoting Excellence training skilled level (training to help staff meet the needs of people with dementia). We also found that all Resource Managers and Senior Day Care Workers had completed Psychological Interventions in response to Stress & Distress in Dementia 2 day workshop training and that there are plans to identify a staff member to take on a "champion" role for rolling this training out to colleagues and for monitoring practice to ensure correct implementation.

We observed that staff were skilled at responding to residents who due to the nature of their condition exhibit distress and stress reactions. We observed staff respond calmly and appropriately which had the resulting outcome of calming a service user who becomes agitated.

We received information forwarded after the visit which indicated that 57% of staff working within the service had obtained SVQ qualifications. This is a recognised qualification necessary for registration with Scottish Social Services Council (SSSC). The SSSC is a body which responsible for the registration and regulation of staff working within social care services.

We looked at minutes of meetings with staff. We sampled minutes of meetings with day care workers, coordinator and senior day care worker carried out in June 15. It was evident that the meeting was used to help keep staff up to date with policies and developments within the service/organisation. The meeting was also used to communicate expectations in relation to carry out day to day practice and offered staff an opportunity to communicate any views or ideas.

We also looked at Senior Day Care Worker meeting minutes of May 15 and records of Senior Peer Group meetings. We found that these meetings are being used to discuss practices, identify improvements and encourage consistencies of approach. We concluded that these are useful methods for maintaining and improving standards.

We sampled three staff files with a focus on staff supervision and development. We found that there are supervision contracts in place, regular planned supervision sessions which were found to be very supportive to each staff member. We found that the sessions were used to identify on-going training needs as well as identifying specific roles for the development & improvement of the service.

Areas for improvement

When we sampled staff files we noted that there is no record of induction training undertaken by each staff member held within the service as the induction is carried out at a corporate level. This makes it difficult to see what induction training has been completed by each staff member. We believe it would be useful to have a copy of the associated records held at service level.

We also noted that whilst individual training and development needs had been identified these did not always link into the training plan for the service. We expect that this area should be addressed by the service. The service should also develop a clear strategy for staff to obtain SVQ qualifications and include training on using and completing the MUST tool.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

Statement 1

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

Service Strengths

Our examination of records, discussion with service users, staff and the Manager supported that the service performs at a good level in this quality statement.

See "strengths" in quality theme 1, statement 1 and comments in connection with meetings with service users and relatives.

Surveys carried out by the service are used to obtain feedback on the quality of management and leadership within the service.

We received a number of positive comments in relation to how the service is managed from the relatives that we spoke with:

"I feel that there is a two way relationship between myself and management & staff who work within the service."

"We have respect for each other (relative with management team & staff)."

Areas for improvement

Continue with very good practices.

Grade

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

Our examination of records, discussion with service users, staff and the Manager supported that the service performs at a good level in this quality statement.

There have been no complaints received by the service or the Care Inspectorate since the previous inspection. The service has a complaints procedure which provides information about how people can raise complaints or with the Care Inspectorate.

Monthly reports are produced and we found through looking at these that there is a structured approach used which monitors key aspects of the service including care plans, transport, incidents & accidents, environment, staffing and staff training. We recognise that this system is reasonably new however, can see the benefit as far as providing an overview for management and help identify areas of improvement and priorities of the service.

We found that the management team were good at involving staff with the on-going development of the service. This includes how supports are delivered, helping with the on-going training & development of colleagues and making improvements to the environment.

The organisation has obtained Customer Service Excellence award for day care. This resulted from external assessment and through the implementation of a quality assurance tool. We were informed that a yearly assessment is carried out and that there is a rolling programme of audit and assessment planned for the next three years.

Areas for improvement

Based upon our findings we concluded that support plan audits need to be developed. These should be readily accessible for staff, provide clear details of areas of improvement, by whom, detail timescales for achievement and have a system which re-checks necessary actions have been carried out.

We were informed at the feedback session that there will be a greater focus on this area as part of the monthly reports produced on the service.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

1. There was 1 recommendation made at the previous inspection:

The provider should ensure that staff meetings take place on a regular and frequent basis.

National Care Standards Support Services Standard 2 - Management and Staffing Arrangements

This recommendation was made on 03 September 2012

See comments under "strengths" in quality theme 3, statement 3. Based upon our findings the recommendation has been met.

6 Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

7 Enforcements

We have taken no enforcement action against this care service since the last inspection.

8 Additional Information

There is no additional information.

9 Inspection and grading history

Date	Type	Gradings	
3 Sep 2012	Unannounced	Care and support	5 - Very Good
		Environment	5 - Very Good
		Staffing	4 - Good
		Management and Leadership	5 - Very Good
23 Sep 2010	Announced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	Not Assessed
12 Aug 2009	Announced	Care and support	5 - Very Good
		Environment	5 - Very Good
		Staffing	4 - Good
		Management and Leadership	5 - Very Good
22 Jan 2009	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and Leadership	4 - Good

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Contact Us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

www.careinspectorate.com

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Tha am foillseachadh seo ri fhaighinn ann an cruthannan is c?nain eile ma nithear iarrtas.

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یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

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

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

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.