

Care service inspection report

Full inspection

Portland Street Care Home Service

41 Portland Street
Edinburgh



HAPPY TO TRANSLATE

Service provided by: Dean & Cauvin Trust

Service provider number: SP2003002647

Care service number: CS2003011204

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.

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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	4	Good
Quality of environment	4	Good
Quality of staffing	5	Very Good
Quality of management and leadership	4	Good

What the service does well

The service has implemented a range of systems to ensure young people, their families and visiting professionals can give their views.

Activities are planned to suit individual interests and young people were involved in a range of community groups and events. This created a sense of normality to young people's daily routines.

The service has established good links with external professionals and is committed to supporting a positive experience for young people who live at Portland Street.

What the service could do better

The service need to continue to build on areas in relation to the environment to ensure it meets the needs of the young people. They should review the impact of the independent flat and how this can add to the diverse range of services the organisation aims to provide.

What the service has done since the last inspection

We encourage the service to build on the recent developments seen at this inspection and to continue to adhere to good practice guidance and legislation to inform future developments and processes including submitting information to the Care Inspectorate as requested. We will continue to work with the Manager to support progress and developments.

Conclusion

Overall we have seen improvements across service delivery at this inspection. We encourage the service to continue to take recent initiatives forward to ensure improved outcomes are offered for the young people who live there.

1 About the service we inspected

Portland Street is a registered care home providing a service to five young people up to the age of 21. It is one of two residential resources for young people provided by The Dean and Cauvin Trust.

The home is located in a terraced row, in a residential area in the north of Edinburgh. It is in close proximity to local amenities and public transport. The building has four floors, including a basement with separate access. It has a spacious enclosed garden to the rear and a small garden to the front.

The Trust have stated aims, objectives and functions which are as follows:-

"To enable young people to the age of 21 to prepare for living independently: to provide accommodation and professionally qualified staff and funding to achieve this, and to assist mainly young people who are, or have been, looked after".

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 4 - Good

Quality of environment - Grade 4 - Good

Quality of staffing - Grade 5 - Very Good

Quality of management and leadership - Grade 4 - Good

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

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0345 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

We wrote this report following an unannounced inspection. This was carried out by a Care Inspectorate Inspector. The inspection took place on 1 & 2 December 2015. We gave feedback to the Manager at the end of the second visit.

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

We met with two young people on placement during this inspection. We spent time in the service during the day and in the evening and we joined young people at meal times during our visits.

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

We spoke with:

- two young people using the service
- the Manager
- the Chief Executive
- four Social Care workers
- two Local Authority Social Workers
- two external professionals

We looked at:

- information, including the service plan for how they will involve people and how they can have their say including feedback from external professionals
- minutes from staff meetings
- accidents & incidents
- care & support plans
- questionnaires and feedback
- individual information recorded about young people
- the environment and equipment
- staff training records
- staff recruitment information
- health and safety records
- fire safety information

We took all of the above evidence into consideration when writing this report. We also took into account the Public Services Reform (Scotland) Act 2010 and its associated statutory instruments, the National Care Standards and the Scottish Social Services Council (SSSC) Codes of Practice for Social Service Workers and Employers.

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

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

The service should continue to identify their own areas for improvement through the self evaluation process. They should consider how they develop the information submitted to us in their self assessment.

Taking the views of people using the care service into account

We spoke with two young people during the inspection. Both of the young people told us they were happy living in the service. Individual comments included:

"I feel safe enough living here".

"I get on okay with all of the staff".

"The other young people living here are okay".

"Staff and the Manager are good, they care about what you think".

"The house is nice and my room is big".

"The location of the house is great for me, it's near my family".

Taking carers' views into account

We did not speak to any parent's or carers during this inspection. We discussed the appropriateness of this due to the current young people's circumstances with the manager.

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: 4 - 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

This statement was examined as the participation of children and young people in their care and support is very important to achieving good outcomes for them. In 2015-16 all services are being inspected against this statement.

We found that staff and young people interacted well and the young person we met approached the staff team with ease. We saw that there was a lot of discussion within the setting about choice and the young people were being encouraged in a way which supported their decision making.

We saw young people kept in regular touch with staff and staff checked on their well-being when they were out with the house. The young people we spoke with told us this made them feel cared for and that staff were concerned when they hadn't heard from the young people.

Staff listened to the young people about day to day issues and reassured them that wider decisions which needed more discussion would be addressed. We found the young people to be confident and articulate in expressing their thoughts and feelings about living at Portland Street.

We saw that young people's personal plans have been progressed and now take better account their individual needs, routines and their interests. This meant that the young people were clear about how staff would support them and could give their views directly to staff involved in their care.

We saw from the files that plans were being regularly reviewed and developed and that the young people were being consulted throughout this process. We were able to read their comments and suggestions and they were given the opportunity to read their files and comment whenever they wanted.

We found that the staff team met on a regular basis. We sampled minutes from their meetings and found that staff were able to contribute to the agenda and discussions were full and took account of the service improvement agenda.

Team meetings also took account of individual young people, developments and responsibilities. This meant that young people felt staff listened to what they said and took action to make things happen. Alternate dates have now been set to allow staff to also discuss wider practice issues on a regular basis.

Young people were offered the chance to attend regular house meetings and focus groups. Although attendance was dependent on young people's schedules and plans. We found that when this had been happening that they offered the young people an opportunity to discuss and contribute to the wider decisions within the organisation.

Young people's views were considered around staffing and used to inform supervision and recruitment. Young people completed exit questionnaires and the information gathered was used to inform developments in service delivery.

We received a range of feedback from external professionals and the Manager encouraged the young people to complete the Care Quality Questionnaires we issue prior to inspection.

Overall we found the service provided very good opportunities to get involved in assessing and improving the quality of care and support.

Areas for improvement

We have made no specific recommendations for further improvement and encourage the service to continue to develop and maintain a consistent approach to participation by service users and their families which they have achieved at this inspection.

We spoke to the Manager about how they could better record information when they give feedback to young people when they share their views. This would better ensure all young people are aware of the action the service has taken.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Statement 2

“We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential.”

Service strengths

This statement was examined as we are looking at the positive outcomes for children and young people in this inspecting year. Our focus under this statement is to assess the levels of engagement young people have with education, training, employment, careers advice and how they are supported by the service to attain positive opportunities and experiences. We are also concerned with their wider achievements and positive progress.

We found young people had opportunities for developing skills for work and to attend work placements and college. Staff worked well with other agencies to develop and implement a joined-up approach to supporting young people. This included supporting transport arrangements, engaging with the organisations transition service, encouraging attendance and sharing information. This level of effective communication and a shared understanding is a crucial factor in supporting and safeguarding young people.

There was a structure to daily routines and young people were supported to engage as independently as possible in their identified daily plans. Staff offered appropriate help where required and they encouraged levels of support suitable to each young person's needs.

Person centred care plans and monthly summaries demonstrated an understanding of the Scottish Government's Getting it right for every child (GIRFEC) practice model. Together with risk assessments, the care plans provided a picture of young people in a way which enabled a consistent approach by all staff. Young people's care plans were regularly reviewed at care planning meetings and Looked After Children's reviews.

The service had developed a clear assessment process and gathered information quickly on young people in order to guide their practice. Early reviews were held with all those involved to plan the program of work required.

The service reported concerns about young people's welfare to the relevant professionals so that decisions about their safety could be made jointly. Where concerns were such the service involved the police and reported information accordingly. Such as when a young person went missing or was late back.

There was an established protocol in place with the Police which detailed clear guidelines and procedures in managing any concerns regarding young people whereabouts. Regular communication took place if a young person location was unknown.

Young people had access to primary healthcare services and support from GP's, Dentists and Opticians and referrals were made to specialist support services where necessary. This meant that young people's health needs were being met effectively. Young people could access these services independently or with staff support.

Young people were learning where appropriate about healthy sexual relationships and were encouraged to keep themselves safe. We saw the service operated in a non-judgemental way and treated everyone as equal regardless of their likes, dislikes or sexual orientation.

We saw how the service was establishing working relationships with a range of services such as; mental health and substance misuse services to provide individual interventions and support for young people and training for staff on areas such as drugs, alcohol and psychoactive substances (legal highs).

The service is proactive in applying for funding from local organisations with the view to improving outcomes for young people in relation to better housing opportunities and securing driving lessons.

Overall we found the service provided a range of opportunities for young people

to be supported to achieve their potential and young people were encouraged to be involved in these processes.

Areas for improvement

Whilst we saw improvements in this area in relation to the positive care and support being offered to the young people we recognise that some of the changes were fairly new. We encourage the service to continue to progress these areas to ensure young people continue to benefit from a more nurturing environment.

We discussed with the Manager and the Chief Executive the option of reviewing their behaviour management training to ensure this continues to meet the needs of the young people living there. We will continue to monitor this through our on-going inspection activity.

Although we saw that clear procedures with this. We discussed this with where in place with the Police to manage any missing person's incidents we encourage the service to continue to review their own practice in relation to the risk associated the Manager and the Chief Executive.

Grade

4 - Good

Number of requirements - 0

Number of recommendations - 0

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

This statement was examined after a review of; the self evaluation returned to the Care Inspectorate, the previous inspection report, service user questionnaires, external professionals feedback and any notifications and/or complaints we may have received.

From discussion with the young people, staff and the Manager and from our observations during this inspection we found that the service was achieving good standards for this statement.

The young people told us that they felt safe living at Portland Street and informed us that they felt confident that the service offered them safety and protection. All young people who completed our questionnaires told us they could lock their door if they wanted and could keep their own belongings safe.

We spoke with the young people during the inspection process. The young people were aware about their own responsibilities for keeping themselves safe and were aware that this can often conflict with the responsibilities of the staff team. We found that in general young people were confident about the service and what they could expect.

Risk assessments were in place for the premises and we saw that these were being reviewed. These documents helped staff to identify possible hazards and supported them to manage and minimise potential risks to young people. All of the young people were aware of what was expected of them if there was an emergency in the house.

We found the premises to be secure and the entrance was monitored. We were greeted at the front door and introduced to staff and young people as a matter of course. This ensured that staff and young people knew who was in the house and why.

The service had a child protection policy in place and staff were aware of what was expected of them in relation to this. We saw staff responding to situations appropriately where required.

We found that training had been provided to staff in relation to policies and procedures and staff told us that they felt confident in relation to what the service, and the Local Authority expected of them in relation to child protection.

Areas for improvement

The service should continue to develop the use of space within the house to ensure it meets the needs of the young people who live there.

We also discussed with the management team how confidential information kept in the office could be more safely stored out of the way of young people. This was in the light of the recent organisational development of an independent flat now attached to the premises.

Grade

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

This statement was examined after a review of; the self evaluation returned to the Care Inspectorate, the previous inspection report, service user questionnaires, external professional's feedback and any notifications and complaints we may have received.

The service reached a good standard overall in this area. We concluded this following discussion with staff and young people and observation of the environment, including two young people's rooms.

The main living room was pleasant and homely, with modern, comfortable furniture and plenty of natural light, improved by easy access to the kitchen and dining area.

The communal areas were equipped with some leisure and entertainment equipment for the young people to use. We saw young people were generally relaxed in their environment and they told us the communal areas were comfortable.

The garden was secure and provided privacy and it offered a place where young people could sit outside. Young people told us they went outside often in the nice weather.

Young people were able to personalise their rooms with their chosen bedding and personal items. We saw how young people had personalised their rooms to their own liking. Young people we spoke with showed us their rooms and we could see these were individual to their interests.

Staff had taken care to limit the amount of paperwork on walls throughout the home, providing essential items in the office area. Young people knew how to access information and said staff share with them information on how they could raise a concern.

The daily observation of staff on maintenance issues meant that minor issues were being picked up and dealt with promptly. We saw how any identified repairs or damages were dealt with through the Provider's maintenance systems.

Young people told us they liked the location of the house as they had good access to local resources and amenities and were near to the main bus routes and public transport.

Areas for improvement

The service should continue to work with all the young people to encourage an ethos of respect. This will ensure all young people can live in a home that is valued and where people take account of their immediate surroundings. The service must continue to foster and promote an environment where all who live there treat each other and their belongings with care.

Grade

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

This statement was examined after a review of; the self evaluation returned to the Care Inspectorate, the previous inspection report, service user and staff questionnaires, placing agencies and external professional's feedback any notifications and complaints we may have received.

We made a visit to the organisation on 25 June 2015 to carry out a safer recruitment evaluation for this area. We spoke with the CEO and the Administrator responsible for recruitment files.

We viewed a selection of staff files across the organisation including newly appointed employees to assess this statement and took account of the organisations policy and procedures, staff information and induction process.

We confirmed that recruitment procedures were followed in accordance with best practice guidance, legislation and the Code of Practice set out by the Scottish Social Services Council (SSSC).

The service based their approach following these documents and developed their policies, procedures and guidance on legislative requirements. Examples of appropriate data protection and confidentiality procedures confirmed safe recruitment practices were adhered to.

The induction for new staff also included sessions on values in residential child care, child & adult protection, safe care and behaviour management techniques. These provide the cultural direction and ethical basis for working with young people and families and reflected key principles.

From discussion with staff and the Manager and from our observations during this inspection we found that the service was achieving very good standards for this statement.

Areas for improvement

The Provider should continue to build on the progress made in this area since the last inspection. They should consider introducing a check list for the recruitment process to ensure that it can be seen at a glance when new employees are ready to take up direct work with young people.

This will ensure a safe environment for young people to stay is maintain when recruiting and employing staff and all staff employed to work with young people have met the necessary conditions for employment in this area of work.

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

This statement was examined after a review of; the self evaluation returned to the Care Inspectorate, the previous inspection report, service user and staff questionnaires and any notifications we may have received.

The manager confirmed that all staff were registered with the SSSC and we did a random check to confirm this. Registration with the SSSC encourages a commitment to staff's own professional development and a commitment to the SSSC codes of practice.

Staff had been made aware of all policies and procedures and had been given an induction programme on joining the service. This helped them to familiarise themselves with up to date changes and service information.

We found that staff were supported to access regular training in relation to their role. Mandatory training is provided and carried out on a rolling program. We spoke with staff who told us that they felt more confident in approaching management to discuss training and development opportunities and that if they wished to access a specific training resource that this would be considered and accommodated, where possible.

Training for staff included managing challenging behaviour, health and safety, substance misuse (legal highs) and Sexual Exploitation. The aim of training was to provide staff with a good understanding of the issues affecting young people and the systems in place to support their development.

Staff were supported through close working and daily contact with the Manager and acting Senior Care Worker. Staff met regularly to discuss any issues within the team and also used the daily handovers and debriefs as methods of sharing information.

Support for staff is an area we feel that has been developed since our last visit and formal support is now being better evidenced. This has helped staff to be more professional in their approach and individual development.

The staff members who responded to our Quality Standards Questionnaires told us they were happy with the level of training being provided and that their training needs in relation to their job were being met.

We found the staff team members that we spoke to were motivated and the atmosphere at Portland Street to be more welcoming. Staff were encouraging young people to feel a better sense of belonging.

Areas for improvement

We asked the Manager to review their behaviour management training to ensure this continues to meet the needs of the young people living there.

We spoke to the Manager about how they could build on the improvements in this area and continue to extend the roles and responsibilities of staff to support their professional development opportunities. We will continue to monitor this through our inspection activity.

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: 4 - Good

Statement 3

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

Service strengths

This statement was examined after a review of; the self evaluation returned to the Care Inspectorate, the previous inspection report, service user and staff questionnaires, placing agencies and external professional's feedback any notifications and complaints we may have received.

We saw that staff had an increased voice within discussions about care and could share their views more openly and confidently. Staff we spoke to could direct us to the information we asked for and could tell us about the wider developments and changes.

There had been consultation with staff about policies and procedures, the structure and purpose of team meetings and the service's aims and objectives. Staff felt more involved and included in the running of the service and more informed about the future developments and direction of the Provider.

New staff had a chance to give their views on the quality of the induction, so that it could be adapted accordingly. This meant people understood what was important for new staff starting or moving to Portland Street.

Staff all had designated responsibilities for different areas, including fire safety and medication. Staff we spoke to confirmed that the Manager asked for and valued their views and contributions.

Promoted posts were open to internal staff and acting up positions were being suitably managed.

Sharing responsibilities in this way helps staff to develop a sense of ownership for the quality of the service and to recognise the importance of maintaining good systems.

Areas for improvement

The service should continue to foster staff skills and experience and promote further opportunities that will enhance practice in relation to this statement. The Provider should ensure that training continues to respond to requirements as set out in their own objectives and that all mandatory/essential training is renewed when necessary.

Additional training and opportunities for staff should be developed to promote their leadership qualities and extend their responsibilities.

Grade

4 - 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

This statement was examined after a review of; the self evaluation returned to the Care Inspectorate, the previous inspection report, service user and staff questionnaires, agencies and external professional's feedback received and any notifications we may have received.

Some of the systems described in Quality Theme 1 Statement 1 also applied to this statement.

We could see that feedback from young people and external professionals contributed to developments in the service and were told how some changes were made based on their views.

The service had in place a range of audits and monitoring systems including; financial checks, budget monitoring, human resources records and property audits. The premises were subject to regular checks in terms of the safety and fitness for purpose. Regular reports were completed by the Manager to inform the Provider about the way the service was working to meet its stated aims.

The Provider carried out internal audits to monitor activity and health & safety reviews took place to check areas of safety for young people and staff.

The Manager was involved in most aspects of the daily running of the service and had a good overview of the young people's care. She attended meetings, activities and events and met with staff to discuss progress. This meant that young people knew the whole staff team well.

We observed professional, supportive relationships between the manager, staff and young people. Young people told us they could speak to the Manager at any time when she was in the service.

Staff meetings took place which provided the whole staff team the opportunity to be consulted and informed about all aspects of the service. The staff team could access all the necessary policies and procedures to inform practice.

The service was in the process of moving to a fully electronic recording format to support effective record keeping. This was at an early stage of development and we will assess this more fully at the next inspection.

Since the last inspection the service has given consideration to the development of a quality assurance system that underpins the review of the general running processes, such as local policies and procedures. This has allowed them to put in place systems that can assist in identifying and reviewing on-going development processes and the self-evaluation cycle.

The recent work that the service was involved in at an organisational level with a National initiative to improve residential child care and through care standards was a positive one. This has seen a focus on improvement in care across the organisation.

The Manager displayed a clearer sense of autonomy at this inspection in taking the service forward. This was supported by the Chief Executive and the Board and was enhanced by recent organisational change.

Areas for improvement

We encourage the Manager to build on the recent developments seen at this inspection and to continue to adhere to good practice guidance and legislation to inform future developments and processes including submitting information to the Care Inspectorate as requested. We will continue to work with the Manager to support progress and developments.

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

1. It is a requirement that the Provider ensures that a comprehensive programme of staff supervision and appraisal is in place for agency or temporary staff. Through this they should identify any staff training needs, support requirements or practice issues, and ensure there is a system to monitor the quality of the service provided.

This is to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/2010) regulation 4(1)(a)

Timescale for meeting this Requirement: 6 weeks from receipt of this report.

This requirement was made on 31 May 2015

A system is now in place for all staff.

Met - Within Timescales

2. It is a requirement that the Provider ensures that effective systems of audit and management overview are in place, to make sure that consistent high quality care is provided throughout the service. They must undertake a review of their systems of overview to ensure that they are effective. A written copy of this review and an action plan detailing how improvements to quality assurance will be implemented within given timescales, must be submitted to the Care Inspectorate.

This is in order to comply with: SSI (2011) 210 4(1)(a) - a regulation that a Provider must make proper provision for the health welfare and safety of service users.

Timescale for implementation: within 8 weeks of the date of issue of the this report

This requirement was made on 31 May 2015

A system is now in place.

Met - Within Timescales

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

Previous recommendations

There are no outstanding recommendations.

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	
6 Mar 2015	Unannounced	Care and support	4 - Good

		Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good
23 Jun 2014	Unannounced	Care and support Environment Staffing Management and Leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
24 Jul 2013	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good 4 - Good
20 Sep 2012	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good 5 - Very Good 4 - Good
31 May 2012	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 5 - Very Good 4 - Good
14 Feb 2012	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good Not Assessed 4 - Good
1 Jul 2011	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good 4 - Good 4 - Good
24 Sep 2010	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good Not Assessed Not Assessed

21 Jan 2010	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 5 - Very Good Not Assessed
3 Sep 2009	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 4 - Good 5 - Very Good 5 - Very Good
5 Mar 2009	Unannounced	Care and support Environment Staffing Management and Leadership	Not Assessed 4 - Good 4 - Good 4 - Good
30 Oct 2008	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 4 - Good 4 - Good 4 - Good

To find out more

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

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

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

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