

DUNDEE CITY COUNCIL

REPORT TO: SOCIAL WORK AND HEALTH COMMITTEE - 6TH DECEMBER 2010

REPORT ON: THE ANNOUNCED INSPECTION OF OUT AND ABOUT - SUPPORT SERVICE (WITHOUT CARE AT HOME) BY THE CARE COMMISSION ON 08 SEPTEMBER 2010.

REPORT BY: DIRECTOR OF SOCIAL WORK

REPORT NO: 693 - 2010

1.0 PURPOSE OF REPORT

1.1 The purpose of this report is to report on the findings of the announced inspection by the Care Commission of the Out and About Service. A copy of the Care Commission Inspection Report is attached to this report.

2.0 RECOMMENDATIONS

2.1 It is recommended that the Social Work and Health Committee note the contents of this report.

3.0 FINANCIAL IMPLICATIONS

3.1 None

4.0 MAIN TEXT

4.1 Out and About was inspected on 08 September 2010 by the Care Commission. This was an announced inspection. The report on the findings of this visit was published on 19 October 2010.

The Care Commission focus of inspection targeted the following themes;

- Quality of Care and Support (Statements 1.1 and 1.5)
- Quality of Management and Leadership (Statements 4.1 and 4.3)

Each quality theme is made up of several quality statements and this inspection focussed on four of these.

4.2 The Care Commission identified the following key strengths in the areas that were inspected in the Support Service, some of which are outlined below.

4.2.1 There was very good documentary evidence of frequent exchanges of communication between staff, relatives, carers and service users.

4.2.2 Staff stated that family members were frequently involved as appropriate. This meant any information relevant to supporting service users' wishes could be designed and delivered to be needs led and not service led.

4.2.3 There was very good evidence that the service involved carers in the annual review of the support plan. Staff commented that service users were encouraged to take part in assessing their service, be it their review, or the consultations, and it

was evidenced in records that they read to service users the minutes of review meetings and other consultations so they knew what had been decided.

- 4.2.4 There was good practice in how the service had independently consulted service users about their views of the quality of the care and support they received in the Customer Care survey of March 2008. The service and service users had received a detailed report of the outcomes of the consultation from the people who had carried out the consultations.
- 4.2.5 Service users stated they were involved in the daily informal planning of service provision.
- 4.2.6 A very good example of participation methods deployed by the service was that Service Plans were developed by service users and facilitated by staff to record a poster of 'what works and what doesn't work?'. This meant service users actively encouraged changes to the service provision on an ad hoc basis. This was normal practice.
- 4.2.7 The service plans evidenced that service users' independence was promoted in their daily choices and routines wherever possible. The plans also evidenced how the service promoted service users health and quality of life through meaningful activity and to follow individual interests based upon their personal preference and choice. Some examples of very good practice in supporting service users interests were:
- 4.2.8 Staff supported service users to maintain their interests and to visit friends outwith the service
- 4.2.9 Service users commented they were supported and encouraged by all the staff within the service at all times
- 4.2.10 Staff were found to be very knowledgeable about the individual support needs of the service users.
- 4.2.11 Service plans emphasised the positive choices service users wanted to make about their support. As a consequence of this, service users were able to take ownership of how they wanted staff to support them within the service. This led to service users maintaining their independence and the manager and staff could identify and make improvements to the service provision as necessary.
- 4.2.12 Staff were observed to have a relaxed, friendly and professional manner whilst interacting with service users and were seen to encourage service users to voice their opinions and to make informed choices.
- 4.2.13 The service had a very good practice of providing written accounts of the changes it had put in place as a result of the comments by service users and carers made in the meetings and questionnaires.
- 4.2.14 The service continues to provide opportunities for service users and carers to make comments for improvements on any part of the service. This creates a useful opportunity for service users and carers to raise any issues they might have regarding the service.
- 4.2.15 Service users and staff confirmed through discussion, that the manager of the service had an open door policy which promoted an ethos of good open communication between the service provision, service users and the relatives and other professionals.
- 4.2.16 The Care Commission Officer reviewed the grade for this statement and confirmed that the service had made improvement, warranting an increased grade.

- 4.2.17 There were very good outcomes for the service's approach to support staff through team work and individual supervision to improve practice and to ensure they were appropriately qualified and trained.
- 4.2.18 The staff were very motivated and enjoyed their work. There was a strong commitment to team working to ensure continuity and consistency of care and support for service users and to seek ways to improve the service. The effect of this was service users that spoke with the Care Commission Officer praised staff highly and commented positively about the quality of staff support received from the service.
- 4.2.19 Staff had access to core training for their work, such as detailed induction programme, first aid, food hygiene, Makaton and active support. Staff said they valued the use of the active support approach to involve service users in all aspects of their daily lives. Staff were supported to obtain vocational qualifications for future registration with the Scottish Social Services Council.
- 4.2.20 There were regular meetings for staff to co-ordinate working effectively as a team and ensure consistent support for service users. There were development sessions for the whole staff team to meet and learn together. For example, about support needs to share ideas and solutions for better outcomes for service users.
- 4.2.21 Staff had one to one supervision sessions which offered support for working with service users and identified training and development needs.
- 4.3 There are no requirements from the announced inspection.
- 4.4 There are no recommendations from the announced inspection.
- 4.5 Some of our areas for improvement and development are identified below:
- Develop a detailed Service Plan
 - Continue to progress with actions identified through the Staffing Review process and implement outcomes.
 - Increase opportunities to consult with service users and carers and be involved in service developments.
 - Ongoing development of processes and systems within the service.
 - Maximise service user opportunities to access community resources and activities.
 - Continue to develop the team by maximising training opportunities
- 4.6 **QUALITY INDICATORS**
- 4.6.1 The Care Commission examines four areas. These are the Quality of Care and Support, Quality of Environment, Quality of staffing and Quality of Management and Leadership.
- 4.6.2 The care commission uses a 6 point scale for performance.
- 6 – Excellent - exemplary, model of its type
5 – Very good - major strengths
4 – Good - important strengths but improve further
3 – Adequate - basic but adequate level
2 – Weak - important weaknesses
1 – Unsatisfactory - widespread weaknesses

4.6.3 Based on the findings of the announced inspection the Support Service (Without Care at Home) has been awarded the following grades:

Quality of Care and Support 5 - Very Good (previous grade 5)

Quality of Environment - not inspected (previous grade 5)

Quality of Staffing - not inspected (previous grade 5)

Quality of Management and Leadership 5 - Very Good (previous grade 4)

5.0 POLICY IMPLICATIONS

This report has been screened for any policy implications in respect of Sustainability, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management. There were no major issues.

5.1 An Equality Impact Assessment has been carried out and will be made available on the Council website <http://www.dundee.gov.uk/equanddiv/equimpact/>.

6.0 CONSULTATION

6.1 The Chief Executive, Depute Chief Executive (Support Services) and Director of Finance have been consulted in preparation of this report.

7.0 BACKGROUND PAPERS

7.1 The following Background Papers were relied upon in preparation of this Report: Inspection Report Dundee City Council - Out and About.

7.2 Equality Impact Assessment.

Alan G Baird
Social Work Department

Date: 24th November 2010



Inspection report

Out and About Support Service Without Care at Home

Wellgate Day Support
7 Ladywell Avenue
Dundee
DD1 2LA
01382 435340

Inspected by: (Care Commission officer)	Paul Clemson
Type of inspection:	Announced
Inspection completed on:	8 September 2010

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Service provided by:

Dundee City Council

Service provider number:

SP2003004034

Care service number:

CS2003037060

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

Paul Clemson

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Email enquiries@carecommission.com

Easy read summary of this inspection report

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

We can choose from six grades:



We gave the service these grades

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

Quality of Environment N/A

Quality of Staffing N/A

Quality of Management and Leadership  **5** Very Good

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

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

What the service does well

The service involved service users and relatives to a very good level in assessing and improving all parts of the quality of the service. Service users overall had very good choices in their daily lives and support to maintain their independence.

What the service could do better

The service should maintain its very good practice and aim to improve through reference to the excellent criteria in the grading scale.

What the service has done since the last inspection

The service had maintained its very good performance and evidenced very good practice for service users and relatives participation. The service continued to look for opportunities to make improvements.

Conclusion

The manager and staff demonstrated a commitment to development and improvement. Service users appeared very happy with the service. Staff demonstrated very good collaboration, team work, commitment and enthusiasm to developing best practice.

Who did this inspection

Lead Care Commission Officer

Paul Clemson

Other Care Commission Officers

Not Applicable

Lay Assessor

Not Applicable

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

About the Care Commission

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

Regulation involves:

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

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

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

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

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

The "Care services" area of our website also:

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

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

About the National Care Standards

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

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

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

You can get printed copies free from:

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

What is inspection?

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

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

When we inspect a service, typically we:

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

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

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

Our work must reflect the following laws and guidelines:

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

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

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

Recommendations, requirements and complaints

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

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.
- A requirement is a statement which sets out what is required of a care service to comply with the Act and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Commission.

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

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

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

How we decided what to inspect

Why we have different levels of inspection

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

How we decide the level of inspection

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

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

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

Our inspections take account of:

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

What is grading?

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

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

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

We grade each heading as follows:

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

We do not give one overall grade.

How grading works.

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

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

About the service we inspected

The Out and About Support Service is run by Dundee City Council Social Work Department and is currently registered to provide a day care service for 20 adults who have a learning disability. The service operates from three bases in Dundee - Douglas Sports Centre, Balgowan and the Fiveways Centre.

The service aims to work with and support adults who have a learning disability to have the life they choose for themselves. Support staff will meet with service users to discuss what they would like to happen and what the service can provide.

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

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

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

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

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

How we inspected this service

What level of inspection did we make this service

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

What activities did we undertake during the inspection

The report was written following an announced inspection on Wednesday 8 September 2010, by Care Commission officer Paul Clemson.

During the inspection, evidence was gathered from a number of sources including:

- (i) A review of a range of documentation including service users support plans.
- (ii) Observation of interactions between the staff and service users.
- (iii) Discussion with the manager, staff and service users attending the service.

Inspection Focus Areas (IFAs)

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

For 2010/11 we will focus on:

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

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

Fire safety issues

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

The annual return

We use annual returns (ARs) to:

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

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

Annual Return Received

Yes - Electronic

Comments on Self Assessment

A Self Assessment submitted by the service was completed with very comprehensive information about its processes to ensure very good quality outcomes for service users. The service had planned areas for future development. For improved grades the service should focus on the outcomes and benefits of its processes for service users, carers and staff.

Taking the views of people using the care service into account

There was a very good, sociable atmosphere in the service. We observed that service users were relaxed and comfortable with staff. The staff were very respectful of residents and their needs.

Taking carers' views into account

At the time of writing this report, none of the issued Care Commission questionnaires had been returned.

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

This service was found to have very good performance in relation to this statement.

There was very good documentary evidence of frequent exchanges of communication between staff, relatives, carers and service users.

Staff stated that family members were frequently involved as appropriate. This meant any information relevant to supporting service users wishes could be designed and delivered to be needs led and not service led.

There was very good evidence that the service involved carers in the annual review of the support plan. Staff commented that service users were encouraged to take part in assessing their service, be it their review, or the consultations, and it was evidenced in records that they read to service users the minutes of review meetings and other consultations so they knew what had been decided.

There was good practice in how the service had independently consulted service users about their views of the quality of the care and support they received in the Customer Care survey in March 2008. The service and service users had received a detailed report of the outcomes of the consultation from the people who had carried out the consultations.

Service users stated they were involved in the daily informal planning of service provision.

A very good example of participation methods deployed by the service was: Service plans were developed by service users and facilitated by staff to record a 'Poster' of 'what works?' and what doesn't work?'. This meant service users actively encouraged changes to service provision on an ad hoc basis. This was normal practice.

At this inspection we found this was the continuing practice of the service.

Areas for Improvement

The service should maintain its very good practice and aim to improve through reference to the excellent criteria in the grading scale.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 5

We respond to service users' care and support needs using person centered values.

Service Strengths

The service had very good practice in this quality statement.

The service plans evidenced that service users independence was promoted in their daily choices and routines wherever possible. The plans also evidenced how the service promoted service users health and quality of life through meaningful activity and to follow individual interests based upon their personal preference and choice. Some examples of very good practice in supporting service users interests were:

- (i) Staff supported service users to maintain their interests and to visit friends outwith the service
- (ii) Service users commented they were supported and encouraged by all the staff within the service at all times
- (iii) Staff were found to be very knowledgeable about the individual support needs of service users

Service plans emphasised the positive choices service users wanted to make about their support. The plans used service users own words about their choices and preferences. As a consequence of this, service users were able to take ownership of how they wanted staff to support them within the service. This led to service users maintaining their independence and the manager and staff could identify and make any improvements to the service provision as necessary.

Areas for Improvement

The service should maintain its very good practice and aim to improve through reference to the excellent criteria in the grading scale.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

No 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

This service was found to have very good performance in relation to this statement.

Staff were observed to have a relaxed, friendly and professional manner whilst interacting with service users and were seen to encourage service users to voice their opinions and to make informed choices.

The service had very good practice of providing written accounts of the changes it had put into place as a result of the comments by service users and carers made in the meetings and questionnaires.

The service continued to provide opportunities for service users and carers to make comments for improvement on any part of the service. This created a useful opportunity for service users and carers to raise any issues they might have regarding the service.

Service users and staff confirmed through discussion, that the manager of the service had an open door policy which promoted an ethos of good open communication between the service provision, service users and the relatives and other professionals.

The Care Commission officer reviewed the grade for this statement and confirmed that the service had made improvement, warranting an increased grade.

Areas for Improvement

The service should maintain its very good practice and aim to improve through reference to the excellent criteria in the grading scale.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 3

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

Service Strengths

The service had very good practice in this quality statement.

There were very good outcomes from the service's approach to support staff through team work and individual supervision to improve practice and to ensure they were appropriately qualified and trained.

The staff were very motivated and enjoyed their work. There was a strong commitment to team working to ensure continuity and consistency of care and support for service users and to seek ways to improve the service. The effect of this was service users that spoke with the Care Commission officer praised staff highly and commented positively about the quality of staff support received from the service.

Staff had access to core training for their work, such as a detailed induction programme, first aid, food hygiene, Makaton and active support. Staff said they valued the use of the active support approach to involve service users in all aspects of their daily lives. Staff were supported to obtain vocational qualifications for future registration with the Scottish Social Services Council.

There were regular meetings for staff to co-ordinate working effectively as a team and ensure consistent support for service users. There were development sessions for the whole staff team to meet and learn together. For example, about support needs, to share ideas and solutions for better outcomes for service users.

Staff had one to one supervision sessions which offered support for working with service users and identified training and development needs.

Areas for Improvement

The service should maintain its very good practice and aim to improve through reference to the excellent criteria in the grading scale.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

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

The Care Commission publishes Extended Service Information on the Care Services section of the website. This includes service details, provider details, and easy access to a number of previous inspection reports, brief information about enforcement action and information about upheld or partially upheld complaints. Readers can request more detailed information by contacting the Care Commission.

Action Plan

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

Summary of Grades

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

Inspection and Grading History

Date	Type	Gradings								
18 May 2009	Announced	<table> <tr> <td>Care and support</td> <td>5 - Very Good</td> </tr> <tr> <td>Environment</td> <td>5 - Very Good</td> </tr> <tr> <td>Staffing</td> <td>5 - Very Good</td> </tr> <tr> <td>Management and Leadership</td> <td>4 - Good</td> </tr> </table>	Care and support	5 - Very Good	Environment	5 - Very Good	Staffing	5 - Very Good	Management and Leadership	4 - Good
Care and support	5 - Very Good									
Environment	5 - Very Good									
Staffing	5 - Very Good									
Management and Leadership	4 - Good									

Terms we use in our report and what they mean

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

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

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

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

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

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

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

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

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

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

How you can use this report

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

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

People who use care services, their relatives and carers

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

The Care Commission

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

Reader Information

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

Translations and alternative formats

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Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrtas.

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