

## **DUNDEE CITY COUNCIL**

**REPORT TO: SCRUTINY COMMITTEE - 10TH JUNE 2010**

**REPORT ON: UNANNOUNCED INSPECTION OF TURRIFF HOUSE CARE HOME FOR OLDER PEOPLE BY THE SCOTTISH COMMISSION FOR THE REGULATION OF CARE**

**REPORT BY: DIRECTOR OF SOCIAL WORK**

**REPORT NO: 253 - 2010**

### **1.0 PURPOSE OF REPORT**

**1.1** The purpose of this report is to report on the findings of the Inspection of Turriff House Care Home carried out on 25th February 2010.

### **2.0 RECOMMENDATIONS**

**2.1** It is recommended that the Scrutiny Committee:

- i) notes the contents of this report; and
- ii) requests that the Director of Social Work monitor the continued progress towards improving this service.

### **3.0 FINANCIAL IMPLICATIONS**

**3.1** None

### **4.0 MAIN TEXT**

**4.1** Turriff House was inspected on 25th February 2010 by the Scottish Commission for The Regulation Of Care. A report of the findings was published on 9th March 2010. At the time of the inspection there were 32 older people resident at Turriff House.

**4.2** The Care Commission's focus of inspection targeted the following Quality Themes.

- Quality of Care and Support
- Quality of Environment
- Quality of Staffing
- Quality of Management and Leadership.

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

4.3 The Care Commission identified the following strengths at Turriff House from the quality themes and statements inspected.

- There was excellent evidence that Service User's and Carers were encouraged to participate in both assessing and improving the quality of the service provided by the home. A range of methods were used to involve residents and relatives.
- The service was seen to have acted on comments that have been recorded in suite meetings, residents meetings and carers Forum meetings.
- Regular meetings with the Carers Groups take place and are recorded. There is an exchange of information between the relatives and care staff
- The Personal Plans evidenced that the residents' independence was promoted in their personal care plans and daily routines. These plans also promote residents health and quality of life through meaningful activity and following individual interests based on their personal histories. One gentleman who previously worked in the Parks Department now spends his time working in the gardens of the home.
- The service had a good range of activities for residents to join in. Some of these activities are facilitated by outside agencies such as St Vincent de Paul church members who attend weekly to play Dominoes with groups of residents. Other interests are craft work, chair based exercises, visiting entertainers and other social events. One highlight is that the residents, with staff support, bake their own cakes every Friday and had made and decorated their own Christmas Cakes this year.
- Risk assessments to assess the risk of falls had been put in place to appropriately measure residents' safety.
- The home facilitates regular staff meetings where staff are encouraged to give their views on how the service can be improved on. There was evidence of staff being involved in discussion with service users and their families in determining the effectiveness of the care plan and whether changes were needed to ensure they continued to meet the changing needs of the service user.

4.4 **Evaluation**

The Care Commission can apply the following to Services:

- Enforcement Action
- Requirements
- Recommendations

Turriff House did not receive any enforcement actions, requirements or recommendations following this Inspection.

#### 4.5 **Quality Indicators**

Scottish Commission For The Regulation Of Care reports use a six-point scale for reporting performance:

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

The following quality statements based on the National Care Standards were evaluated as:

1.1 - Quality of Care and Support	6 - Excellent
1.3 - Quality of Care and Support	4 - Good
2.1 - Quality of Environment	5 - Very Good
2.4 - Quality of Environment	5 - Very Good
3.1 - Quality of Staffing	6 - Excellent
3.2 - Quality of Staffing	4 - Good
4.1 - Quality of Management and Leadership	6 - Excellent
4.4 - Quality of Management and Leadership	4 - Good

These grades are then translated into the grade for the Quality Theme and are as follows:

<b>Quality Theme</b>	<b>Overall Grade</b>
Quality of care and support	5
Quality of environment or information	N/A
Quality of staffing	5
Quality of management and leadership	N/A

#### 5.0 **POLICY IMPLICATIONS**

5.1 This report has been screened for any implications in respect of Sustainability, Strategic Environment Assessment, Anti-Poverty and Equality Impact Assessment and Risk Management.

5.2 There are no major issues.

#### 6.0 **CONSULTATION**

6.1 This report has been subject to consultation with the Chief Executive, Depute Chief Executive (Support Services), Assistant Chief Executive and Head of Finance have been consulted in preparation of this report.

## **7.0 BACKGROUND PAPERS**

7.1 The following Background Paper was relied upon in preparation of this report:

- Inspection Report Dundee City Council - Turriff House

Alan Baird  
**Director of Social Work**



# Inspection report

## Turriff House Care Home Service Adults

4 Rannoch Road  
Dundee  
DD3 8RB  
01382 436419

<b>Inspected by:</b> (Care Commission officer)	Paul Clemson
<b>Type of inspection:</b>	Unannounced
<b>Inspection completed on:</b>	25 February 2010

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**Service provided by:**  
Dundee City Council

**Service provider number:**  
SP2003004034

**Care service number:**  
CS2003000479

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

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## Easy read summary of this inspection report

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We grade all the Quality Statements for a service at each inspection. Each grade describes how well we think the service is doing based on what we inspected.


We can choose from six grades:

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

### We gave the service these grades

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

Quality of Environment N/A

Quality of Staffing  **5** Very Good

Quality of Management and Leadership N/A

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 encouraged and maintained residents independence. It had very good practice in supporting residents own interests. Residents and relatives were separately asked for their views on the quality of the service. The service acted on comments it received. Some residents had met applicants as part the staff recruitment process, and had given their views



on the applicants suitability. The service had a very good staff induction process.

### **What the service could do better**

The provider should use best practice guidance in falls prevention and falls risk assessments for all residents.

### **What the service has done since the last inspection**

The service had improved residents personal plans to include their own words about their choices and preferences in their personal care and daily routines.

### **Conclusion**

The home had a very positive and relaxed atmosphere. Residents said they liked living in the care home and were well looked after by the care staff.

### **Who did this inspection**

#### **Lead Care Commission Officer**

Paul Clemson

#### **Other Care Commission Officers**

Patrick Sweeney

#### **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

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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](http://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

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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](http://www.scotland.gov.uk)

You can get printed copies free from:

Blackwells Bookshop  
53-62 South Bridge Edinburgh  
EH1 1YS  
Telephone: 0131 662 8283  
Email: [Edinburgh@blackwells.co.uk](mailto:Edinburgh@blackwells.co.uk)

## What is inspection?

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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

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## **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?

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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:

<b>6</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
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

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Turriff House is a Care Home service run by Dundee City Council's Social Work Department. The home is registered to provide care for 32 older people. It does not provide nursing care. Two of the thirty two beds are used exclusively for respite care.

The accommodation is purpose built, being provided within four individual units, each housing eight residents. All residents have access to a range of communal rooms and facilities. Each unit consists of eight en-suite bedrooms opening onto a lounge and dining area. All units are on ground floor level and have access into the garden grounds, which have been designed with the needs of the residents in mind. The accommodation has been finished to a high standard, with all rooms individually decorated and furnished. The home is warm, light and extremely comfortable.

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

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

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](http://www.carecommission.com)) to find the most up-to-date grades for this service.



## How we inspected this service

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### **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**

This report was written following an unannounced inspection on 25 February 2010 by two Care Commission officers between 9.30am and 2.00pm. The inspection findings were given to the management of the care home in a meeting at the end of the inspection visit.

### **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 2009/10 we will focus on:

- Meaningful activity for all adult services
- How care services assess the health of people with learning disabilities
- Involving parents for children's services
- Medication for looked after children for residential accommodation for children
- How care services make sure they have safe recruitment procedures for staff for all services except childminders.

You can find out more about these from our website [www.carecommission.com](http://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](http://www.infoscotland.com/firelaw)

### **Actions Taken on Recommendations Outstanding**

Recommendation 1, Safer Recruitment - Inspection Focus Area

It is recommended that the provider ensure that a formal application process is followed for each period of employment. Scottish Social Services Council Code of Practice - Employer 'Make sure people are suitable to enter the workplace - 1.1. National Care Standards, Care homes for older people, Standard 5 Management and staffing arrangements.

And

#### Recommendation 2, Safer Recruitment - Inspection Focus Area

It is recommended that the provider audits the procedures for the recording of staff skills and qualification records. Scottish Social Services Council Code of Practice - Employer 'Make sure people are suitable to enter the workplace - 1.1. Standard 5 Management and staffing arrangements.

The provider's action to meet these two recommendations will be followed up in a separate audit by the Care Commission.

#### **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 28 February 2009.

#### **Annual Return Received**

Yes - Electronic

#### **Comments on Self Assessment**

We received a fully completed self assessment document from the service. We were satisfied with the way the service had completed this and with the relevant information they had given us for each of the headings that we grade them under.

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

### **Taking the views of people using the care service into account**

Residents told us:

- (i) "The food is lovely. There is enough to eat. I join in the bingo and the arts sometimes. I like to chat with other residents."
- (ii) "I like to go into the garden for a walk. We have arts and crafts. I like my 'bingo' session."
- (iii) "I join in the entertainments when I want to."
- (iv) "Staff are really excellent."

### **Taking carers' views into account**

There was an opportunity at the inspection to talk with relatives of a service user. The relatives that spoke with the Care Commission officer expressed that they had no concerns about the very good quality of care received from the home and members of staff.

# 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

The service had excellent practice in this quality statement.

At the previous inspection we found:

- (i) Questionnaires for residents and relatives
- (ii) Meetings chaired by residents and relatives
- (iii) Six monthly review meetings for each resident with their relatives
- (iv) Informal discussions
- (v) Residents and relatives views were asked for separately, as these can be different

Minutes of residents and relatives meetings and the care home's newsletter evidenced that the service had acted on comments it had received.

Regular meetings of the carers group were being held and documentation in the form of minutes provided from the 'carers group' meeting, recorded exchange of information between relatives and care staff. The minutes suggested that the opinions and wishes of the relatives present were being taken into account in directing service users care effectively.

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

### Areas for Improvement

The service should continue the excellent practice in this area.

### Grade awarded for this statement

6 - Excellent

### 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**

The service had very good practice in this quality statement.

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

- (i) Staff supported a resident to attend a luncheon club
- (ii) Many residents received their choice of a daily newspaper.
- (iii) Staff supported and encouraged a resident to attend regular church meetings

The service put on a good range of activities for resident to join in. For example, an arts and craft group, bingo, chair based exercises, baking, entertainments and social events. The staff in each suite also provided activities for residents in small groups or one to ones including dominoes, computer, cards games, music CDs and DVDs. Residents could choose when they wanted to join in activities. The care home's brochure accurately set out the choices and activities that are available to residents.

The service provided residents with appropriate equipment and facilities to support their independence. Residents choices and needs for adaptations and special diets such as lipped plates and soft diets were known and acted on during meal times. Residents had very good access to rehabilitation staff such as physiotherapists and speech and language therapists.

The service used the provider's risk assessments to assess the risk of falls for residents and had put in place appropriate measures for those residents safety.

Since the last inspection the service had been improving how residents needs, views, preferences and choices were written in their personal plans. The plans emphasised the positive choices residents wanted to make about their care. The plans used residents own words about the choices and preferences they wanted in their personal care and daily routines.

### **Areas for Improvement**

The provider should use best practice guidance given during the inspection to develop its falls prevention procedures and falls risk assessments for all residents.

### **Grade awarded for this statement**

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 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

#### Service Strengths

The service had very good practice in this quality statement.

At the last inspection we found:

- (i) Questions set by residents had been used by the service when interviewing applicants. Some residents had met applicants as part the selection process, and had given their views on the applicants' suitability. These views were taken into account when new staff were selected.
- (ii) The service was reviewing how best to further involve residents in selecting applicants as residents had found meeting several applicants to be very tiring.
- (iii) A superior range of methods were used to involve residents and relatives. Residents and relatives made their views known separately. The service had taken action on comments from residents and relatives.
- (iv) Relatives were asked to contribute questions which could be asked as part of the interview process.
- (v) Residents had put forward questions to be used by the service when interviewing applicants. Some residents met applicants as part of interviewing process and gave their views on the suitability of the applicants.

See Theme 1, Quality Statement 1, Service Strengths.

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

#### Areas for Improvement

The service should continue its excellent practice.

#### Grade awarded for this statement

6 - Excellent

#### Number of Requirements

0

#### Number of Recommendations

0

## **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**

The service had good practice in this quality statement.

At the last inspection we found:

- (i) the provider had a good safer recruitment practice for employees
- (ii) the service had a very good staff induction process.

Over the first six months of employment the service ensured new staff:

- (i) shadowed senior staff for several shifts
- (ii) were familiar with important policies, such as confidentiality and equal opportunities, and procedures moving and handling. A checklist was completed for this.
- (iii) had relevant in-depth training and their competence assessed before they carried out key tasks such as moving and handling or medicines administration. Written records of these assessments were kept.

There were very good records of direct observation and assessment by senior staff of how well new staff carried out a range of care practices and the values and manner they demonstrated when working with residents.

Staff progress in their induction was assessed at a supervision meeting with a senior social care officer. The assessment identified competences achieved and further training and development to be planned in the near future.

### **Areas for Improvement**

The service should continue its good practice.

### **Grade awarded for this statement**

4 - Good

### **Number of Requirements**

0

### **Number of Recommendations**

0



## Other Information

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### **Complaints**

There have been no complaints 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**

None

### **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

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<b>Quality of Care and Support - 5 - Very Good</b>	
Statement 1	6 - Excellent
Statement 2	5 - Very Good
<b>Quality of Environment - Not Assessed</b>	
<b>Quality of Staffing - 5 - Very Good</b>	
Statement 1	6 - Excellent
Statement 2	4 - Good
<b>Quality of Management and Leadership - Not Assessed</b>	

## Inspection and Grading History

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Date	Type	Gradings
9 Sep 2009	Announced	Care and support 5 - Very Good Environment 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
7 Jan 2009	Unannounced	Care and support 5 - Very Good Environment 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
20 May 2008	Announced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and Leadership 4 - Good

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## Terms we use in our report and what they mean

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**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

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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

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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](http://www.carecommission.com) or by telephoning 0845 603 0890.

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