



*Making Social Care
Better for People*

inspection report

CARE HOME ADULTS 18-65

Sunningdale Court Care Home

**Albert Road
Scunthorpe
North Lincolnshire
DN16 2TN**

Lead Inspector
Rob Padwick

Unannounced Key Inspection
27th April 2007 2:00

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

Reader Information	
Document Purpose	Inspection Report
Author	CSCI
Audience	General Public
Further copies from	0870 240 7535 (telephone order line)
Copyright	This report is copyright Commission for Social Care Inspection (CSCI) and may only be used in its entirety. Extracts may not be used or reproduced without the express permission of CSCI
Internet address	www.csci.org.uk

This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this establishment are those for *Care Homes for Adults 18-65*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

This report is a public document. Extracts may not be used or reproduced without the prior permission of the Commission for Social Care Inspection.

SERVICE INFORMATION

Name of service	Sunningdale Court Care Home
Address	Albert Road Scunthorpe North Lincolnshire DN16 2TN
Telephone number	01724 844181
Fax number	
Email address	manager.sunningdalecourt@hica-uk.com
Provider Web address	
Name of registered provider(s)/company (if applicable)	Humberside Independent Care Association Limited
Name of registered manager (if applicable)	Mark Andrew Green
Type of registration	Care Home
No. of places registered (if applicable)	20
Category(ies) of registration, with number of places	Learning disability (20), Learning disability over 65 years of age (20)

SERVICE INFORMATION

Conditions of registration:

1. Maximum of 20 places in total

Date of last inspection

17th January 2006

Brief Description of the Service:

Sunningdale Court offers accommodation for up to 20 people with a learning disability. The accommodation is all ground floor and comprises two 8 bedded bungalows and one 4 bedded bungalow.

All bedrooms are single and have en suite toilet and washbasin. Each bungalow is self-contained. The two larger bungalows have an open plan kitchen, dining area and lounge, bathroom, shower room and utility room. The smaller bungalow has a kitchen, lounge, dining/ quiet room, bathroom and a utility room. Each bungalow has direct access to a safe garden. A separate ground floor building houses a multi-sensory room, meeting rooms, offices, main kitchen and staff room.

The home is situated close to and within easy walking distance of a range of local shops and amenities.

Sunningdale Court is owned and operated by Humberside Independent Care Association which is a 'not for profit' organisation.

The standard fees charged by the home is £466, with additional charges made for specialist needs and for hairdressing, chiropody, toiletries etc.

Sunningdale Court provides information to residents about its facilities in its Statement of Purpose and Service User Guide.

SUMMARY

This is an overview of what the inspector found during the inspection.

A Pre Inspection Questionnaire asking for information about the home was sent to the manager before this visit and information from this was included as part of the inspection process. Other information used included reports from monthly visits carried out by a senior manager from the parent company and notifications received by the Commission for Social Care Inspection about serious incidents that had taken place in the home.

Questionnaires were sent out to people living in the home and their relatives, together with professional staff who know the service well and all of those that were returned expressed high levels of satisfaction with the home.

The inspection visit for this service lasted for 5 hours and during this period, time was spent talking with people living in the home and observing their daily lives. Other time was spent looking at their care plans and other records and talking to staff. The inspection visit also included a tour of the building.

What the service does well:

Good quality information had been developed to help those thinking about moving into Sunningdale Court and detailed assessments of their individual need had taken place to ensure that the service was able to meet these.

The needs of people living in the home were being ensured by a good standard of care planning that focussed on a wide range of their individual strengths and needs.

The health needs of people living in the home were being well monitored with good involvement from other professionals when this was needed. The home had a strong programme of staff training and development that ensured that staff were equipped with the skills needed to do their jobs.

The home had strong management systems in place to ensure that aspects of the service were regularly reviewed and amended in line with its aims and objectives.

The relative's comments that were received were all positive and praised the carers and staff at Sunningdale Court. "They are very thoughtful and kindness itself. We are made extremely welcome and are fully informed of my sister's health and welfare."

What has improved since the last inspection?

The home's quality assurance systems are well developed and continue to help assess the home's performance against its aims and take action to improve things. More meetings are held with people living in the home, in order to help them participate in matters affecting the home. The Provider reports that notes from these meetings are developed in graphics and pictures in order to help people living in the home understand them.

What they could do better:

Issues concerning allegations of abuse to people living in the home must be referred to the Local Authority as a matter of course, in order to ensure that they are safeguarded in these matters.

Although well developed, the staff training programme should be improved to ensure that formal training is provided to ensure that staff are equipped with the skills needed to communicate with those people in the home that have difficulties in this respect.

In view of a recent reduction in the extent of day care available in the local area, the home's manager should ensure that the provision of daily activities to people living in the home is closely monitored and reviewed, in order to ensure that their social lives and needs can continue to be appropriately met.

The provider organisation should give some consideration to developing an alternative use for the provision of the home's respite service, in order to ensure that the lives of the people living permanently in the four-bedded bungalow are not disturbed.

The home's manager should give consideration to improving access arrangements to the individual bungalows, by using the separate front doors for normal access, in order to respect the privacy of people living in each part of the service.

The registered person should give consideration to developing alternative catering arrangements that focus on the extent that the kitchen facilities in each of the bungalows is maximised, in order to maximise the opportunities for the people living in the home to develop their independent living skills.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office. The summary of this inspection report can be made available in other formats on request.

DETAILS OF INSPECTOR FINDINGS

CONTENTS

Choice of Home (Standards 1-5)

Individual Needs and Choices (Standards 6-10)

Lifestyle (Standards 11-17)

Personal and Healthcare Support (Standards 18-21)

Concerns, Complaints and Protection (Standards 22-23)

Environment (Standards 24-30)

Staffing (Standards 31-36)

Conduct and Management of the Home (Standards 37 – 43)

Scoring of Outcomes

Statutory Requirements Identified During the Inspection

Choice of Home

The intended outcomes for Standards 1 – 5 are:

1. Prospective service users have the information they need to make an informed choice about where to live.
2. Prospective users' individual aspirations and needs are assessed.
3. Prospective service users know that the home that they will choose will meet their needs and aspirations.
4. Prospective service users have an opportunity to visit and to "test drive" the home.
5. Each service user has an individual written contract or statement of terms and conditions with the home.

The Commission consider Standard 2 the key standard to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

1, 2 and 3

People who use this service experience **excellent** outcomes in this area. People in the home had been involved in the assessment of their needs and good information about the service was available, to help people make a choice about deciding to move into the home. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

The file of the one person admitted to the service since the last inspection included an assessment of needs, which the manager had obtained from a social worker so that he could check that the home was suitable to meet these. The home's manager had carried out a further more detailed assessment covering aspects of health, personal and social support needs so that staff could have important information about these. The files of other people living in the home contained similar assessments of their needs, which had been developed in a format with pictures and words to make them easier to understand and evidence was seen that they and their representatives had been included in the assessment process. All those spoken to confirmed that they were happy living at Sunningdale Court.

Updated information about the home had been developed into a statement of purpose and a service users guide, so that people thinking of moving into it could make a decision about it. Inspection of these two documents confirmed

that they had also been developed into an “easy read” format to help in understanding of them.

Individual Needs and Choices

The intended outcomes for Standards 6 – 10 are:

- 6.** Service users know their assessed and changing needs and personal goals are reflected in their individual Plan.
- 7.** Service users make decisions about their lives with assistance as needed.
- 8.** Service users are consulted on, and participate in, all aspects of life in the home.
- 9.** Service users are supported to take risks as part of an independent lifestyle.
- 10.** Service users know that information about them is handled appropriately, and that their confidences are kept.

The Commission considers Standards 6, 7 and 9 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

6,7 and 9

People who use this service experience **good** outcomes in this area. Good quality information and care planning material was available to assist staff in supporting people living in the home in making individual decisions and choices about their lives. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

The four case files that were inspected all contained support plans, which were developed from individual assessments of need. The support plans were person centred in nature and contained good quality information on how a range of physical, social and emotional needs were to be met. Appropriate staff recording and monitoring of various aspects of care were included within these, and discussion with professional staff in the community confirmed that staff in the home worked well with them and had involved their assistance when this was required. Behaviour management plans and issues concerning risk were included within the case files that were inspected and discussion with staff indicated that these were based on a framework that was consistent with

individual choice and part of their every day lives. People living in the home confirmed that they had been consulted about various aspects of life at Sunningdale Court and the minutes of residents meetings confirmed that they had been involved in making decisions on such things as choice of food, holidays and activities on offer. The support plans that were inspected had been regularly reviewed and updated and evidence was included that people living in the home had been involved in the development of them.

Lifestyle

The intended outcomes for Standards 11 - 17 are:

11. Service users have opportunities for personal development.
12. Service users are able to take part in age, peer and culturally appropriate activities.
13. Service users are part of the local community.
14. Service users engage in appropriate leisure activities.
15. Service users have appropriate personal, family and sexual relationships.
16. Service users' rights are respected and responsibilities recognised in their daily lives.
17. Service users are offered a healthy diet and enjoy their meals and mealtimes.

The Commission considers Standards 12, 13, 15, 16 and 17 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

12, 13, 15, 16 and 17

People who use this service experience **good** outcomes in this area. People living in the home are assisted to take part in a range of activities and staff support is provided to help them make decisions about their lives. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

Information submitted by the manager as part of the inspection process indicated that a range of activities were on offer to the people living in the home. A member of staff is responsible for this aspect of life in the home and discussion with her indicated that she was in the process of developing these. The group of people living at Sunningdale Court have a mixed range of needs and abilities and their ages range from the late thirties to their mid seventies. People talked about how staff helped them to go out shopping and trips out to local leisure centres and evidence was seen of work done at an adult education centre. A recent joint birthday celebration had recently been organised and discussion with people living in the home indicated that this had included a

visit from professional entertainers. Case files inspected documented the involvement of people living at Sunningdale Court in light domestic tasks such as cleaning and tidying their rooms and the support given by staff throughout this visit was observed as friendly and respectful. Relatives of those living at Sunningdale Court are welcomed to visit and a questionnaire returned from one of them commented on the respect and dignity that had been shown towards her sister. Local day services in the area have recently been reorganised, resulting in some of those living at the home not attending these as much as previously and whilst discussion with those living at Sunningdale Court indicated that they still had enough things to do, a recommendation is made that the manager closely monitors and reviews this situation, in order that the social needs of people living in the home continue to be appropriately met.

People in the home confirmed that they were able to have choices about the meals they were given and the minutes of residents meetings provided evidence that these had been regularly discussed. People living in the home said that the quality of food served was "good" and discussion with the home's chef confirmed that she was aware of their individual likes and needs and that special diets could be provided. A record of food recently served, together with the home's menu's confirmed that people living at Sunningdale Court were being provided with a range of healthy and nutritious meals and evidence in the case files that were inspected confirmed that elements of care relating to this aspect of practice were being appropriately monitored.

Personal and Healthcare Support

The intended outcomes for Standards 18 - 21 are:

- 18.** Service users receive personal support in the way they prefer and require.
- 19.** Service users' physical and emotional health needs are met.
- 20.** Service users retain, administer and control their own medication where appropriate, and are protected by the home's policies and procedures for dealing with medicines.
- 21.** The ageing, illness and death of a service user are handled with respect and as the individual would wish.

The Commission considers Standards 18, 19, and 20 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

18, 19 and 20

People who use this service experience **good** outcomes in this area. The health needs of people living in the home were being well managed and their individual personal care needs were met in a respectful and sensitive manner. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

People in the home indicated that they were happy with the way that their health and personal care needs were met and clear information on these was included within the case files inspected. One person spoke about the help she had received in attending hospital whilst others talked about how they were assisted with things like dental appointments and visits to the opticians. The case files that were inspected contained evidence of good multi disciplinary involvement with health and social care professionals in the community and staff monitoring relating to health issues was good. Individual health action plans containing clear information and guidance were contained within the case files that were inspected, and the home's training records confirmed that a range of issues relating to the needs of the individual people living in the home had been delivered to staff. Some of the people living in the home have

limited communication abilities and whilst evidence was seen that some staff training had been delivered on this, a recommendation is made that this is further developed and given to all staff. Medication policies and procedures were available to guide staff and discussion with the manager confirmed that those responsible for this aspect of practice had received training about the safe handling and use of medication. Observation of staff in these matters indicated that appropriate practices were being followed.

Concerns, Complaints and Protection

The intended outcomes for Standards 22 – 23 are:

- 22.** Service users feel their views are listened to and acted on.
- 23.** Service users are protected from abuse, neglect and self-harm.

The Commission considers Standards 22, and 23 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

22 and 23

People who use this service experience **good** outcomes in this area. The concerns of people living in the home were being taken seriously and staff training had been provided to ensure that they were safeguarded from abuse. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

Observation of the people living in the home and discussion with them confirmed that they were happy with the service and that staff listened to their views and concerns. Policies and procedures were available to ensure that those living at Sunningdale Court were safeguarded from abuse and that their concerns or complaints were taken seriously. No complaints about the service had been received by the Commission for Social Care Inspection since it was last inspected and the three complaints listed in the home's complaints book contained evidence of action taken in order to resolve these matters. One concern relating to an allegation of abuse against a staff member from an individual living in the home had been investigated by a senior manager from the provider organisation and whilst they are good at dealing with "in house" matters, they are reminded of their duty to refer allegations of abuse to the Local Authority as a matter of course, in order to safeguard both those living in the home and themselves. A requirement is made in this respect.

The home's training log contained evidence that staff had been provided with training on the Protection of Vulnerable Adults and discussion with those on duty indicated that they were confident in these matters and would act

appropriately if needed. The manager indicated that all of the people living in the home had an individual bank account and inspection of the associated records for these, confirmed that robust systems were in place in order to ensure that their financial interests were being satisfactorily safeguarded.

Environment

The intended outcomes for Standards 24 – 30 are:

24. Service users live in a homely, comfortable and safe environment.
25. Service users' bedrooms suit their needs and lifestyles.
26. Service users' bedrooms promote their independence.
27. Service users' toilets and bathrooms provide sufficient privacy and meet their individual needs.
28. Shared spaces complement and supplement service users' individual rooms.
29. Service users have the specialist equipment they require to maximise their independence.
30. The home is clean and hygienic.

The Commission considers Standards 24, and 30 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

24 and 30

People who use this service experience **good** outcomes in this area. The environment was clean and safe for the people living in the home, but some alterations in its current use would enhance its ability to protect their individual rights and needs. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

Sunningdale Court was purpose built and provides accommodation for up to 20 people with a learning disability. The service consists of two 8 bedded bungalows and one 4 bedded bungalow that are interlinked by adjoining corridor. All of the accommodation is on ground level and this makes access for wheelchair users and those with limited mobility easier. On the day of this inspection visit the bungalows were all clean and tidy and records in the home that were inspected confirmed that a maintenance plan for the building was in place. Some minor refurbishment in relation to the furniture and fittings was needed and discussion with the manager confirmed that these were included as part of this.

All of the bedrooms at Sunningdale Court are single occupancy and all have en suite toilet and washbasin. Each bungalow has direct access to a safe garden with its own front door, however discussion with staff and people living at Sunningdale Court indicated that these were not generally used and that access to the bungalows tended to be via an adjoining corridor. This means that people have to walk through the living accommodation belonging to other people to get to another bungalow and this is intrusive to people living at Sunningdale Court. A recommendation is made that thought is given to using the separate front door for each of the bungalows, in order that the privacy of people living in each of the bungalows is respected and that each one can develop its own sense of identity.

The main kitchen is situated in a separate administration block with food taken by a heated trolley to each of the bungalows. This situation is not ideal and a further recommendation is made that thought be given to developing alternative arrangements that focus on the extent that the catering facilities in each of the bungalows is maximised.

Two people that have lived in the 4 bedded bungalow for a long time, share the same facilities with people who visit for short "respite" stays. This is not ideal as it means that people staying on such visits might disturb and unsettle the lives of the people living there on a permanent basis. A recommendation was previously made about this issue and this is again repeated.

Staffing

The intended outcomes for Standards 31 – 36 are:

- 31.** Service users benefit from clarity of staff roles and responsibilities.
- 32.** Service users are supported by competent and qualified staff.
- 33.** Service users are supported by an effective staff team.
- 34.** Service users are supported and protected by the home's recruitment policy and practices.
- 35.** Service users' individual and joint needs are met by appropriately trained staff.
- 36.** Service users benefit from well supported and supervised staff.

The Commission considers Standards 32, 34 and 35 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

32, 34 and 35

People who use this service experience **excellent** outcomes in this area. A strong staff training and development programme had been developed to ensure that the individual needs of the people living in the home were met and appropriate recruitment practices were being followed to ensure that staff were safe to work in the home. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

Staff were observed to have positive relationships with the people living in the home and those who were on duty demonstrated confidence in their skills and abilities. The provider organisation has a comprehensive training programme to ensure that staff are properly equipped with the skills for their jobs and inspection of staff files and audits of individual training records confirmed that a good range of topics relevant to the needs of the people living in the home had been delivered. The staff files inspected confirmed that new recruits to the service had undergone a good induction to the home and evidence was seen that this also included both accredited Learning Disability Award Framework and NVQ training. Information provided by the manager in this respect indicated that 83% of the staff team have achieved an NVQ at level 2

or above and this is commended. Supervision files that were inspected provided evidence of regular meetings between individual staff members and senior staff in order to discuss work related issues and to review progress. Information included within these indicated that a high priority was placed on staff training and development, in order to ensure that the staff possess the skills needed to meet the needs of the people living at Sunningdale Court.

The home's staff team is a largely stable one, although information provided by the manager indicated that a number of them had left the service since the last inspection. Discussion with both those living in the home and with those who were on duty indicated that the staffing levels were sufficient to meet the needs of those living at Sunningdale Court, and this was confirmed by observation throughout the inspection visit.

Conduct and Management of the Home

The intended outcomes for Standards 37 – 43 are:

- 37. Service users benefit from a well run home.
- 38. Service users benefit from the ethos, leadership and management approach of the home.
- 39. Service users are confident their views underpin all self-monitoring, review and development by the home.
- 40. Service users' rights and best interests are safeguarded by the home's policies and procedures.
- 41. Service users' rights and best interests are safeguarded by the home's record keeping policies and procedures.
- 42. The health, safety and welfare of service users are promoted and protected.
- 43. Service users benefit from competent and accountable management of the service.

The Commission considers Standards 37, 39, and 42 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

37, 39 and 42

People who use this service experience **excellent** outcomes in this area. Well developed management systems ensured that the views of people living in the home were listened to and the regular monitoring of various aspects of the home ensured that their health and safety was being appropriately safeguarded. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

Discussion with people living in the home and staff indicated that Sunningdale was being effectively managed and well run. Staff confirmed that the manager was "supportive and approachable" and that he welcomed their views and suggestions. The manager has considerable experience of working in the care setting and had appropriate management qualifications to manage the home. In addition to his Registered Managers Award and NVQ 4 in care, the manager

has a diploma in business and finance, which provides additional background knowledge of working within organisations, and evidence of this was seen in the operation of the home's quality assurance systems. The minutes of regular meetings with both staff and people living in the home indicated good levels of communication and questionnaires sent out to those with an interest in the development of the home had been analysed with evidence of actions taken in respect of issues highlighted. All of the feedback obtained from relatives, Social Services and people living at Sunningdale Court was positive in nature and regular audits of aspects of the service had been efficiently completed, with action plans developed in relation to these, in order to develop and improve the home. Aspects relating to health, safety and welfare of both staff and people living in the home that were inspected were found to be in good order, with evidence of regular safety checks being made.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Care Homes for Adults 18-65 have been met and uses the following scale. The scale ranges from:

4 Standard Exceeded (Commendable) **3** Standard Met (No Shortfalls)
2 Standard Almost Met (Minor Shortfalls) **1** Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion

"N/A" in the standard met box denotes standard not applicable

CHOICE OF HOME	
<i>Standard No</i>	<i>Score</i>
1	4
2	3
3	4
4	X
5	X

INDIVIDUAL NEEDS AND CHOICES	
<i>Standard No</i>	<i>Score</i>
6	3
7	3
8	X
9	3
10	X

LIFESTYLES	
<i>Standard No</i>	<i>Score</i>
11	X
12	3
13	3
14	X
15	3
16	3
17	3

PERSONAL AND HEALTHCARE SUPPORT	
<i>Standard No</i>	<i>Score</i>
18	3
19	4
20	3
21	X

CONCERNS AND COMPLAINTS	
<i>Standard No</i>	<i>Score</i>
22	3
23	2

ENVIRONMENT	
<i>Standard No</i>	<i>Score</i>
24	3
25	X
26	X
27	X
28	X
29	X
30	3

STAFFING	
<i>Standard No</i>	<i>Score</i>
31	X
32	4
33	X
34	3
35	4
36	X

CONDUCT AND MANAGEMENT OF THE HOME	
<i>Standard No</i>	<i>Score</i>
37	4
38	X
39	4
40	X
41	X
42	3
43	X

Are there any outstanding requirements from the last inspection? NO

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action
1	YA23YA23	13 (6)	The registered person must ensure that issues concerning allegations of abuse of people living in the home are referred to the Local Authority as a matter of course, in order to ensure that they are safeguarded in these matters.	27/04/07

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations
1	YA18YA18	The registered person should ensure that staff are provided with formal training to ensure that they are equipped with the specialist skills needed to communicate with those people living in the home that have difficulties in this respect.
2	YA12YA12	The home’s manager should ensure that the provision of daily activities to people living in the home is closely monitored and reviewed, in order to ensure that their social lives and needs can continue to be appropriately met in this respect.
3	YA24YA24	The registered person should give consideration to using

		<p>the separate front door for normal access to each of the bungalows, in order to respect the privacy of people living in each part of the service.</p> <p>The registered person should give consideration to developing alternative arrangements that focus on the extent that the catering facilities in each of the bungalows is maximised.</p> <p>The registered person should give thought to developing an alternative use for the provision of the home's respite service, in order to ensure that the lives of the people living permanently in the four bedded bungalow are not disturbed.</p>
--	--	--

Commission for Social Care Inspection

Hessle Area Office

First Floor

3 Hesslewood Country Office Park

Ferriby Road

Hessle

HU13 0QF

National Enquiry Line:

Telephone: 0845 015 0120 or 0191 233 3323

Textphone: 0845 015 2255 or 0191 233 3588

Email: enquiries@csci.gsi.gov.uk

Web: www.csci.org.uk

© This report is copyright Commission for Social Care Inspection (CSCI) and may only be used in its entirety. Extracts may not be used or reproduced without the express permission of CSCI