

# Orkney Fostering Service Fostering Service

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**Type of inspection:**  
Announced (short notice)

**Completed on:**  
23 October 2023

**Service provided by:**  
Orkney Islands Council

**Service provider number:**  
SP2003001951

**Service no:**  
CS2004082094

## About the service

Orkney Fostering Service has been registered since 21 December 2005. Orkney Island Council Fostering Service provides a fostering and family placement service for children and young people aged from 0 to 18 years who are assessed as in need of alternative family care. The service recruits, provides training and supports caregiving families to provide a range of fostering placements to children including permanent, long-term, interim and short break.

The service is linked to the Orkney Adult Placement Service for which there was a separate inspection and report but should be read in conjunction with this report.

## About the inspection

This was a short announced inspection which took place between 25 September and 23 October 2023.

The inspection was carried out by three inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with three people using the service and three of their caregivers
- spoke with seven staff and management
- observed practice and daily life
- reviewed documents
- spoke with three visiting professionals

## Key messages

Children and young people experienced nurturing care from their foster carers.

Foster carers experienced proactive and reflective support from their supervising social workers.

Significant drift and delay was identified for children seeking permanent care. Although action had been taken to progress child's plans, permanence had not been achieved for children during this inspection period.

There was investment and a commitment to staff training which was beneficial to the supervising social workers as well as those they support.

There was a strong focus on leadership within the Local Authority, however the temporary nature of the appointments created a fragility to the sustainability of improvements.

Although risk was identified, this was not well analysed with limited information with regards to relevant interventions or strategies to support the management of the risk.

## From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	2 - Weak
How good is our leadership?	2 - Weak
How good is our staff team?	3 - Adequate
How well is our care and support planned?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

## How well do we support people's wellbeing?

**2 - Weak**

We evaluated this key question as weak, as although we identified areas of strength these were compromised by significant weaknesses. As the weaknesses were relating to the future wellbeing of children and young people, we have made requirements to the provider.

Relationships between children and foster carers were meaningful and affectionate. Foster carers were compassionate and provided a sense of security which resulted in children experiencing trusting and secure relationships. Children and young people were included in family life and had a strong sense of membership in their foster family.

Foster carers had good supportive relationships with the supervising social workers, particularly during times of crisis. Foster carers were encouraged to reflect on the care they provided and in their responses to the children which supported a trauma informed approach. However, we were told that the supervising social worker had lacked the confidence to challenge another professional's practice when this had been required.

Foster carers were respected by supervising social workers, and children and young people experienced respect from their carers. There was a good awareness of privacy and confidentiality which was well managed. Foster carers and staff recognised and challenged discrimination.

Foster carers were informed about decisions which affected their day to day lives, but did not feel informed about longer term decisions relating to the children in their care. Neither did they feel that children were actively and meaningfully engaged in decisions about their care. One carer told us: "Our foster kids haven't been given the support and life story work done for them to be involved in their plans. Social work input hasn't been consistent".

There was a lack of formal and independent advocacy available to the children and young people. This was an area for improvement made at the last inspection and will remain in place following this inspection. **See Area for Improvement 1.** Plans for addressing this gap in support has been initiated but not yet implemented.

Children and young people had choice in their day-to-day life which was promoted well by their foster carers. Care was personalised by carers who understood individual strengths.

The provision of short breaks for children and young people needs to be reviewed to ensure that current and future needs of the children are being met.

Relationships with birth family were supported and positively promoted by foster carers and supervising social workers where this was part of an ongoing consistent pattern of engagement. There was a frustration for foster carers and Supervising Social Workers when family time was increased for the purpose of assessing parenting capacity which resulted in children being confused regarding their future plan.

Children and young people were active participants in their community. They benefitted from joining local activities which were meaningful to them and provided relationships outwith the immediate family which promoted resilience.

Brothers and sisters remained together and where this was not possible, meaningful connections were well supported. There were examples where children had been part of multiple together or apart assessments due to a combination of the changing complex needs of children placed with their siblings and, changes in the circumstances of birth parents. Both of these were compounded by the absence of permanent social workers and as such, Together or Apart Assessments were often undertaken more than once as a new social worker prepared the evidence for Court.

Children and young people were supported to achieve and thrive in their education. Foster carers attended core training to promote their learning and development, with a particular focus on child and adult protection. This resulted in children and young people being kept physically and emotionally safe within their foster families.

Lifestory work was promoted within the service with some workers undertaking direct lifestory work with

children and young people. This was very positive for the children to support them in their care experience journey. Previous concerns around recording of information had been addressed by the upgraded recording system and leadership evidencing a solid understanding of the purpose of recording.

Interventions used by supervising social workers were timely and supported good outcomes for children. Foster carers felt supported in times of difficulty and felt the supervising social workers were available to them which made carers feel valued.

Mental and physical health was prioritised in the service. Although there were waiting lists for mental health services, workers were proactive at making referrals, chasing timescales and offering ongoing support until sessions were accessed.

Supervising social workers had a good understanding of the fostering families, their needs and their abilities. However, these clear assessments were not always reflected in the review assessments which resulted in some ambiguity for the family and for care planning.

There had been no new fostering placements or foster carer approvals made within the last inspection period. The service had no capacity to offer a foster family placement to any child seeking alternative care and were aware that some foster carers will seek to end their approval within the next year, therefore recruitment is needed to support the future needs of the service. **See Area for Improvement 2.**

A delay in completing necessary paperwork in time for a foster carer review, resulted in the most recent fostering panel being cancelled. With exception to this, all other carers have been reviewed within this inspection period at the Fostering Panel.

Children requiring permanency continued to experience significant drift and delay that had potential to impact negatively on finding a forever family. In all cases, there had been a number of changes in allocated workers from the Children and Families Team with additional parenting assessments undertaken due to the delay in processes. This resulted in birth family time being increased which was confusing for the children and their families, but also further contributed to the delay in permanency planning. Some foster carers expressed their own distress resulting from uncertainty around planning.

Permanency progression was being tracked with priority given to those who had experienced most delay. It was positive that such close scrutiny had been placed on the children where drift and delay had occurred for a significant period of time, however it was still in early implementation and the outcomes were yet to be evidenced. This was requirement from the last inspection which we have reviewed as not being met at this inspection. **See Requirement 1.**

## Requirements

1. By 30 January 2024, the provider must improve the quality of permanence planning for children to promote stability in children's lives. In order to achieve this, the service must ensure that:

- a) Procedures to secure permanent alternative care are embedded in practice.
- b) Staff are supported and feel confident in planning permanent alternative care.
- c) Assessments are undertaken and children are presented at permanence panel within timescales.

This is to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child or young person needing permanent alternative care, I experience this without unnecessary delay' (HSCS 1:16).

## Areas for improvement

1. To enable children and young people to be aware of their rights, have their voices heard and respected, the provider should embed awareness of children's rights within the service. This should include, but not be limited to, advocacy services being visible to children and young people and training for all staff.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am supported to use independent advocacy if I want or need this (HSCS 2.4) and 'I am supported to understand and uphold my rights' (HSCS 2.3).

2. To enable children and young people have their current and future needs met within the fostering service, the provider should proactively recruit new caregiving families who can offer nurturing care to children in need.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: 'I am supported to be emotionally resilient, have a strong sense of my own identity and wellbeing, and address any experiences of trauma or neglect.' (HSCS, 1.29) and 'My needs are met by the right number of people' (HSCS 3.15).

## How good is our leadership?

2 - Weak

We awarded an evaluation of weak to this key question, as the strengths identified were outweighed by significant weaknesses. The areas of weakness requires necessary action for improvement therefore requirements have been made on conclusion of this inspection.

Quality assurance processes had been implemented within the service which resulted in statutory reviews and safeguarding checks being undertaken in a timely manner. This was a concern raised at the last inspection and it was positive to see a tracker being implemented. However, the tracking of protection concerns, accidents and incidents required further development to ensure all processes are followed. This will form part of a requirement made under this key question. **See Requirement 1.**

There had been a focus on creating and implementing policy and procedures, which gave workers direction and guidance. There had been steady momentum in the improvement plan for the service in recent months. However, prior to this, there had been little communication from senior management. Foster Carers reported that communication from senior management had been tokenistic and did not genuinely take responsibility for the concerns that had been identified and the impact this had caused. More recently there had been an increase in communication which had been welcomed and genuine.

At the last inspection a requirement was made in relation to stability within the leadership team, with clear direct line management and oversight in the quality assurance processes which would contribute to continuous improvement. Some progress has been made in relation to this requirement. However, the temporary nature of the management roles brings a fragility to the level of the scrutiny and improvement until permanent appointments are made. Therefore, we have concluded that this requirement has not been met. **See Requirement 1.**

As noted previously, further scrutiny has been implemented and developed on the tracking of children's experiences, in particular for those who have experienced significant drift and delay. This is positive, however, the outcome of this practice is yet to yield any progression of permanency for children. The Fostering Service can proactively support a child's journey by ensuring necessary tasks within their remit are undertaken in a timely manner. We did not find the practice of this to be consistent within the service therefore we have concluded that this requirement has not been met. **See Requirement 2.**

The panel chair was experienced and there had been a concerted effort to review all carers within timescales. Not all panel members felt fully supported in their role with training for panel members needing to be put in place to address this. **See Area for Improvement 1.**

## Requirements

1. By 30 January 2024, to provide stability in leadership and evidence the effectiveness of the service in meeting the needs of children and young people, the provider should develop a culture of continuous improvement by implementing robust quality assurance of practice. To do this, the provider must as a minimum:

- a. Ensure a robust audit system is in place and promote a shared responsibility in quality assurance processes.
- b. Ensure a direct line management responsibility.

This is to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19) and 'I use a service and organisation that are well led and managed' (HSCS 4.23).

2. By 30 January 2024, to ensure that children and young people receive quality care and support, the provider must ensure effective tracking and planning for outcomes for children and young people. To do this, the provider must as a minimum:

- a. Ensure that records and practices are in place to evidence the effectiveness of the service in meeting the needs of young people.
- b. The provider should ensure that quality assurance systems are used effectively in order to identify areas for improvement.

This is to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (4.19).

## Areas for improvement

1. To enable the Fostering and Permanency Panel to make informed and balanced decisions in the welfare of children, young people and their families, the provider should ensure suitable training and regular supervision is available to all panel members.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: I use a service and organisation that are well led and managed. (HSCS 4.23).

## How good is our staff team?

### 3 - Adequate

The evaluation of adequate has been awarded to this key question, as the strengths identified outweighed weaknesses.

The staff team had a strong value base approach and a good understanding of the Health and Social Care Standards and professional codes. Staff reported that the clear policies and procedures were helpful to guide practice particularly for workers who were newer within the service. This could be greater enhanced by further access to additional best practice guidance and opportunities to embed this into individual and team practice.

There was a commitment from workers to developing and maintaining strong relationships with foster families. Interventions were holistic, timely and skilled to support children, young people and their families, which resulted in stronger family relations and wellbeing.

At the last inspection, staff had not received any supervision for a significant period. During this inspection period, all staff reported to feel supported with all supervising social workers received regular and good quality supervision. Some further developments were required within the structure of supervision to encompass constructive reflection which includes feedback from families as well as monitoring of delegated actions. The registered manager of the service had not received regular supervision which was required for wellbeing and service improvement. Staff supervision was a requirement following the last inspection and although partially met, this requirement will remain in place from this inspection to reflect the need for this formal support to be in place for all staff members. **See Requirement 1.**

There had been a significant increase in staff training since the last inspection with all staff attending child and adult protection training, as well as other core training to support them in their role. There was evidence of good manager oversight in terms of training with good analysis on the level of need across the team. There was a commitment from the service to support staff in their continuous development moving forward.

1. By 30 January 2024, the provider must ensure that all staff receive regular, and good quality formal supervision and that an appropriate record is maintained.

This is necessary in order to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 - Regulation 3 "A provider shall provide a service in a manner which promotes quality and safety" and 15(b)(i) "ensure that person's employed in the provision of the care service receive training appropriate to the work they perform". This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled and are able to reflect on their practice and follow their professional and organizational codes' (HSCS 3.24).



## How well is our care and support planned?

## 3 - Adequate

An evaluation of adequate was awarded to this key question. Strengths were identified which just outweighed the weaknesses. As an area was identified which impacts the risk management for children and young people, a requirement has been made.

Care plans were in the main SMART (specific, measurable, achievable, realistic and timely). There were clear roles and responsibilities in terms of the day-to-day progression of the plan which supported best outcomes for children within the short term. Foster carers and supervising social workers empowered young people to share their wishes and choices in terms of their care experience.

All families had an up to date safercaring plan which was specific to the individual fostering household. Chronologies had also been completed, however some work was required to ensure these captured relevant information, which would help identify patterns of concern. For example, one chronology reviewed placed the same value on attendance at support group as to an allegation that had been made against the carers. There was no detail regarding the nature of the allegation therefore did not provide sufficient information required to identify safeguarding concerns or patterns.

Risk assessments reviewed within the fostering service would benefit from analysis and details of interventions used. Some lacked relevant information and were very briefly completed. The gap of information within these documents, could contribute towards poor decision making and outcomes for children and young people. **See requirement 1.**

Due to the upgrade of systems, the recording of information was well managed which will be helpful in maintaining records for young people should they wish to view their files at a later date.

### Requirements

1. By 30 January 2024, to ensure the safety and wellbeing of children and young people and the provision of high-quality care and support, the provider must ensure risks are recognised, identified and analysed. To do this the provider must as a minimum:

- a. Ensure all risks identified are recorded within risk assessment documentation.
- b. Details interventions and strategies required to reduce the risk for children and young people.

This is to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14) and 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

## What the service has done to meet any requirements we made at or since the last inspection

### Requirements

#### Requirement 1

By 30 December 2022, the provider must ensure that all foster carers have completed core training requirements.

This is to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, and are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

**This requirement was made on 26 September 2022.**

#### Action taken on previous requirement

A comprehensive training calendar has been developed with all active carers completing the core topics.

**Met - outwith timescales**

#### Requirement 2

By 30 December 2022, the provider must improve the quality of permanence planning for children to promote stability in children's lives. In order to achieve this, the service must ensure that:

- a. Procedures to secure permanent alternative care are embedded in practice.
- b. Staff are supported and feel confident in planning permanent alternative care.
- c. Assessments are undertaken and children are presented at permanence panel within timescales.

This is to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child or young person needing permanent alternative care, I experience this without unnecessary delay' (HSCS 1:16).

**This requirement was made on 26 September 2022.**

#### Action taken on previous requirement

A tracker has been developed and implemented. There were also monthly permanency meetings which reviews progress made for each of the children where there is significant drift and delay. However, the steps taken to progress the permanency planning for the children was still in early implementation and outcomes were yet to be evidenced.

**Not met**

### Requirement 3

By 30 December 2022, to ensure that children and young people receive quality care and support, the provider must ensure effective tracking and planning for outcomes for children and young people. To do this, the provider must as a minimum:

- a. Ensure that records and practices are in place to evidence the effectiveness of the service in meeting the needs of young people.
- b. The provider should ensure that quality assurance systems are used effectively in order to identify areas for improvement.

This is to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (4.19).

**This requirement was made on 26 September 2022.**

#### Action taken on previous requirement

Some progress had been made but not fully met therefore this requirement will continue.

**Not met**

### Requirement 4

By 30 December 2022, to provide stability in leadership and evidence the effectiveness of the service in meeting the needs of children and young people, the provider should develop a culture of continuous improvement by implementing robust quality assurance of practice. To do this, the provider must as a minimum:

- a. Ensure a robust audit system is in place and promote a shared responsibility in quality assurance processes.
- b. Ensure a direct line management responsibility.

This is to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19) and 'I use a service and organisation that are well led and managed' (HSCS 4.23).

**This requirement was made on 26 September 2022.**

#### Action taken on previous requirement

Some progress had been made but not fully met therefore this requirement will continue.

**Not met**

## Requirement 5

By 30 December 2022, the provider must ensure that all staff receive sufficient and regular training including child and adult protection training and that an appropriate record is maintained.

This is to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 - Regulation 4(1)(a) "A provider must make proper provision for the health, welfare and safety of service users" and 15(b)(i) "ensure that person's employed in the provision of the care service receive training appropriate to the work they perform". This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled and are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.24)

**This requirement was made on 26 September 2022.**

### Action taken on previous requirement

All staff have completed the relevant training.

**Met - outwith timescales**

## Requirement 6

By 30 December 2022, the provider must ensure that all staff receive regular, and good quality formal supervision and that an appropriate record is maintained.

This is necessary in order to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 - Regulation 3 "A provider shall provide a service in a manner which promotes quality and safety" and 15(b)(i) "ensure that person's employed in the provision of the care service receive training appropriate to the work they perform". This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled and are able to reflect on their practice and follow their professional and organizational codes' (HSCS 3.24).

**This requirement was made on 26 September 2022.**

### Action taken on previous requirement

Although some staff had received regular supervision this was not the case for all therefore this requirement had not been met.

**Not met**

## Requirement 7

By 30 December 2022, to ensure that children, young people and their families care and support needs are accurately reflected in support plans and anticipate future needs. These plans should be responsive, person-centred with goals which are SMART (specific, measurable, achievable, realistic and time-bound). To do this the provider must as a minimum:

- a. Ensure that post adoption support plans identify future needs.
- b. Are informed by a child's care plan and risk assessment.
- c. Reviewed regularly to ensure that adopters needs for post adoption support are met.

This is to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am fully involved in assessing my emotional, psychological, social and physical need at an early stage, regularly and when my needs change' (HSCS 1.12) and 'my future care and support needs are anticipated as part of my assessment' (HSCS 1.14).

**This requirement was made on 26 September 2022.**

#### Action taken on previous requirement

This requirement was met.

**Met - within timescales**

### Requirement 8

By 30 December 2022, to ensure that children and young people receive timely progression of plans and to understand their past should they wish to review their files, the provider must ensure that all relevant or requested reports, assessments, minutes and related documents are completed, signed, dated and store appropriately.

This is to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11); 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

**This requirement was made on 26 September 2022.**

#### Action taken on previous requirement

The service has upgraded the systems for recording information and we concluded that the general recording of information has improved since the last inspection. This requirement was met.

**Met - within timescales**

## What the service has done to meet any areas for improvement we made at or since the last inspection

### Areas for improvement

#### Previous area for improvement 1

To enable children and young people to be aware of their rights, have their voices heard and respected, the provider should embed awareness of children's rights within the service. This should include, but not be limited to, advocacy services being visible to children and young people and training for all staff.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am supported to use independent advocacy if I want or need this (HSCS 2.4) and 'I am supported to understand and uphold my rights' (HSCS 2.3).

**This area for improvement was made on 26 September 2022.**

### Action taken since then

This area for improvement has not been met and will continue following this inspection.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

How well do we support people's wellbeing?	2 - Weak
1.1 Children, young people, adults and their caregiver families experience compassion, dignity and respect	3 - Adequate
1.2 Children, young people and adults get the most out of life	3 - Adequate
1.3 Children, young people and adults' health and wellbeing benefits from the care and support they experience	3 - Adequate
1.4 Children, young people, adults and their caregiver families get the service that is right for them	2 - Weak
How good is our leadership?	2 - Weak
2.2 Quality assurance and improvement are led well	2 - Weak
How good is our staff team?	3 - Adequate
3.2 Staff have the right knowledge, competence and development to support children, young people, adults and their caregiver families	3 - Adequate
How well is our care and support planned?	3 - Adequate
5.1 Assessment and care planning reflects the outcomes and wishes of children, young people and adults	3 - Adequate

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