Making Social Care Better for People



inspection report

Children's Services

Shaftesbury School & Sports College

Salisbury Road Shaftesbury Dorset SP7 8ER

5th July 2004

Commission for Social Care Inspection

Launched in April 2004, the Commission for Social Care Inspection (CSCI) is the single inspectorate for social care in England.

The Commission combines the work formerly done by the Social Services Inspectorate (SSI), the SSI/Audit Commission Joint Review Team and the National Care Standards Commission.

The role of CSCI is to:

- Promote improvement in social care
- Inspect all social care for adults and children in the public, private and voluntary sectors
- Publish annual reports to Parliament on the performance of social care and on the state of the social care market
- Inspect and assess 'Value for Money' of council social services
- Hold performance statistics on social care
- Publish the 'star ratings' for council social services
- Register and inspect services against national standards
- Host the Children's Rights Director role.

Inspection Methods & Findings

SECTION B of this report summarises key findings and evidence from this inspection. The following 4-point scale is used to indicate the extent to which standards have been met or not met by placing the assessed level alongside the phrase "Standard met?"

The 4-point scale ranges from:

- 4 Standard Exceeded (Commendable)
- 3 Standard Met (No Shortfalls)
- 2 Standard Almost Met (Minor Shortfalls)
- 1 Standard Not Met (Major Shortfalls)
- 'O' or blank in the 'Standard met?' box denotes standard not assessed on this occasion.
- '9' in the 'Standard met?' box denotes standard not applicable.
- 'X' is used where a percentage value or numerical value is not applicable.

TYPE OF ADDITIONAL INSPECTION VISIT

Statutory Unannounced Inspection	
Follow up of Previous Inspection	
Follow up of Enforcement Action	
Complaints Investigation	
Monitoring Visit	YES
Advisory Visit	
Other	
Specify:	

TYPE OF SERVICE INSPECTED

Children's Home			
Boarding School (not registered as a children's home)			YES
Residential Special School (not registered	as a	children's home)	
Further Education College			
Residential Family Centre			
Independent Fostering Agency			
Local Authority Fostering Service			
Voluntary Adoption Agency			
Local Authority Adoption Service			
			ID Code
Lead Inspector	1	Susan Harvey	078139
Name of Further Inspector (if applicable)	2	Christine Main	111459
Name of Further Inspector (if applicable)	3		
Name of Further Inspector (if applicable)	4		
Name of Lay Assessors (if applicable) Lay assessors are members of the public independent of the CSCI. They accompany inspectors on some inspections and bring a different perspective to the inspection process.		NA	
Name of Specialist (e.g. Interpreter/Signer) (if applicable)		NA	
Name of Establishment Representative at the time of inspection		Ms Mary Hogkinson	
Number of Inspector Days spent on site:1.5			

SPECIFIC OBJECTIVE(S) OF THE VISIT

This was an additional visit made to Shaftesbury School & Sports College by the Commission for Social Care Inspection under the National Minimum Standards for Boarding Schools. The previous full inspection of boarding welfare was undertaken in March 2003.

The specific objectives of this visit were as follows:

- **D** To follow up and review recommended actions made following the last inspection.
- To follow up and review advisory recommendations made following the last inspection.
- □ To meet and speak with boarders.
- The Pharmacy Inspector for Commission for Social Care Inspection to carry out a review of matters pertaining to the storage and dispensing of medication within the boarding house.

INSPECTION METHODS USED AT THE VISIT

Inspection of relevant part(s) of premises	YES
Interview with senior staff member in charge	YES
Interview with other staff	YES
Discussion with children	YES
Individual interview with a child	NO
Visit foster/adoptive home	NA
Visit lodgings	NA
Interview foster/adoptive parent	NA
Inspection of relevant records	YES
Inspection of relevant policy/practice documents	YES
Children's survey	NO
Parent survey	NO
Placing authority survey	NA
Foster / adoptive parent survey	NA
Staff survey	NO
Date of Inspection	05/07/04
Time of Inspection	10.00
Duration Of Inspection	8.5

FINDINGS ON KEY ISSUES TO BE ADDRESSED AT ALL UNANNOUNCED, MONITORING AND FOLLOW UP VISITS

The following scale is used to indicate the extent to which standards have been met or not met by placing the assessed level alongside the phrase "Standard met?"

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)

"0" in the "Standard met?" box denotes standard not assessed on this occasion. "9" in the "Standard met?" box denotes standard not applicable.

"X" is used where a percentage value or numerical value is not applicable.

(I). Inspector's assessment of the extent to which the requirements for consultation with children are being met.

Standard met?

et? 3

Pupils spoken to confirmed that they had ample opportunity to express their views and opinions. Each pupil has an identified mentor whose role it is to offer support and guidance as needed. Pupils felt that this was a good opportunity for direct discussion with a staff member. They reported that they are routinely asked abut how they are or what they feel about the school or how better they could be supported. Pupils also confirm that they meet regularly within the School Council and Boarders Council. These meetings are an open opportunity to raise matters of concern about the school and to raise for discussion their suggestions for change. Minutes are taken and were seen posted on the general notice board of the boarding house. Boarders were asked for examples of matters which have changed as a direct result of them raising the matter. The following examples were given; the supply of bigger waste bins, more cold water dispensers, purchase of sports equipment for the boarding house, showers getting fixed and requests for packed lunches.

(II).Inspector's assessment of the extent to which the requirements for complaints
procedures for children are being met.Key findings/EvidenceStandard met?3

Each pupil is given a handbook which contains the schools complaint procedure. Pupils spoken to confirmed that they had received a copy and they are free to raise issues of complaint. Those who said that they had complained felt that they had been listened to but that these matters were minor and generally dealt with swiftly by boarding house staff. The inspector was referred by pupils to the notice board in the boarding house which had posted a notice which gave information to pupils on who to go to in the event that they had a worry, concern or complaint. This included the contact details of the Commission.

(III). Inspector's assessment of the extent of staff knowledge of the required response to allegations or suspicions of abuse of children (child protection and staff/carer reporting procedures). Key findings/Evidence

Not reviewed during this inspection visit.

(IV).	Inspector's assessment of the adequacy of sta	fing at the time of	the visit.
Key	findings/Evidence	Standard met?	3

At the time of this visit there were ample staff available for pupils. It was a morning visit and therefore most pupils were in school. The Matron was on duty as was the Director of Boarding. Pupils confirmed that there is always someone available at the front office of the boarding house and that as a rule there are at least three staff on duty. Staff spoken to confirm that there are, two or three staff on duty every morning and four or five during the evening.

(V).Inspector's assessment of the extent to which any children and staff/carers seen
are aware of individual children's plans (where applicable).Key findings/EvidenceStandard met?0

Not reviewed during this inspection visit.

FINDINGS ON SPECIFIC OBJECTIVES OF THIS VISIT

Objective 1 - A review of recommended actions made following March 2003 inspection.

Recommended action 1. The boarding house should consider the use of an appropriate medicine cabinet in order to ensure that medication is kept secure and in good order (BS 15.10)

Time scale: September 2003

Findings: A suitable cabinet has been purchased. This action is therefore fully met.

Recommended action 2. The boarding house should undertake a review of the recording systems for the administration of medication, treatment and first aid, to include the detail required in Standard 15.12.

Time scale: September 2003

Findings: Some changes have been made to the systems and recording of medication held and dispensed since the last inspection. The Director of Boarding and the Matron confirmed that this would be reviewed again, especially with the expected arrival of a new Director of Boarding. The inspector made arrangements for the Commissions Pharmacy Inspector to visit the boarding house to offer further advice and guidance at this time. The findings following this visit can be found under Objective 4 within this section of the report. This recommended action, has not been fully met. Two further recommendations are made following the Pharmacist Inspectors review.

Recommended action 3. Any recommendations or requirements from the Fire Service should be implemented within the timescales set (BS 26.5).

Time scale: September 2003

Findings: Records held in the boarding house could not confirm the current status of the recommendations made by Dorset Fire & Rescue Service (DFRS), although the Director of Boarding confirmed that work was 'ongoing'. Following this inspection, the inspector made contact with the Dorset County Council Property Services who confirmed that work has been ongoing and was near to completion. The inspector has therefore requested that DFRS re visit and report on the work undertaken so far. This recommended action is therefore carried forward for further review at the next inspection.

<u>Recommended action 4.</u> The system for recruiting staff (including ancillary and contract staff) who work with boarders, must include all of the areas listed in Standard 38.2, be obtained before appointment, and can be verified from recruitment records.

Time scale: September 2003

Findings: The inspector reviewed two personnel records relating to staff employed within the boarding house and three from the school. All had been appointed since the last inspection. Records seen evidence that although action has been taken to improve record keeping in light of the recommendations, that there remains matters which need to be addressed.

The boarding house has developed a useful checklist at the front of each file which follows the expectations of these standards. However, one staff member has started work prior to the return of a satisfactory Criminal Records Bureau (CRB) check. This was echoed amongst records seen at the school. The procedure followed by the school is that CRB forms are completed by the prospective employee and sent to Dorset County Council personnel department for processing. In two cases, the CRB check had not been returned and the school had not noticed this. It is essential that a system to effectively monitor the return of CRB's, is implemented on both sites.

Application forms are used for all appointments. These detail past employment history. In the respect of the boarding house staff, gaps in employment history were not noted. However, it was less clear in respect of teaching staff. One was noted to have short gap in employment history which was not explained. Notes are held on file of the outcome of the interview of boarding house staff although none are maintained in respect of teaching staff. Two references are requested of all candidates including the most recent employer. Follow up phone calls are made to referees of boarding house staff but this practice is not mirrored in the school. Reference request letters although specifically ask the referee for any known reason why the candidate should not work with children it does not indicate that there should be no material mis-statements or omissions. There was no consistent approach to keeping evidence to support proof of relevant qualifications.

This recommended action has not been met and will therefore be carried forward for further action.

Recommended action 5. Staff members must not begin work until satisfactory Criminal Records Bureau checks have been completed (38.7).

Time scale: September 2003

Findings: See recommended action 4. Two staff have begun work before the school has been in receipt of a satisfactory CRB certificate. This recommended action has not been met and will therefore be carried forward for further action.

Recommended action 6. The boarding house staff should ensure that CRB checks have been completed on taxi drivers booked by the house/school to drive boarders unaccompanied by staff.

Time scale: September 2003

Findings: The Director of Boarding confirmed that pupils only use two taxi firms who supply drivers who have been CRB checked. There was no evidence in support of this although pupils and staff confirmed that they were only able to use these two restricted companies. Although the inspector has no reason to believe that this has not been fully addressed it is important that evidence be held for presentation at the next inspection. Advisory recommendation will be made in this respect.

Recommended action 7. The Director of boarding must ensure that the boarding house has a valid electrical safety certificate, a copy of which should be forwarded to the National Care Standards Commission.

Time scale: September 2003

Findings: The Commission has not received a certificate of electrical safety. The Director of Boarding confirmed that electrical work has been 'ongoing' since the last inspection visit. However, she was unable to confirm its current status. The inspector spoke with Dorset County Council Property Services who confirmed that work had been completed, however a certificate was not available as the company who carried out the original inspection were not the same company who did the work. It was reported that a new inspection would be carried out this year after which a certificate will be available. The recommended action is therefore carried forward for review during the next inspection.

Objective 2 – To review of advisory recommendations made following March 2003 inspection.

<u>Advisory recommendation 1.</u> Inspectors would recommend that the house expand their current anti-bullying policy to include guidance on measures to prevent bullying (BS 2.2).

Findings: This has been fully addressed.

<u>Advisory recommendation 2.</u> The Director of Boarding should establish contact with the Area Child Protection Committee secretary (tel. 01305 224643) to request a copy of the ACPC Procedures and to ensure that any updated pages will be sent as required (BS 3.6).

Findings: This has been fully addressed.

<u>Advisory recommendation 3.</u> The boarding house should obtain a copy of 'Working Together to Safeguard Children' (BS 3.6).

Findings: This has been fully addressed.

Advisory recommendation 4. The boarding house disciplinary procedures should include a policy statement on the use of restraint (BS 4.2).

Findings: This has been fully addressed.

<u>Advisory recommendation 5.</u> It is recommended that the administration of major punishments is recorded in writing in a suitable book or log (BS 4.6).

Findings: The Director of Boarding reported that a logbook of punishments had been established since the last inspection. However, the book had been sent to the Head Teacher for review and had not been returned. Therefore this advisory recommendation will be repeated and carried forward for further review at the next inspection.

<u>Advisory recommendation 6.</u> The boarding house complaints policy should include the contact details of the National Care Standards Commission (BS 5.4).

Findings: This has been fully addressed.

<u>Advisory recommendation 7.</u> The boarding house should obtain, and follow, qualified medical or nursing advice in a written protocol on the provision of non-prescription 'household' medicines to boarders (BS 15.9).

Findings: Whilst this has been partly addressed, there was some misunderstanding of the content of this protocol. The advisory action is therefore re worded for clarity and carried forward for further action. This has been linked to a recommended action made following the pharmacist inspectors review.

<u>Advisory recommendation 8.</u> Written parental permission should be obtained in advance for the administration of first aid and appropriate non-prescription medication to boarders (BS 15.14)

Findings: This has been fully addressed.

<u>Advisory recommendation 9.</u> It is recommended that a formal system of regular monitoring by senior staff be introduced, which looks at the areas identified in Standard 23.2.

Findings: There are informal arrangements for the monitoring of matters identified by this standard. The Director of Boarding confirms that complaints are likely to be received by the Head Teacher and passed to the Director of Boarding for action. One complaint has been received by the Director of Boarding. Records held in support of action taken. Any central records held by the Head Teacher were not reviewed on this occasion. The Director of Boarding also confirmed that she oversees all accidents although there was no evidence by way of a signature on the reports to confirm this. Accident reports are also sent to the Education department but again no indication that an identified person oversees them. Major punishments were until recently recorded in a book and sent to the Head for review. The book has not been returned to the boarding house.

After consideration of these findings the inspector considers that this advisory recommendation could be better addressed. The intention of regular monitoring is to ensure that the Head or delegated senior staff member oversees these systems to look for trends or concerns. Current practice needs to be tightened to ensure that this takes place more effectively. The advisory recommendation will therefore carried forward for further action.

<u>Advisory recommendation 10.</u> The leaking showers in both the boys' and girls' accommodation should be satisfactorily repaired (BS 40.6).

Findings: Pupils spoken to confirm that this matter has been fully addressed.

<u>Advisory recommendation 11.</u> There should be an adequate supply of hot water to showers, which should also be maintained in working order (BS 44.6).

Findings: Pupils spoken to confirm that this matter has been fully addressed.

<u>Advisory recommendation 12.</u> The boarding house should retain copies of servicing documents for all appropriate equipment maintained on site (BS 47.5).

Findings: Service and maintenance documentation was seen to support that the boilers in Barton Hill House are maintained regularly. The Director of Boarding reported that portable appliance testing had not yet taken place but was planned for September 2004. As the need for this type of testing has been a legal requirement for some time the inspector considers this a matter of importance therefore recommended action will be made to ensure that this is addressed and reviewed by the inspector during the next inspection.

<u>Advisory recommendation 13.</u> The boarding house should develop an effective system of risk assessment for all of the areas listed in Standard 47.9.

Findings: The Resident House Tutor presented the inspector with number of risk assessments relating to fire, internal and external environmental risk. Risk assessments seen were considered adequate although factors such as the known illicit activities e.g. drinking or drug use had not been subject to assessment. The school are recommended to expand the scope of risk assessments where necessary.

Objective 3 – To meet and speak to boarders.

The inspector met with fourteen pupils in two groups each representing younger or older pupils. All pupils were vocal in their content at being at the school and specifically with boarding. None raised any issues of concern. All confirmed that they felt they were well cared for and catered for and that they would recommend the school to friends or siblings. Bullying was reported not to be evident in the school and, any past bullying had been swiftly handled by staff. All felt that school rules were fair and that discipline was dispensed in an equitable manner. All except one pupil enjoyed meals in the boarding house. This is the main meal of the day. However pupils were unanimous in their dislike of lunchtime meals at school. The inspector took lunch with pupils and experienced the canteen. A representative from Dorset County Council was in the canteen seeking to review meal provision. Pupils eating lunch with the inspector took the opportunity to pass on their views. Pupils felt that they were well provided with activities and support out of school hours. All mentioned individuals that they could go to with a concern or worry.

Overall the inspector is pleased to report positively on the views of pupils.

Objective 4 – The Pharmacy Inspector for Commission for Social Care Inspection to carry out a review of matters pertaining to the storage and dispensing of medication within the boarding house.

Findings: The matron is on duty from 8am - 2.30pm and house staff at other times but there was no clear policy detailing the medical centre arrangements, including who is responsible for giving medicines when the matron is 'off duty'.

Boarders are registered with a local GP, who is the house doctor. Matron said that if a boarder needed to see the doctor they are usually taken to the surgery and arrangements could be made for them to see a female doctor, if they wish. Boarders usually access dental and optical services in the holidays but in an emergency, local arrangements could be made. They can see the doctor or dentist in private if they wish.

Matron told the inspector that all staff are trained in first aid, either a one-day course or the 'First aid at work' course. Also, the community nurse had trained some staff to give medicines by special routes to two boarders if needed in an emergency. There was no record of this training and it is recommended that this be documented. Written care plans for giving these medicines were seen.

Medicines were stored in locked cupboards and those for an individual boarder were clearly separated and labelled.

There was no written protocol for giving household remedies and advice was given on this.

Parental permission forms have been developed and were seen in use. These support parents in giving permission to the school to dispense medication, 1st aid and non prescriptive medicines.

The inspector saw records in the daybook of prescribed medicines or non-prescription household remedies given to individual pupils but there were no records of receipt of these medicines and no clear audit trail. The pharmacist gave advice on how this could be done. Matron said that she transferred records of medicines given to the boarder's individual record. She also recorded relevant details of illnesses and accidents on individual boarder's record.

FOLLOW UP OF PREVIOUS REQUIRED ACTIONS FOR UNANNOUNCED, MONITORING AND FOLLOW UP VISITS

Requirements from last Inspection visit fully actioned?

NO

If No, the findings of this inspection on any Required Actions not implemented are listed below:

REQUIRED ACTIONS

Identified below are areas not yet addressed from the last inspection report which indicate a non-compliance with applicable Regulations or Standards under the Care Standards Act 2000.

No.	Regulation if applicable	Standard	Required actions	
1		BS26	Any recommendations or requirements from the Fire Service must be implemented within the timescales set (BS 26.5).	September 2003
2		BS38	The system for recruiting staff (including ancillary and contract staff) who work with boarders, must include all of the areas listed in Standard 38.2, be obtained before appointment, and can be verified from recruitment records.	September 2003
3		BS38	Staff members must not begin work until satisfactory Criminal Records Bureau checks have been completed (38.7).	September 2003
4		BS47	The Director of boarding must ensure that the boarding house has a valid electrical safety certificate, a copy of which should be forwarded to the Commission for Social Care Inspection.	September 2003

Action is being taken by the Commission for Social Care Inspection to monitor compliance with the above requirements.

Compliance with Conditions of Registration (if applicable)

for Unannounced, Monitoring and Follow up Visits

(Establishments Registered as Children's Homes or Residential Family Centres, Independent Fostering Agencies or Voluntary Adoption Agencies only)

Providers and managers of registered services must comply with statutory conditions of their registration. The conditions applying to this registration are listed below, with the inspector's assessment of compliance from the evidence at the time of this Additional Inspection Visit.

Condition	Compliance
Comments	

Condition	Compliance
Commonto	
Comments	

Condition		Complia	ance	
Comments				
Lead Inspector	Susan Harvey	Signature Sg	Harvey	
Second Inspector	26/07/04	Signature		
Locality Manager	Mark Goodman	Signature		
Date				

FURTHER ISSUES RAISED OR DISCUSSED AT THIS VISIT

The following further issues, not already identified in this report, were raised with the inspector, identified by the inspector, or discussed at this visit, with the conclusions identified below.

Issues raised by children:

Children raised no further issues during this inspection visit.

Issues raised by staff or carers:

Staff raised no further issues during this inspection visit.

Issues raised by inspector:

The inspector has no further issues to raise other than those referred already in this report.

REQUIRED ACTIONS

Identified below are the actions required following this Additional Inspection Visit, either outstanding from the previous inspection or identified subsequently or at this visit. Action is required on these areas within the given timescales in order to meet the statutory requirements under the Care Standards Act 2000, Children Act 1989, or applicable Regulations and National Minimum Standards.

No.	Regulation if applicable	Standard *	Requirement	
1		BS15	The school should have a policy detailing arrangements for the medical centre, first aid and giving medicines. There should be a written protocol for giving 'non- prescription' household remedies to boarders including dose directions and any contraindications and the school should inform parents of the medicines stocked for this purpose. If staff give other non- prescription medicines at the parent's request they should have written directions and permission for this.	31/10/04
2		BS15	The school should keep records of medicines received and any leaving school, either returned home to the pharmacy to provide a complete audit trail.	31/10/04
3		BS26	Any recommendations or requirements from the Fire Service must be implemented within the timescales set (BS 26.5).	31/10/04
4		BS47	All electric portable appliances must be the subject to a yearly safety check. Documentation should be held to evidence that this has been undertaken.	31/10/04

5	BS38	 The system for recruiting staff (including ancillary and contract staff) who work with boarders, must include all of the areas listed in Standard 38.2, be obtained before appointment, and can be verified from recruitment records. Specific reference is made to the following; Reference requests must seek to indicate that there is no material misstatement or omission Evidence that a check on relevant qualifications has been made. Gaps in employment history are always explored and recorded in writing. System developed to check that CRB checks have been received prior to appointment Direct contact should be made with each referee to verify references 	05/09/04
6	BS38	Staff members must not begin work until satisfactory Criminal Records Bureau checks have been completed (38.7).	05/09/04
7	BS47	The Director of boarding must ensure that the boarding house has a valid electrical safety certificate, a copy of which should be forwarded to the Commission for Social Care Inspection.	31/10/04

GOOD PRACTICE RECOMMENDATIONS FROM THIS INSPECTION

Identified below are any additional areas arising from this visit which relate to the National Minimum Standards and are seen as good practice issues to be considered for implementation.

No.	Refer to Standard *	Recommendation Action
1	BS4	It is recommended that the administration of major punishments is recorded in writing in a suitable book or log (BS 4.6).
2	BS23	It is recommended that a formal system of regular monitoring by senior staff be introduced, which looks at the areas identified in Standard 23.2.

Note: Standard code is in respect of the relevant service; e.g. BS = Boarding School, CH = Children's Home, etc

INSPECTOR'S DECLARATION

(where applicable)

No further declaration made.

Lead Inspector	Susan Harvey	Signature	S Harvey
Date	26/07/04		

Public reports

It should be noted that all CSCI inspection reports are public documents.

PROVIDER'S RESPONSE

Registered Person's comments/confirmation relating to the content and accuracy of the report for the above inspection.

We would welcome comments on the content of this report relating to the Inspection conducted on 5th July 2004 and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

Action taken by the CSCI in response to provider comments:

Amendments to the report were necessary

Comments were received from the provider

Provider comments/factual amendments were incorporated into the final inspection report

Provider comments are available on file at the Area Office but have not been incorporated into the final inspection report. The inspector believes the report to be factually accurate

Note:

In instances where there is a major difference of view between the Inspector and the Registered Provider both views will be made available on request to the Area Office.

Please provide the Commission with a written Action Plan by 26th August 2004, which indicates how required or recommended actions and good practice recommendations are to be addressed and stating a clear timescale for completion. This will be kept on file and made available on request.

Status of the Provider's Action Plan at time of publication of the final inspection report:

Action plan was required	YES
Action plan was received at the point of publication	YES
Action plan covers all the statutory requirements in a timely fashion	YES
Action plan did not cover all the statutory requirements and required further discussion	
Provider has declined to provide an action plan	
Other: <enter details="" here=""></enter>	

Public reports

It should be noted that all CSCI inspection reports are public documents. Reports on children's homes are only obtainable on personal application to CSCI offices.







PROVIDER'S AGREEMENT

Registered Person's statement of agreement/comments: Please complete the relevant section that applies.

I Mr David Booth of Shaftesbury School & Sports College confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) and that I agree with the required/recommended actions made and will seek to comply with these.

Print Name	D J Booth	
Signature	D J Booth	
Designation	Headteacher	
Date	13/09/04	

I of am unable to confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) for the following reasons:

Print Name	
Signature	
Designation	
Date	 _

Note: In instance where there is a profound difference of view between the Inspector and the Registered Provider both views will be reported. Please attach any extra pages, as applicable.

Or

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