 scottish commission for
the regulation of care



Inspection Report

The Richmond Fellowship Scotland - Glasgow South Housing Support Service

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Glasgow
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Inspected by: Gerry Tonner
(Care Commission officer)

Type of inspection: Announced

Inspection completed on: 6 July 2009

Improving care in Scotland

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Service provided by:	
The Richmond Fellowship Scotland	
Service provider number:	
SP2004006282	
Care service number:	
CS2004061368	
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Easy read summary of this inspection report

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

We can choose from six grades:



We gave the service these grades

Quality of Care and Support		5	Very Good
Quality of Staffing		5	Very Good
Quality of Management and Leadership		5	Very Good

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

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

What the service does well

The service uses different methods to hear what people think about the supports being offered.

Comments from people who use the service are considered when staff appraisals are carried out and when a staff development day was carried out.

Many positive comments were made in relation to how the service is managed.

What the service could do better

The recording of the key work sessions and the carrying out of audits to support plans need further development.

What the service has done since the last inspection

Overall there have been improvements in the information recorded in the support plans sampled.

The manager has implemented more audits and improved support systems for staff.

Conclusion

The service continues to work hard at hearing the views of each person who receives support and checks that the supports match the needs of each person.

Who did this inspection

Lead Care Commission Officer

Gerry Tonner

Other Care Commission Officers

N/A

Lay Assessor

N/A

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

About the Care Commission

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

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

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

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

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

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

The "Care services" area of our website also:

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

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

About the National Care Standards

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

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

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

You can get printed copies free from:

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

What is inspection?

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

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

When we inspect a service, typically we:

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

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

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

Our work must reflect the following laws and guidelines:

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

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

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

Recommendations, requirements and complaints

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

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

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

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

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

How we decided what to inspect

Why we have different levels of inspection

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

How we decide the level of inspection

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

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

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

Our inspections take account of:

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

What is grading?

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

Quality of Care and support: how the service meets the needs of each individual in its care

Quality of environment: the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?);

Quality of staffing: the quality of the care staff, including their qualifications and training

Quality of management and leadership: how the service is managed and how it develops to meet the needs of the people it cares for

Quality of information: this is how the service looks after information and manages record keeping safely.

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

We grade each heading as follows:

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

We do not give one overall grade.

How grading works.

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

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

About the service we inspected

The Richmond Fellowship Glasgow South branch is composed of two services and provides an integrated Housing Support/Support Service; Care at Home service to adults with learning disabilities, mental health problems and drug and alcohol misuse problems. The service is provided to people within their own homes.

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

Quality of Care and Support	5 - Very Good
Quality of Staffing	5 - Very Good
Quality of Management and Leadership	5 - Very Good

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

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

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

How we inspected this service

What level of inspection did we make this service

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

What activities did we undertake during the inspection

Before the inspection was carried out the Care Commission Officer (CCO) checked the returned Care Commission questionnaires. 13 were returned from Service Users and 14 were returned from staff who provide the support.

A safer recruitment exercise was carried out to the organisation's headquarters by another CCO in advance of the inspection. The findings are reflected under Quality Statement 3.2.

Over the course of the two days the following were used as sources of evidence; -

Accident incident records

Minutes of meetings with Service Users

Information held within the participation folder

Face to face interviews with 4 Service Users

Telephone interview with 1 Service User

Telephone interview with a relative of a Service User

Interviews with the Manager

Interviews with 2 Senior Support Staff

Interview with 1 Support Worker

Interview with 4 Support Assistants

3 Personal Support and Development Agreements and associated records were examined.

Inspection Focus Areas (IFAs)

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

For 2009/10 we will focus on:

- Meaningful activity for all adult services
- How care services assess the health of people with learning disabilities
- Involving parents for children's services
- Medication for looked after children for residential accommodation for children

- How care services make sure they have safe recruitment procedures for staff for all services except childminders.

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

Fire safety issues

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

Actions Taken on Recommendations Outstanding

There were two recommendations made in the previous inspection; -

1. Support Plans should be up to date and reflect the current support needs and how these shall be met with each Service User. These should be "signed off" by Service Users to reflect their agreement with the content. National Care Standards Support Service; Care at Home, Standard 3: Your Personal Plan.

Through checking support plans this recommendation has been met. The service has also introduced a tracking sheet to reflect what checks have been carried out.

2. There should be agreed timescales for keyworker sessions and associated records should reflect the content of the same. National Care Standards Support Service; Care at Home, Standard 2: The Written Agreement.

Through checking associated records this recommendation has been met. There has been a recent workshop arranged for staff who keywork and there has been a system adopted to reflect the frequency of keyworker sessions agreed between staff and Service Users. Ongoing monitoring of the new system should be continued.

The annual return

We use annual returns (ARs) to:

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

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care Act (Scotland) 2001, Section 25(1). These forms must be returned to us between 6 January and 28 February 2009.

Annual Return Received

Yes

Comments on Self Assessment

The self assessment was completed to a good standard and detailed areas of strengths and areas for improvement.

Taking the views of people using the care service into account

Five people who use the service were spoken with over the course of the inspection. See comments made in the previous Quality Statements. The following is a range of comments received; -

"My keyworker is very understanding and staff help me organise my day."

"I've gone to the main office and discuss how the the quality assurance systems will work."

"I have been involved with the FOCUS group, we visit people who use the service at home and hear what their views are about the service."

"I was involved in putting questions together for when the service is interviewing new staff."

"I have attended the Participation Meetings and I'm satisfied with the supports that I get."

"I'm happy with the staff and the support I get is pitched at the right level. Previously I was not happy with the service and I received a visit from the external Manager. Things improved after this."

"Staff come with me when I have appointments with the psychiatrist. I find this really helpful."

"Input from The Richmond Fellowship has kept me afloat. With support from staff I have engaged more with the wider community."

"I find that I have positive working relationships with staff, the service is also flexible and responds to my needs."

"I have attended the Participation Meetings and have found people more willing to engage with Service Users and this is not some tokenistic approach."

One Service User raised some concerns relating to issues surrounding involvement with the FOCUS group. Possible options were discussed.

Thirteen completed Care Commission questionnaires were returned in advance of the inspection. Two indicated that overall they were very satisfied with the service, ten indicated that overall they were satisfied with the service and one indicated that they were overall dissatisfied with the service. It was unclear as to why the individual was dissatisfied with the service based upon the completed questionnaire.

Taking carers' views into account

One relative completed a Care Commission questionnaire and agreed to a telephone interview in advance of the inspection being carried out. The following is a selection of comments received; -

"My mother and I are delighted with the service provided to our relative. All staff are cheery and helpful."

"Staff provide support to do activities such as shopping and cooking. My relative's abilities have improved as a result. The staff are still working on building his confidence. He has been taken to a community project to try and get him involved with other interests."

"We are always invited to review meetings and we have been to a meeting arranged by the Manager."

"There have been some staff changes and some new faces that we are getting to know. All in all there have been positive relationships developed between my relative and staff. I have no concerns or issues."

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service Strengths

The service has developed participation folders. These contained a range of useful information; - the How Well Are We Doing Survey, participation leaflet, mission statement, choice in voting, complaints leaflet and information in connection with Care Commission grading.

The How Well Are We Doing satisfaction survey 2008/09 was used to formulate the Internal Full Report.

There were minutes of meetings held with people who use the service.

Service Users' views are taken into account when staff appraisals are carried out.

The service has issued questionnaires to relatives of people who use the service. See comments in the 'Areas for Improvement' section below.

It was encouraging to see that the service has actively involved Service Users with the self assessment of grades before sending this to the Care Commission. The information gained from questionnaires issued to Service Users has been used to develop a draft service plan.

Service Users have been asked if there are particular areas that they wish to be involved in including the recruitment of staff.

Areas for Improvement

The service should extend the use of questionnaires with relatives as indicated in their own plans.

A new system for auditing support plans and records has been introduced. Ongoing monitoring of this is required to ensure that this is being implemented fully.

There are plans to carry out a Stakeholder survey. This will be used to gain feedback from professionals who are involved with people who receive support from the service.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 2

We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential.

Service Strengths

Through checking the How Well Are We Doing Survey it was noted that there are specific questions relating to choices e.g. question 1 - Do we give you the right support? and question 5 - Do we help you gain access to local services and be part of the community? The return rate for the service was the highest of all the services with 70% of the questionnaires being completed and returned.

Through checking responses it was noted that the service had made the biggest improvements in the area of question 1.

Service Users were sent letters which gave them information on the results of the survey. There was also information detailing that each Service User can play a part in the recruitment and development of each staff member's skills.

There was evidence that the Manager has followed up issues that individual Service Users have raised via the survey.

Service Users have been sent a letter detailing that the service has produced a Healthy Lifestyle folder.

There has also been a letter sent detailing that there have been changes to funding arrangements and how this will change support arrangements.

Through checking three support plans and associated records, there were some examples of good practices e.g. staff initiated a review of existing risk assessments with other professionals involved as they were of the opinion that this was no longer valid to the individual Service User.

It was noted that there was good person centred information recorded and there were examples of staff being responsive to the wishes of Service Users. It was noted in a particular Support Plan that the Service User is encouraged to maintain his levels of independence and utilise acquired skills.

Risk assessments are being revisited following any incidents/accidents occurring.

Comments from people who receive support indicated that they are encouraged to make choices and maintain their independence. One Service User commented; - "With the support of staff I have engaged more with the wider community. It has helped me cope with my illness and also take up new interests. I find the support is flexible and takes account of my preferences".

Areas for Improvement

It is recognised that there are have been audits carried out with support plans. The quality of audits were found to be variable.

Reviews carried out should be in line with The Richmond Fellowship's own policy.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 1

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

Service Strengths

The service has arranged "drop in" sessions for Service Users. A number of questions were put to Service Users; - "What do you think makes a good member of staff?", "Questions you think we should ask at interviews"? and "How would you like to be involved"?

Questions gained from Service Users will be incorporated into the process of recruitment.

Service Users who have been involved with the organisation's FOCUS group have been involved with staff training.

A recruitment toolkit is used when recruiting staff.

Three staff appraisals were sampled. It was noted that these are well structured and relates to the individual's job description and key areas/roles. The appraisals sampled had lots of detailed information and contained feedback from Service Users and external organisations with regards each staff member.

Service Users were involved in developing the content of the team building/planning day. Information was also produced for Service Users after the event.

The service also encourages Service Users to share their views about the supports provided at the review meetings.

Areas for Improvement

The service should continue to develop methods of Service User participation.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 2

We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

Service Strengths

The Safer Recruitment sampling of The Richmond Fellowship Scotland took place on 19 May 2009 and was carried out by Care Commission Staff, Mary Tedford and Elaine Page.

The process involved looking at the recruitment policy and procedures as well as sampling staff files for each of the registered services throughout Scotland.

The findings of the central recruitment check are as follows; -

The provider had a recruitment and selection policy and procedure. This was comprehensive and gave detailed guidelines for recruiting managers. Previous recommendations and requirements had been addressed in the update of this policy and procedure.

Prospective employees were required to complete an application form. Applicants were provided with information about individual services and their aims and objectives as part of the interview process.

Recruitment practice required candidates to undergo a Disclosure Scotland check and provide the names of two referees one of which was from the immediate previous employer. Where a reference from an immediate previous employer was not possible the provider still considered employment but in appropriate location or situations only.

Records about Disclosure Scotland checks were appropriately stored and recorded and there was a system for rechecking these.

There was also a system to ensure that candidates were physically and mentally fit to undertake the work for which they were employed.

The provider had recently put into practice a system to check and record prospective employee's qualifications.

There were eleven completed Care Commission questionnaires returned by staff in advance of the inspection. The majority of comments made in the returned questionnaires and obtained through interviews supported that there are good training opportunities and they were familiar with the organisation's policies and procedures.

Areas for Improvement

There were a few less positive comments made from staff who had been in post for more than 2 years with regards their experiences relating to the induction process.

A comment was also raised with regards clarity of role with specific grades of staff.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

Statement 1

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

Service Strengths

Many of the Service Users spoken with were highly complimentary of the Senior Support staff and Manager.

Through checking the minutes of the Participation Meeting the Manager had been in attendance and actively sought the views of people who use the service as to how they wished to be involved in developing the service.

There were positive comments made with regards the "openness" of the Manager from Service Users. An example being; - "I'm very impressed with the Manager's approach, she gets the best out of people and does this naturally."

It was noted that the information obtained from surveys carried out with Service Users were shared with them. This information was also used to shape the content of the staff development day.

The Manager has been proactive in encouraging Service Users to share their views and to make suggestions as to how the service could be improved. A good example has been the formulation of questions for staff interviews.

There was a FOCUS Group workshop for Service Users and staff.

See comments relating to involvement of Service Users with the self assessed grades in Quality Theme 1, Statement 1.

Areas for Improvement

The Manager should carry out an analysis and action plan on returned questionnaires completed by professionals.

Further feedback should be sought from relatives.

Grade awarded for this statement

6 - Excellent

Number of Requirements

0

Number of Recommendations

0

Statement 3

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

Service Strengths

Through sampling it was noted that there is a well structured appraisal system used with staff. There were changes made to the content following feedback from individual staff members who had received an appraisal.

Following the Team Building/Service Planning Day a Senior Support Worker and Support Assistant were given the responsibility of devising a service plan from the information gathered. Questionnaires were used with Service Users in advance of the development day.

It is regarded as good practice that feedback in relation to the content of the development day was shared with Service Users after the event.

Through carrying out interviews with staff there were many positive comments received in relation to the support offered by management and staff felt involved in influencing the development of the service.

It is encouraging to see that action plans with associated timescales have been developed following feedback from Service Users in key areas such as staff appraisals and keyworker workshops.

Areas for Improvement

There are plans to develop pathways with staff. The works carried out to one part of the service such as the development day should be extended to all of the staff within the service.

Works carried out with auditing the keyworker sessions and support plans should continue.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Other Information

Complaints

No complaints have been upheld or partially upheld since the last inspection.

You can find information about complaints that have been upheld or partially upheld on our website: www.carecommission.com

Enforcements

We have taken no enforcement action against this service since our last inspection.

Additional Information

N/A.

Action Plan

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

Summary of grades

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 2	5 - Very Good
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 2	5 - Very Good
Quality of Management and Leadership - 5 - Very Good	
Statement 1	6 - Excellent
Statement 3	5 - Very Good

Inspection and grading history

Date	Type	Gradings
25 August 2008	Announced	Care and support 4 Staffing 4 Management and Leadership 4

Terms we use in our report and what they mean

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

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

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

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

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

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

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

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

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

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

How you can use this report

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

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

People who use care services, their relatives and carers

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

scottish commission for
the regulation of care



The Care Commission

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

Reader Information

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

Translations and alternative formats

This publication is available in other formats and other languages on request.

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

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ক্রম্যেটি এবং অন্যান্য ভাষায় পাওয়া যায়।

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Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

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Improving care in Scotland