



Making Social Care
Better for People

CSCI

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Mr Tom Cray
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27th October 2008

Ref: BDLS & LC

Dear Mr Cray

PERFORMANCE SUMMARY REPORT of 2007-08 ANNUAL PERFORMANCE ASSESSMENT OF SOCIAL CARE SERVICES FOR ADULTS SERVICES IN ROTHERHAM

Introduction

This performance summary report summarises the findings of the 2008 Annual Performance Assessment (APA) process for your council. Thank you for the information you provided to support this process, and for the time made available by yourself and your colleagues to discuss relevant issues.

Attached is the final copy of the Performance Assessment Notebook (PAN), which provides a record of the process of consideration by CSCI and from which this summary report is derived. You will have had a previous opportunity to comment on the factual accuracy of the PAN following the Annual Review Meeting.

The judgments outlined in this report support the performance rating notified in the performance rating letter. The judgments are

- Delivering outcomes using the LSIF rating scale

And

- Capacity for Improvement (a combined judgement from the Leadership and the Commissioning & Use of Resources evidence domains)

The judgment on Delivering Outcomes will contribute to the Audit Commission's CPA rating for the council.

The council is expected to take this report to a meeting of the council within two months of the publication of the ratings (i.e. by 31st January 2009) and to make it available to the public, preferably with an easy read format available.

ADULT SOCIAL CARE PERFORMANCE JUDGMENTS FOR 2007/08

Areas for judgment	Grade awarded
Delivering Outcomes	Good
Improved health and emotional well-being	Excellent
Improved quality of life	Good
Making a positive contribution	Excellent
Increased choice and control	Good
Freedom from discrimination and harassment	Excellent
Economic well-being	Good
Maintaining personal dignity and respect	Good
Capacity to Improve (Combined judgment)	Promising
Leadership	Excellent
Commissioning and use of resources	Promising
Performance Rating	2 stars

The report sets out the high level messages about areas of good performance, areas of development over the last year, areas which are priorities for development and where appropriate identifies any follow up action CSCI will take.

KEY STRENGTHS AND AREAS FOR DEVELOPMENT BY PEOPLE USING SERVICES

Key strengths	Key areas for development
All people using services	
<ul style="list-style-type: none"> • Promotion of healthier lifestyles via information and advice. • Partnership working across the council and with health. • Performance on reviews of peoples care. • Substantial reduction in the waiting list for occupational therapy and the fall in waiting times. • Consultation with and involvement of people who use services. • The range of measures in place to promote safety with high levels of satisfaction demonstrated. • The excellent range of service standards and systems to test customer satisfaction and perception. • Publication of complaints procedures and satisfaction levels with outcomes. • High levels of satisfaction from those who use equipment and adaptation services, domiciliary care service, out of hours services, and support at first contact. • Progress on direct payments. • The range of work to promote equality, and achieving level 4 of the equality standards for local government. • Effective partnership arrangements providing an increasing range of pathways to support people into work. • Most people are effectively safeguarded against abuse. An audit in year has led to improved safeguarding arrangements. • A radical restructure has been completed with capacity strengthened in key areas. • The extensive range of action to 	<ul style="list-style-type: none"> • The implementation of an electronic single assessment process. • Further development and usage of assistive technology. • Further shaping and influencing of the third sector provision of preventative services, and development of universal information and advice systems. • Further transformation of the in-house domiciliary care service to an enabling service. • Development of outcome based contracts. • Progressing the planned programme approach to personalisation. • Developing an outcome focussed performance management framework.

<p>improve performance.</p> <ul style="list-style-type: none"> • Self evaluation and benchmarking is used effectively. • Effective budget management and investment in adult social care. • A joint commissioning strategy has been agreed, and commissioning capacity increased. 	
<p>• Older people</p>	
<ul style="list-style-type: none"> • The joint 'Active in Age' training for staff that has improved levels of physical activity. • The increase in assessments of older people leading to a service, and an increase in service to 39% of those reviewed. 	<ul style="list-style-type: none"> • Further development of services to ensure older people are fully supported to live independently.
<p>People with learning disabilities</p>	
<ul style="list-style-type: none"> • Health action plans are in place for all people who use services. • The service has Beacon status. • People with a learning disability are helped to live at home. • The good progress on person centred planning and reviews. • High numbers of people are supported to work. 	
<p>People with mental health problems</p>	
<ul style="list-style-type: none"> • People with mental health problems are helped to live at home. • Progress on individual budgets. • High levels of satisfaction with the timeliness of contact and choice of support. • Focused implementation site for delivering race equality. 	<ul style="list-style-type: none"> • Improving the frequency of performance data supplied by the mental health service.
<p>People with physical and sensory disabilities</p>	
<ul style="list-style-type: none"> • Minor and major adaptations are delivered in a timely fashion. • Services for deaf and blind people are of a high quality. 	<ul style="list-style-type: none"> • Helping more younger people with a physical disability to enable them to live at home. • The development of additional respite and supported living services.
<p>Carers</p>	
<ul style="list-style-type: none"> • Carers services have improved. • The active work to identify carers resulting in more being known to adult social care. • The focus on support to employment during assessment processes. 	<ul style="list-style-type: none"> • Further improving carers services to ensure consistency of support, including support for employment.

KEY STRENGTHS AND AREAS FOR DEVELOPMENT BY OUTCOME

Improved health and emotional well-being

The contribution that the council makes to this outcome is excellent.

Almost all people who use services are helped to understand how to stay healthy and maintain their emotional well-being. There is a good range of health literature that is well publicised and easily accessed. Information seen was appropriately available in a range of formats. The council can demonstrate good and effective working relationships with health. For example, a joint commissioning strategy has been produced identifying key action areas. Individual advice and support is available for almost all groups, and initiatives are in place to target difficult to engage communities. There is some evidence of the effectiveness of health improvement work for the wider population with, for example, levels of chronic heart disease and strokes falling, and better than national averages. There is still work to do to reduce health inequalities, and the Local Area Agreement does identify improving health as a priority. A draft comprehensive health needs assessment has been completed for black and ethnic minority communities, and an action plan is being developed. This is a proactive piece of positive action.

Key strengths

- The council has continued to work effectively with partners to further improve the availability of health information and advice.
- There is a wide range of activity to promote health both in the wider population and with those who use social care services. For the latter, the council could evidence impact with individual stories about health improvements, and with data.
- In the learning disability service, all people who use services have a health action plan, and an audit tool has been developed to evaluate how these are improving health. Completed audits to date are showing significant health benefits.
- Regulatory inspection reports speak positively about individual support being available to meet health needs.
- The joint 'Active in Age' training programme for staff in care homes has improved levels of physical activity, mobility and social interaction.
- A carer wellbeing group for men has been set up.
- A memory clinic has been developed.
- Early intervention mental health services have been improved.
- Significant progress has been made reviewing the intermediate care service, and a range of improvements have been implemented, with further planned. It is clear that the service is effective in helping people return home.
- The rate of delayed discharges attributable to the council is zero.
- There is effective investment in rehabilitation to prevent the need for medical and social care intervention. Stays in hospital reflect medical need in almost all instances.
- The Alcohol Harm Reduction strategy was launched in year, and a new

service specification for rehabilitation was agreed. Services were reviewed and relocated, and new assessment procedures introduced. Waiting times for Tier 2 Alcohol services reduced considerably in year, and by the start of 2008-09 there was no waiting list.

- Retention in drug treatment services is good.
- Performance on reviewing people's care needs has improved significantly, and is now good. There is evidence of the effectiveness of these reviews, and high levels of satisfaction from those reviewed.
- Progress has been made on long-term conditions, with the council reporting they have exceeded National Service Framework targets. There is an emphasis on partnership working with a community matron service for case management, and an integrated case management approach.

Key area for development

- For single assessment – see outcome 4.

Improved quality of life

The contribution that the council makes to this outcome is good.

The independence of most people who use services and their carers is promoted. The learning disability service has been awarded Beacon status for its performance in helping people into work, listening to what they have to say and supporting them to live in their own home. People with mental health problems are also helped to live at home and considerable progress has been made providing direct payments demonstrating that the service is offering personalised services. The council is working to minimise the impact of disabilities and considerably more equipment to aid independence was delivered in year. There has been additional investment in, and more people have accessed, grant funded services. Signposting to preventative services has increased, and the council does monitor a sample of those referred onto other services to assess satisfaction with outcomes. For older people, the picture is more mixed, with good levels of intensive home care but fewer people helped to live at home. The council has however, reduced the number of older people admitted to care on a permanent basis. Whilst performance on this does remain behind comparators, the rate of improvement is greater, so the gap is narrowing over time. There has been an increase in assessments of older people leading to a service, and an increase in service to 39% of those reviewed. Carer's services have substantially improved and although performance remains behind comparators, there is an action plan in place, and evidence this year, suggests there is room for optimism for further continuous improvements.

Key strengths

- There has been active work to identify carers, with increased publicity and carers' champions in GP surgeries. A scheme to support carers in an emergency has been developed. All of this has resulted in a good increase in the numbers of carers known to adult social care services.
- Work with the PCT has resulted in a substantial reduction in the waiting

list for occupational therapy, and a 75% fall in waiting times. Minor and major adaptations are delivered in a timely fashion. There is a high level of satisfaction from those who use equipment and adaptation services.

- User satisfaction surveys, visioning days and the star ratings of the council provided regulated services, evidence that the council uses and provides good quality services.
- The 'Every Contact Counts' initiative is an innovative proactive way of ensuring older and vulnerable people receive services at an early stage, and is proving successful with 500 visits resulting in 246 referrals.
- An excellent range of measures is in place to promote safety, with high levels of satisfaction demonstrated.
- The in-house domiciliary care service is being transformed to an enabling service. There are now key milestones in place with a view to achieving the transformation in 2008. In the meantime, there is a high level of satisfaction from those using the current service.
- There is very positive feedback about the mainstream telecare service, Rothercare, with people saying it helps them to maintain their independence.
- Services for deaf and blind people are of a high quality, and a charter mark for customer excellence was retained.
- People with profound and multiple learning disabilities have their needs met through commissioning at an individual level.
- The access process has been modernised to ensure effective signposting to preventative services, and to improve information and knowledge about existing preventative services. There is an intranet site for staff to access information about preventative services.
- There have been considerable improvements in year in systems to test customer satisfaction and perception, and the council can now evidence that the majority of people who use services feel safe as a result.
- Directly provided and commissioned social care preventative services are proving to be successful, with people being diverted from residential care and unnecessary stays in hospital.

Key areas for development

- The council acknowledges that telecare needs to develop further and has a plan in place to implement a wider range of assistive technology.
- Support for younger people with a physical disability to enable them to live at home has fallen, and is low. The council has responded by setting new targets for the physical disability team, and provision of new resources to help meet these.
- There is further work to do to shape and influence the third sector provision of preventative services. This was identified in the Joint Strategic Needs Assessment, and work has started, and is planned for, in the commissioning strategy.
- Further development of services to ensure older people are fully supported to live independently.

Making a positive contribution

The contribution that the council makes to this outcome is excellent.

Almost all people who use services and their carers continue to be well supported to develop their confidence, ability and skills and to contribute to the wider community. Rotherham very actively seeks the views of the wider population and those who use services. There is an embedded culture of consultation and involvement and the council can point to numerous examples of ways in which people who use services have influenced service design. The council's innovative learning from customer's service, the use of customer diaries and the visioning days, are worthy of particular note. There is good support from the council to enable volunteering, and a good level of new volunteers have been identified in year. Rotherham's adult social care service has achieved 'Standard Bearer' status from the Cabinet Office for Customer Service Excellence.

Key strengths

- The Rotherham senior citizens network has been established.
- The council has an innovative service to learn from customers. This involves a number of people who use services meeting regularly to, amongst other things, improve accessibility of information, learn from complaints and carry out customer inspections of services. This had clearly led to a number of service improvements.
- Visioning days are a successful and integral part of service development, and have been given national recognition. These involve events with large numbers of people who use services and other stakeholders, to help shape priorities.
- Regulatory inspection reports confirm people do have a say in the running of the services that they use.
- The 'Home Truths' project tests the quality of services through video and handwritten diaries, by people recording their experiences of using services.
- The use of people's forums and focus groups.
- People who use services and carers have been involved in the mental health self assessment.
- The council has local performance indicators to monitor customer satisfaction. Performance improved in year. Almost all people said they were satisfied with opportunities to get involved, and that the council listens and acted as a result.

Key areas for development

- None

Increased choice and control

The contribution that the council makes to this outcome is good.

There have been considerable improvements in the timeliness and completion of assessments for older people, with business process re-engineering taking place in year, and the opening of 'Assessment Direct'. This means that most older people accessed timely assessments in year. This improvement is set within the context of considerably more new assessments. It is notable that since January there has been no backlog for assessments and 100% of people have been seen within 4 weeks. The increase in demand for assessments and reviews did lead to a slight fall in the timeliness of provision of services but management action has now reversed this fall. Review processes are effective. New processes and protocols have been put in place for carers assessments and performance has improved with more assessments completed in year. More statements of need have been issued in year but performance remains low in relation to other similar councils. This is due to the high volume of reviews conducted in year. Systems have been changed, and this should ensure further progress.

Almost all people who use adult social care and their carers are well informed about services via a wide range of appropriate methods. The council has an excellent range of service standards, all one page and user friendly. The care website has been improved in response to customer feedback. People who fund their own care have their own dedicated range of information.

The range of services is relatively broad, and the council is increasingly working to extend choice. For example, as stated elsewhere in this report there is further work underway to modernise the home care service, improve intermediate care and carers services. There is a need for more respite and supported living for people with a physical disability and to ensure older people are fully supported to be as independent as possible.

Key strengths

- In the learning disability service performance on reviews has substantially improved with 90% of people receiving a review in 2007-08.
- Regulatory reports and consumer surveys provide evidence that people believe they are treated with respect.
- Good progress has been made with person centred planning and reviews.
- Information on how to make a complaint is well publicised. Performance on complaints has improved in year with almost all people saying they are kept informed of the progress of their complaint. Satisfaction with outcomes has also increased and is good. There is considerable evidence of the council acting on complaints and improving services as a result where necessary.
- There is a high level of satisfaction with support at first contact with adult

social care. Almost all people said the council provides information that is clear and understandable.

- The council has assessed what services are needed outside of normal office hours and launched a new service in year. Satisfaction with the service has increased.
- There is a good range and level of advocacy services with plans to extend access to advocacy further.
- The council actively promotes rights of access to records with leaflets handed out to all customers during the assessment process and information is on the website.
- Self-assessment opportunities have increased in year.
- Excellent progress has been made in year on direct payments and in the mental health service on individual budgets. There is considerable evidence that people feel more in control as a result.
- Regulatory inspection reports on council operated services confirm care plans are detailed and reflect peoples needs.
- In the mental health service, almost all people report that they are satisfied with the timeliness of contact, and most are satisfied with the choice of support.

Key areas for development

- Single assessment - At present, some people do have to tell their story more than once.
- Progressing the planned work to ensure access to a full range of modernised services.

Freedom from discrimination and harassment

The contribution that the council makes to this outcome is excellent.

The council has been proactive in reviewing eligibility criteria in year with people who use services and their carers, and does have evidence of impact of the criteria. A review of information about the criteria also took place, and it was revised so that it is now clear and easy to understand. The council did find some inconsistencies in application and have actions in place to address this.

The council has been doing proactive work in year to establish if people who fund their own care actually access assessments. As a result of this, approval has been given to enhance the support for self-funders, to offer assessments **and** an annual review. This is to fully ensure that assessments are available to all, regardless of whether a person intends to fund themselves for a service or not.

The council has reached level 4 of the Equality Standards for Local Government. There is evidence that the council does meet most people's individual diverse needs with an appropriate and growing range of services. Action is clearly being taken to increase take up of services from under represented groups, with for example, work being done at the point of admission to hospital with people from ethnic minority backgrounds. Rotherham's mental health service is a focused implementation site for delivering race equality.

Key strengths

- People from black and ethnic minority communities do have equal access to assessments and services, and the council has been doing further work engaging with black and ethnic minority (BME) people at the point of admission to hospital, to further ensure accessibility and awareness of services.
- As an employer the council sets good standards, in that the proportion of BME in the workforce, reflects the proportion in the community as a whole.
- The council has published a disability equality scheme, which was put together after extensive consultation. Rotherham can demonstrate that it is meeting its responsibilities in this area.
- The council has undertaken 100% of the identified equality impact assessments.
- There is good evidence of consultation with people with a disability. Deaf/blind people were identified as a priority, and the council can point to progress and improved outcomes.
- There has been a good improvement in the percentage of council buildings that are accessible, with plans in place to achieve full compliance.
- A good range of advocacy services are available with plans in place to expand these.
- There is evidence of satisfaction with assessment processes, and that individual needs are met. People are assigned to a team for assessment.

Key area for development

- As an employer there is some work to do to ensure the council's workforce reflects the proportion of disabled people in the community, however, there are active measures in place to encourage people with a disability to apply for jobs.

Economic well being

The contribution that the council makes to this outcome is good.

There is an effective protocol between the council and the PCT covering continuing care and there were no disputes in year.

There are partnership arrangements in place to provide an increasing range of pathways to support people into work. Improving employment opportunities for all adults in Rotherham is a focus within the Local Area Agreement. A project started in January 2008 to support access to work for people with mental health problems. It is too early to assess the full impact of this, although early signs are positive. In physical disability services, the council reported good outcomes with people being assisted to find or maintain employment in a variety of ways. An

employment plan is in place to create further opportunities. There is a growing range of ways in which carers are supported and the council provided case studies evidencing the effectiveness of support offered. The adequacy of support is to be further reviewed when developing the new carers strategy in year.

The development of early intervention services is resulting in most people who receive support making reduced contributions. However, as stated earlier, there is work to do to ensure that older people's independence is further promoted.

An effective partnership arrangement exists to help people who use services to maximise their income.

Key strengths

- The council has improved attendance and leadership at the continuing care panel. This has been successful in that there is now a more equitable balance of funding which is moving towards the national average.
- The council continues to support high numbers of people with a learning disability into work.
- The new assessment form for carers is designed to ensure that employment support is addressed. Support to enable carers to work has been strengthened by improved day, respite and home care services to fit in with work patterns. There is increased access to direct payments to enable carers to arrange care around employment commitments. The new carers emergency scheme assists carers to make arrangements for emergency cover.
- People reported high levels of satisfaction with information they received about charges for social care, and with financial assessment home visits.

Key areas for development

- Continuing to support carers in employment.
- Ensuring the effectiveness of the project to support people with mental health problems into work.

Maintaining personal dignity and respect

The contribution that the council makes to this outcome is good.

Most people are effectively safeguarded against abuse. Work on awareness raising in year has contributed to an increase in referrals. The council has made sure that internal front line staff are aware of how to identify safeguarding issues and respond appropriately to concerns. There is still a training need for independent sector staff but considerable progress has been made in year. Privacy and confidentiality is assured in most cases through appropriate policies and procedures. A safeguarding board is in place, all partners are represented, and there is a multi-agency information sharing protocol. Serious case review processes are in place and the first one, now being undertaken, should help to advance practice in this area. The council and partners are working on production of a multi-agency safeguarding strategy, which is due to be finalised by December

2008. The council has improved access to preventative services in year, and there are early indications that early intervention has led to an increase in referrals to safeguarding. For example, via the 'Every Contact Counts' scheme.

The council and PCT have finalised a policy on interpersonal relationships. This has been developed with people who use services. Next steps are planned and include staff training on the new policy and to ensuring monitoring of practice.

Key strengths

- New South Yorkshire wide safeguarding procedures were launched in year.
- The council is proactive in dealing with contracted services that are offering poor quality services, and ceases contracts and/or placements when necessary.
- Resources dedicated to safeguarding have increased.
- The work in year to raise awareness of safeguarding has included visioning and leadership days, poster and publicity campaigns, and the 'Every Contact Counts' initiative. This has helped to ensure that council and PCT staff and the police, are trained to identify safeguarding issues.
- There is a specific safeguarding website and access arrangements have been improved and referrals can be made to a 24/7 hotline.
- Audits of practice have helped to improve safeguarding arrangements. Examples include:
 - New safeguarding standards and a framework to capture safeguarding issues have been developed.
 - An elected member champion is now in place.
 - Performance indicators have been developed.
 - Easy read procedure cards have been produced.
- All people admitted to care homes have access to single rooms.
- In the wider safeguarding arena, citizens have said that they feel much safer in their homes and communities, and there has been a reduction in crime.

Key area for development

- Safeguarding referral rates have increased but do remain low in relation to comparators. The council needs to do further work to understand why this is.

Capacity to improve

The council's capacity to improve services further is promising.

There is highly competent and determined leadership, a shared vision and targeted priorities for improvement. The council and the PCT are taking a joint approach to transforming social care and developing personalised services. A three year joint work programme has been agreed. Leaders are highly ambitious and champion the needs of almost all people who use services. People who use services and carers are extensively consulted on provision and there is clear

evidence of how their contribution effects developments. A comprehensive and developing range of measures are in place to ensure effective staff contribution. Plans are comprehensive and strategically linked, and there is good evidence of coordinated working across the council, and with partners. Plans for improvement have clear targets, and are bringing about improvements in many areas. The council has responded well to last years performance report and has considerably improved outcomes for people who use services. Performance management arrangements overall are effective, and can demonstrate that targets are mostly met. There are a small number of areas where plans for performance indicators were not met and where further improvements are needed.

The council and partners have produced a joint strategic needs assessment, which they inform us, is being held up by the Care Services Improvement Partnership as an exemplar. Expenditure on social care mostly reflects national and local priorities, and further modernisation is planned and underway. For example, the planned changes to domiciliary care and in-house older peoples residential care. The newly approved commissioning strategy does include investment in areas that would further modernise services, and does reflect achieving the outcomes in 'Our Health Our Care Our Say'. The council has a clear understanding of the social care market and commissioners do take action to deal with failing services that it contracts with. The council intends to introduce a quality assessment framework for the independent sector providers and proposes to link this to incentives for high achievers.

Key strengths

Leadership

- A radical restructure has been completed in year and capacity has been strengthened in key areas.
- There is an effective joint health and social care learning disability service.
- A workforce development strategy is in place, and data shows that the council has staff in place who are skilled.
- The council is working with the independent sector to ensure that there are people with skills and capability in place. A Learning and Development Officer has been appointed specifically for the sector, and training with a focus on common induction standards is being piloted. A comprehensive training programme is being developed, and funds were made available in year to the sector to improve learning. An evaluation found that these did encourage applications across the sector. There was a good increase in the numbers of independent staff accessing training courses in year.
- SCILS, a social care information and learning service was launched which is receiving positive feedback from providers.
- The council has been rated as a 4 star council in the Audit Commission's 2008 Corporate Performance Assessment.
- An extensive range of actions are being taken to improve performance and include:
 - Team and individual targets, and weekly performance clinics held with social work managers.
 - Named accountable managers to improve specific areas of

- performance.
- Regular reporting to senior managers.
- Investing to improve.
- As a result the number of assessments has doubled and reviews trebled. An historical backlog of 300 new assessments has been removed and management changes have been made in poorly performing teams. There have been considerable improvements in the blue badge scheme and waiting times for adaptations.
- Self-evaluation and benchmarking is used effectively.
- Excellent performance has been maintained on consultation and involvement.
- Staff contribute to planning and delivery of services, through visioning days, road shows, service and team planning, and personal development reviews.
- Effective systems are in place to communicate with staff, and include newsletters, employee opinion surveys, focus groups and the 'Reach In' panel of 300 council wide employees who are surveyed on topics within the council. Additionally, there is an employee involvement programme for staff to communicate with senior managers.

Commissioning and use of resources

- The council is purchasing care from good or excellent services at a higher proportion than average.
- A good level of efficiency savings were made, which were re-invested, and the council manages the budget effectively.
- The council has information about costs and quality, and uses this in service planning.
- The medium term financial plan demonstrates the council is investing in a modernised adult social care service.
- A joint commissioning strategy has been agreed, and capacity in joint commissioning has been increased.
- The council has a clear understanding of the social care market, and there are innovative measures to ensure that people's needs are met, such as the agreement to conduct annual reviews for self-funders.
- There are effective systems to proactively monitor and audit the quality of services provided by the independent sector. The council has demonstrated in year, that it will take action to investigate concerns and cease contracting if necessary. The emphasis is, however, on working alongside providers to improve services whenever possible.

Key areas for development

Leadership

- Progression of the planned programme approach to personalisation.
- Further work to ensure staff in the independent sector are adequately trained.
- Progression of plans to develop universal information and advice regardless of eligibility.
- Development of an outcome focussed performance framework, particularly for preventative services.
- Improving the frequency of performance data supplied by the mental

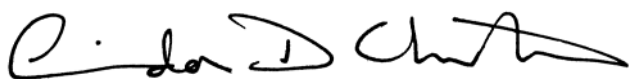
health service.

Commissioning and use of resources

- The development of outcome-based contracts.
- Further modernisation of the in house domiciliary care service.

A service inspection is being considered for this council for 2008/09 performance year.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Linda Christon', written in a cursive style.

LINDA CHRISTON
REGIONAL DIRECTOR

Commission for Social Care Inspection