

Inspection Report

5 September 2023



Camphill Community - Glencraig

Type of service: Day Care Setting
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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Camphill Community – Glenraig SEHSCT Responsible Individual: Mr Paul Betts	Registered Manager: Miss Anna Picmanova Date registered: 7 July 2021
Person in charge at the time of inspection: Miss Anna Picmanova	
Brief description of the accommodation/how the service operates: This is a day care setting which delivers care for up to 28 service users. The setting provides a person centred service that provides meaningful activities and opportunities for individuals living with a learning disability.	

2.0 Inspection summary

An unannounced inspection was undertaken on 5 September 2023 between 9.00 a.m. and 11.15 a.m. The inspection was conducted by a care inspector.

The inspection examined the agency's governance and management arrangements, reviewing areas such as: staff recruitment, professional registrations, staff induction / training and adult safeguarding. The following areas were also considered: the reporting and recording of accidents and incidents, complaints, whistleblowing, Deprivation of Liberty Safeguards (DoLS), service user involvement, restrictive practices, Dysphagia management, and compliance with Covid-19 guidance.

It was positive to note that service users benefited from a well led service. There was a clear leadership and management structure in place which helped to ensure that staff were knowledgeable about their role and responsibilities. The service was well organised and had a range of systems in place to support good communication.

Good practice was also identified in relation to service user involvement. Staff we spoke with demonstrated strong caring values and a desire to provide service users with personalised care.

Staff were familiar with the choices and preferences of individual service users and expressed a commitment to providing care in keeping with service users' care and support plans.

We noted some of the compliments received by the agency from various sources:

- "I'm happy the way my relative is supported; it's obvious she is well cared for."
- "Thanks to the team for (their) work."

- “Very happy with the opportunity afforded to my relative.”
- “Staff have set a high standard of care.”

The inspector would like to thank the staff and service users for their help, support and cooperation during this inspection.

3.0 How we inspect

RQIA’s inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

In preparation for this inspection, a range of information about the service was reviewed. This included registration information, and any other written or verbal information received from service users, relatives, staff or the commissioning trust.

As a public-sector body RQIA has a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of day care services, we are committed to ensuring that the rights of people who receive services are protected. This means we will be seeking assurances from providers that they take all reasonable steps to promote people’s rights. Users of day care settings have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted.

Having reviewed the “We Matter” Adult Learning Disability Model for N.I. (2020), the Vision States: We want individuals with a learning disability to be respected and empowered to lead a full and healthy life in their community. RQIA reviewed the support individuals were offered to take choices and decisions in their life that focused on enabling them to develop and to live a safe, active and valued life. RQIA also considered how service users were respected and empowered to lead a full and healthy life in the community and are supported to make choices and decisions that enables them to develop, and live safe, active and valued lives.

Information was provided to service users, relatives, staff and other stakeholders on how they could provide feedback on the quality of services; with easy read questionnaires and an electronic staff survey.

4.0 What did people tell us about the service?

During the inspection we spoke with a number of staff members and service users.

The information received by the inspector indicated that there were no concerns in relation to the day care setting.

Comments received included:

Service users' comments:

- "Good activities."
- "If I was unhappy, I would tell my parents."
- "Staff are very good."
- "I like it here."
- "I have no complaints."
- "Lots to do here."

Staff comments:

- "Open door policy here with the manager."
- "Good induction, comprehensive and supported by other staff."
- "I have one to one supervision."
- "We provide a range of activities including social outreach."
- "We have good relationships with families."
- "We get on well as a team."
- "All my training is up to date."
- "I'm aware of Northern Ireland Social Care Council (NISCC) responsibility as a care worker."
- "I'm happy with the ethos here."
- "We provide a very person centred service."

During the inspection we provided a number of easy read questionnaires for service users to complete and share their views in regard to service quality and their lived experiences:



- Do you feel your care is safe?
- Is the care and support you get effective?
- Do you feel staff treat you with compassion?
- How do you feel your care is managed?

No service user or staff questionnaires were returned prior to the issue of this report.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

The last care inspection of the day care setting was undertaken on 19 December 2022 by a care inspector. No areas for improvement were identified.

5.2 Inspection findings

5.2.1 Are there systems in place for identifying and addressing risks?

The day care setting's provision for the welfare, care and protection of service users was reviewed. The organisation's policy and procedures reflected information contained within the Department of Health's (DoH's) regional policy 'Adult Safeguarding Prevention and Protection in Partnership (July 2015) and clearly outlined the procedure for staff if they needed to report any concerns. The organisation had an identified Adult Safeguarding Champion (ASC). The annual safeguarding position report was reviewed and was satisfactory.

Staff were required to complete adult safeguarding training during their induction and every two years thereafter. Staff who spoke with us had a clear understanding of their responsibility in identifying and reporting any actual or suspected incidents of abuse and the process for reporting concerns. Staff could also describe their role in relation to reporting poor practice and their understanding of the day care setting's policy and procedure with regard to whistleblowing.

The manager retained records of any referrals made to the Health and Social Care (HSC) Trust in relation to adult safeguarding. No referrals had been made since the last inspection.

The manager had ensured that service users were provided with information about keeping themselves safe and the details of the process for reporting any concerns.

Staff were provided with training appropriate to the requirements of their roles. Where service users required the use of specialised equipment to assist them with moving and handling, this was included within the day care setting's mandatory training programme. A review of records confirmed that where the day care setting is unable to provide training in the use of specialised equipment, required training will be requested from the HSC Trust.

It was positive to note that a number of care reviews were undertaken in keeping with the day care setting's policies and procedures. The outcomes for people using the service reflected the principles and values of promoting choice and control, independence and community inclusion.

We noted some comments from recent reviews:

- "The placement remains appropriate."
- "Glenraig has been very good for my relative."
- "I'm happy with the placement and have no complaints."
- "Good staff flexibility."

It was positive to note that service users were supported to exercise choice and control in regard to decision making and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the setting supported this practice. Service users had the support of a team of staff who were suitably skilled and experienced to meet their assessed needs.

Staff had completed DoLS training appropriate to their job roles. The manager reported that a number of the current service users were subject to DoLS arrangements. The documentation in place was satisfactory and was included within the care plan.

Records examined identified that a number of safety checks and audits had been undertaken including fire alarm tests. It was noted that staff fire training, which included a full fire evacuation drill, was undertaken on the 19 April 2023. Fire risk assessments for the centre were completed on the 1 January 2023. During the inspection fire exits were observed to be clear of clutter and obstructions.

5.2.2 What are the arrangements for promoting service user involvement?

From reviewing service users' care records and in discussion with staff, it was good to note that service users and families had an input into devising individual activities. The service users' care plans contained details about their likes and dislikes and the level of support they may require.

Care records were written in a respectful way, supporting people to express their views and be involved in making decisions about their care, respecting and promoting people's privacy, dignity and independence. The quality of service provision had also been regularly reviewed through a range of internal and external audits.

Care and support plans were kept under regular review and service users and / or their relatives participated, where appropriate, in the review of the care provided on an annual basis, or when changes occurred.

The setting had completed a comprehensive annual report that was satisfactory. We noted some of the comments received:

Service users:

- "I like attending Glenraig Day Care and was looking forward to going swimming."
- "I enjoy watching the coloured moving lights."
- "I enjoy being at Glenraig."

Relatives:

- "Communication is excellent."
- "I am happy with the range of activities."
- "Overall I am pleased with the care provided."

Staff:

- "No day is the same, you are always busy and you know you are making a massive difference in the life of a service user."
- "I love working here. It is very rewarding."
- "I love working at Glenraig. I am part of a good team and have no concerns or issues."

HSC Trust staff:

- "The staff are always very good, proactive in communications, effective and professional in their approach."

- “I have also found staff to be contactable at all times.”
- “Feedback from families is that they are pleased with the quality of care their loved ones receive and personally feel welcomed into the setting.”

5.2.3 Is there a system in place for identifying service users Dysphagia needs in partnership with the Speech and Language Therapist (SALT)?

A number of service users were assessed by SALT and the documentation in place was satisfactory. A review of training records confirmed that staff had completed training on Dysphagia and in relation to how to respond to choking incidents. Swallowing awareness training was also completed by staff during First-Aid training.

5.2.4 What systems are in place for staff recruitment and are they robust?

A review of the day care setting's staff recruitment records confirmed that all pre-employment checks, including criminal record checks (Access NI), were completed and verified before staff members commenced employment and had direct engagement with service users.

All records in place were satisfactory in relation to the use of agency staff and included a comprehensive induction checklist where needed.

5.2.5 What are the arrangements for staff induction and are they in accordance with NISCC Induction Standards for social care staff?

There was evidence that all newly appointed staff had completed a structured orientation and induction, having regard to NISCC's Induction Standards for new workers in social care, to ensure they were competent to carry out the duties of their job in line with the agency's policies and procedures. There was a structured, induction programme which also included shadowing of a more experienced staff member. Written records were retained by the agency of the person's capability and competency in relation to their job role.

A record was maintained for each member of staff in respect of all training undertaken, including induction and professional development activities.

5.2.6 What are the arrangements to ensure robust managerial oversight and governance?

There were monthly quality monitoring arrangements in place in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. A review of the reports of the day care setting's quality monitoring established that there was engagement and observations with service users, relatives, staff and visiting professionals. The reports included details of a review of service users' care records; accident/incidents; safeguarding matters; staff recruitment, training and staffing arrangements.

Comments noted within monthly monitoring reports included:

Service users:

- “I like attending Glencraig.”
- “I’m well and enjoying the break.”
- “Content and relaxed.”
- “I enjoyed my birthday celebrations.”

Staff:

- “A nice team always willing to help.”
- “I have lots of support from the manager.”
- “A good team; no concerns or issues.”
- “I love it here and really enjoy it.”

Relatives:

- “My relative is so comfortable.”
- “I’m delighted with the service.”
- “It’s a great place and a big help.”
- “I can rely on staff to fill me in.”

HSC Trust staff:

- “Review very positive and parents very happy.”
- “Staff are really, really great.”
- “Communication with staff is very good.”
- “A really good fit for my client.”

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

There was a system in place to ensure that complaints were managed in accordance with the agency’s policy and procedures. No complaints had been received since the last inspection.

The day care setting’s registration certificate was up to date and displayed appropriately as was their current insurance documentation.

6.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with the manager as part of the inspection process and can be found in the main body of the report.



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