



The Regulation and
Quality Improvement
Authority

Inspector: Bronagh Duggan
Inspection ID: IN023588

Camphill Community Holywood

RQIA ID: 10566

The Flat

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**Unannounced Care Inspection
of
Camphill Community Holywood**

12 January 2016

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An unannounced care inspection took place on 12 January 2015 from 10.30 to 16.00. Overall on the day of the inspection the home was found to be delivering safe, effective and compassionate care. The standard we inspected was assessed as being met.

This inspection was underpinned by the Residential Care Homes Regulations (Northern Ireland) 2005 and The DHSPSS Residential Care Homes Minimum Standards (2011).

1.1 Actions/ Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

1.2 Actions/ Enforcement Resulting from this Inspection

Enforcement action did not result from the findings of this inspection.

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

2. Service Details

Registered Organisation/ Registered Person: James Morton	Registered Manager: Andrea Diesel
Person in Charge of the Home at the Time of Inspection: Andrea Diesel	Date Registered: 15 June 2005
Categories of Care: RC-LD, RC-LD(E)	Number of Registered Places: 4
Number of Residents Accommodated on Day of Inspection: 2	Weekly Tariff at Time of Inspection: £638 - £900 per week

3. Inspection Focus

The inspection sought to determine if the following standard has been met:

Standard 1: Residents' views and comments shape the quality of services and facilities provided by the home.

4. Methods/ Process

Specific methods/processes used in this inspection include the following:

Prior to inspection the following records were analysed: notifications of accidents and incidents submitted to RQIA.

During the inspection we met with two residents, two care staff and the registered manager.

The following records were examined during the inspection: two care records, minutes of residents' meetings, monthly monitoring reports, satisfaction questionnaire responses, relevant policies and procedures, accident and incident reports, staff training records, the home's Statement of Purpose and the fire safety risk assessment.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced care inspection dated 5 June 2015. No requirements or recommendations resulted from this inspection.

5.2 Review of Requirements and Recommendations from the last care inspection dated 5 June 2015

No requirements or recommendations resulted from the last Inspection.

5.3 Standard 1: Residents' views and comments shape the quality of services and facilities provided by the home.

Is Care Safe? (Quality of Life)

In our discussions with the registered manager and staff members on duty they confirmed that individual choices, preferences, or issues of concern identified by residents are listened to and readily acted on. We inspected two care records. These records included up to date needs assessments, risk assessments and care plans. These were found to be kept under continual review to reflect the needs and preferences of residents. Care reviews were up to date. We noted one of the updated care plans had not been signed by the resident or their representative. This was discussed with the registered manager who confirmed this would be completed without delay.

Staff demonstrated to us a good awareness of the values of independence, choice and consent. Staff were aware of the need to consistently demonstrate these values to underpin the practice of the home.

Is Care Effective? (Quality of Management)

The home had a policy in place which focused on residents' participation and involvement in activities. We inspected the home's Statement of Purpose which outlined the philosophy of care within the home. This included a holistic approach to community living promoting the social, working, leisure and activity aspects of daily life. The home has a commitment to promoting an active life with meaningful activities for residents. Residents have the opportunity to participate in regular residents' meetings. The registered manager also confirmed that due to the communal nature of the home residents will directly raise issues on a daily basis with staff members.

We requested the home's Annual Quality Review report. The registered manager confirmed that she had received the returned satisfaction questionnaires from residents, representatives and staff for 2015 and analysed the feedback however the final report was still to be compiled. Records available in the home confirmed this. We viewed the Annual Quality Review Report from 2014. The registered manager confirmed the 2015 report would soon be completed.

The registered manager confirmed that residents are actively encouraged to participate in activities which they enjoy to fully develop their potential. We inspected the monthly monitoring reports; these were completed on a regular basis and gathered the views of residents about their life in the home. Issues identified were appropriately actioned.

Is Care Compassionate? (Quality of Care)

In our discussions with the registered manager and staff members they confirmed that residents' individual needs and preferences are at the centre of care provision in the home.

In our observations of care practices and interactions between residents and staff we found that residents were treated with dignity and respect when being supported by staff. Residents were observed participating in meaningful activities and interacting readily with staff.

Areas for Improvement

There were no areas of improvement identified from the standard inspected. This standard was assessed as being met.

Number of Requirements:	0	Number of Recommendations:	0
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5.4 Additional Areas Examined

5.4.1. Residents' views

We met with two residents individually. In accordance with their capabilities both residents indicated that they were happy in the home, their relationship with staff and the provision of care. We noted that both residents were actively participating in areas of special interest.

One of the residents shared with us their current interests and aspirations for the future. The resident confirmed that he/ she was supported by staff in the home to participate fully in the services and facilities provided by the home.

Some comments received from residents included:

- “I am happy here; staff support me to do what I want to do. I have lots of different projects going on”.

5.4.2. Staff views

We spoke with two staff members who confirmed to us that staff were supported in their respective roles and that they were provided with resources to undertake their duties. Staff members confirmed residents’ views and comments shape activities and facilities available for residents.

5.4.3 Environment

We found the home was clean and tidy with no malodours present. The décor and furnishings were of a good standard. Residents’ bedrooms were personalised and homely.

5.4.4 Accidents and incidents

We reviewed the accident and incident notifications and discussed these with the registered manager. We confirmed that these had been managed appropriately.

5.4.5 Fire Safety

The registered manager confirmed the fire safety risk assessment was due to be completed on 14 January 2016. We requested that the registered manager forward confirmation to RQIA when this had been completed. We inspected fire safety training records, these showed staff training was maintained on an up to date basis. Fire safety check records were up to date. There were no obvious fire risks observed.

5.4.6 Compliments and complaints

We inspected complaint records maintained in the home these had been managed appropriately. We viewed a number of compliments provided to the home.

Areas for improvement

There were no areas of improvement identified within the additional areas examined.

Number of Requirements:	0	Number of Recommendations:	0
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No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	A Dixon	Date Completed	24/2/15
Registered Person	J Manton	Date Approved	24 Feb 15
RQIA Inspector Assessing Response		Date Approved	

Please provide any additional comments or observations you may wish to make below:

Please ensure this document is completed in full and returned to care.team@rqia.org.uk from the authorised email address

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations.