

Announced Care Inspection Report 21 December 2020



Camphill Community- Mourne Grange

Type of Service: Domiciliary Care Agency
Address: 169 Newry Road, Kilkeel, BT34 4EX
Tel No: 028 4176 0128
Inspector: Jim McBride

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

Camphill Community – Mourne Grange is a supported living type domiciliary care agency which provides a service to individuals who reside in Mourne Grange, Kilkeel, which is a life sharing community. There were 53 individuals receiving care and support at the time of the inspection, all of whom were living at Mourne Grange and most of whom were sharing their homes with other villagers and community members.

At the request of the people who use Camphill Mourne Grange the community has requested that RQIA refer to these individuals as 'Villagers'.

3.0 Service details

Organisation/Registered Provider: Camphill Community Responsible Individual: Mr Peter Dewndey	Registered Manager: Ms Elizabeth Angela Dixon
Person in charge at the time of inspection: Ms Elizabeth Angela Dixon	Date manager registered: 12 June 2015

4.0 Inspection summary

An announced inspection took place on 21 December 2020 from 09.15 to 12.15. Due to the coronavirus (COVID-19) pandemic the Department of Health (DOH) directed RQIA to continue to respond to ongoing areas of risk identified in services.

Since the last inspection on 25 February 2019 RQIA were not notified of any notifiable incidents. Whilst RQIA was not aware that there was any specific risk to the villagers within the service, a decision was made to undertake an on-site inspection. To reduce any risk this inspection was carried out adhering to all Covid-19 socially distanced guidance.

Evidence of good practice was found in relation to Access NI and staff registrations with the Northern Ireland Social Care Council (NISCC). Good practice was also found in relation to all current Covid-19 guidance and the use of PPE guidelines. Covid-19 education and management including: infection prevention and control were found to be in line with latest guideline measures.

This inspection was underpinned by the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and The Northern Ireland Social Care Council (Social Care Workers Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017 and the Domiciliary Care Agencies Minimum Standards, 2011.

The findings of this report will provide the manager with the necessary information to assist them to fulfil their responsibilities, enhance practice and villagers experiences.

4.1 Inspection outcome

	Regulations	
Total number of areas for improvement	0	0

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

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

4.2 Action/enforcement taken following the most recent care inspection dated 25 February 2019

No further actions were required to be taken following the most recent inspection on 25 February 2019.

5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA about this agency. This included the previous inspection report and any written or verbal communication received since the previous care inspection.

During our inspection we focused on contacting the villagers and staff to find out their views on the service.

We ensured that the appropriate staff checks were in place before staff visited villagers and reviewed the following:

- Recruitment records specifically relating to Access NI and NISCC registration.
- Covid-19: guidance for domiciliary care providers in Northern Ireland Updated 16 June 2020

RQIA provided information to villagers, staff and other stakeholders that will support feedback on the quality of service delivery. This included 'Tell us' cards, villager's questionnaires and a staff poster to enable the stakeholders to feedback to the RQIA.

The information received shows that people using the service were satisfied with the current care and support. Comments received are included below.

Villager's questionnaire comments:

"I'm a farmer, I help the community."

RQIA information leaflets 'How can I raise a concern about an independent health and social care service' were also provided to be displayed appropriately.

During the inspection we communicated with the manager and staff and had the opportunity to meet three villagers.

Villager's comments during inspection:

- "I feel safe and secure here."
- "Staff listen to you."
- "All staff are very good."
- "I like to keep in touch with my family."
- "My home is excellent and I get on well with others."
- "I enjoy my work and my activities."
- "I'm treated well and get respected."
- "My views are welcomed by staff."
- "We all got the covid vaccine recently."

Staff comments during inspection:

- “It was good to get the vaccine recently.”
- “Good covid-19 information and training including PPE training helps to keep us all safe.”
- “Good team support.”
- “Excellent management support and an open door policy.”
- “We continue to provide choices and promote independence.”
- “We have helped people with social media to enable them to keep in contact with family.”

We would like to thank the villagers and staff for their support and co-operation throughout the inspection process.

6.1 Inspection findings

Recruitment:

The agency’s staff recruitment processes were noted to be managed in conjunction with the organisation’s Human Resources (HR) Department. Discussion with the manager identified that they were knowledgeable in relation to safe recruitment practices in accordance with Regulation 13, Schedule 3 and Standard 11 relating to Access NI. We reviewed documentation in staff files in relation to pre-employment checks which provided assurances that Access NI checks were completed before commencement of employment.

Staff spoken with said that training was valuable and gave them the skills to undertake their role. New staff received a comprehensive induction which included regular meetings and the opportunity to shadow experienced staff. This was confirmed by the staff spoken with.

Staff were supported by supervisions and appraisals. It was noted that these had been consistent with the agency’s policy and procedure and helped to enable them to review their practice. From review of records, we could see the formats gave staff the opportunity to raise any concerns and discuss their own personal development.

The agency’s provision for the welfare, care and protection of villagers was reviewed. We viewed the procedures maintained by the agency in relation to the regional guidance ‘Adult Safeguarding Prevention and Protection in Partnership’ July 2015.

On the day of the inspection it was noted that a number of incidents had taken place since the previous inspection 25 February 2019. These were dealt with appropriately by the manager and in conjunction with the HSC Trust.

The agency maintains and implements a policy relating to complaints. On the day of the inspection it was noted that the agency had received no complaints since their previous inspection 25 February 2019.

A review of records confirmed that all staff are currently registered with The Northern Ireland Social Care Council (NISCC). We noted that the manager had a system in place each month for monitoring registration status of all staff with NISCC and confirmed that all staff are aware that they are not permitted to work if their NISCC registration had lapsed.

Service quality:

The agency had completed an annual quality review and the villagers had the opportunity to feedback on the quality of the service it was good to note the positive feedback.

We reviewed a number of monthly quality monitoring reports that show good satisfaction levels in place for villagers, staff and other stakeholders. We noted some of the comments received from villagers, staff, relatives and HSC staff:

Villagers:

- “It’s nice to be independent.”
- “The staff are friendly.”
- “You can always ask for help.”

Staff:

- “Friendly and supportive.”
- “We get to know people very well.”
- “Staffing levels are adequate.”

Relatives:

- “We will always be grateful for all the care.”
- “It is a very friendly place.”
- “It’s all going good.”

HSC Staff:

- “The environment is very supportive.”
- “It really is a very caring environment.”
- “A positive working environment.”

Care planning and review:

We reviewed care plans in place for individual villagers. These fully described the care and support required for individuals and included:

- Referral information
- Care plan
- Individual action plans
- Risk assessments
- Reviews

The agency must be commended for their ongoing work with annual reviews for individuals.

We noted some of the comments provided during annual reviews:

- “I’m happy at Mourne Grange.”
- “**** is very happy here.”
- “More than happy with the support we receive.”
- “I’m happy with my service and situation.”

Staff we spoke with demonstrated good caring values and a desire to provide villagers with high quality personalised care. They knew villagers well including their choices and preferences. This was evidenced when speaking with villagers.

We reviewed the recent piece of work that the villagers had completed on video essentially a service users guide to the community. The villagers must be commended for their work on this project that really brings to life the experiences of the community and their values.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

Covid-19:

We spoke with the manager and staff members, who were knowledgeable in relation to their responsibility in relation to covid-19. Staff stated they were aware of the guidance on the use of PPE for activities that brought them within two metres of villagers. Staff were also aware of the need to replace PPE between villagers and how to appropriately dispose of used PPE.

We reviewed the current practices relating to the following areas of guidance and good practice relating to Covid-19.

- Dissemination of information to staff
- Monitor staff practice
- IPC policies and procedures
- Infection prevention and control policies and procedures have been updated to address all current guidance in relation to Covid-19.
- Temperature monitored twice daily in line with guidance
- Used PPE storage and disposal
- Staff training and guidance on: a. infection prevention and control and b. the use of PPE, in line with the current guidance.

We reviewed records relating to infection prevention and control policies which were in-line with the current guidance. The policies and procedures had been updated to include Covid-19 guidance. Policies and guidance were available to all staff in hard copy within the agency office.

We reviewed records indicating that villagers, staff and visitors had their temperatures monitored twice daily in accordance with the guidance.

Monitoring records also involved asking about and looking out for the following symptoms, fever of 37.8C or above, cough, loss of or change in sense of smell or taste.

Hand sanitisers were placed in different areas throughout the agency for villagers, staff and visitors to use to ensure and promote good hand hygiene.

There was evidence that clear guidance with regards to IPC, donning (putting on) and doffing (taking off) of PPE. There was evidence that staff had completed training with regards to IPC.

The staff on duty demonstrated that they had a good understanding of the donning and doffing procedures and were observed to be using PPE appropriately. The manager discussed the procedures that both she and staff spot check the use of PPE during shifts. Spot checks on staff practice are undertaken to ensure they are fully compliant with the guidance.

The procedure and guidance in place show that:

- Robust systems are in place to ensure that current infection prevention and control guidance is available and accessible to staff.
- There are effective systems in place to monitor staff compliance with good infection prevention and control practices.
- All staff working in the service are able to demonstrate their knowledge of infection prevention and control practice commensurate to their role and function in the service.

It was good to note that staff were working well together to support the best outcomes for villagers, in a sensitive manner, whilst being caring and compassionate.

It was noted that staff were committed to working in line with Covid-19 guidance to ensure that the impact of current measures, strikes the correct balance between keeping people safe and promoting a good quality of life. Staff are being vigilant in terms of monitoring villagers for symptoms and are adhering to the public health guidance in order to minimise the risk of introducing or spreading Covid-19 within the agency.

Areas of good practice

Compliance with the Covid-19 guidance relating to IPC and PPE

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



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