



The Regulation and
Quality Improvement
Authority

Camphill Community - Clanabogan
RQIA ID: 11040
15 Drudgeon Road
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Inspector: Audrey Murphy
Inspection ID: IN23110

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**Unannounced Care Inspection
of
Camphill Community – Clanabogan**

21 August 2015

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 21 August 2015 from 10.30 to 16.00. Overall on the day of the inspection the agency was found to be delivering safe, effective and compassionate care. There were no areas for improvement identified during the inspection. This inspection was underpinned by the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies 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: Caphill Community – Clanabogan/Mr Martin Sturm	Registered Manager: Ms Peggy Faulhaber
Person in charge of the agency at the time of Inspection: Ms Peggy Faulhaber	Date Manager Registered: 02 October 2009
Number of service users in receipt of a service on the day of Inspection: 29	

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following standards and themes have been met:

Theme 1: Staffing Arrangements - suitable staff are supplied to meet the assessed needs of service users

Theme 2: Service User Involvement - service users are involved in the care they receive

4. Methods/Process

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

Prior to inspection the following records were analysed:

- Complaints records
- Records of incidents notified to RQIA
- Inspection report of 6 and 10 June 2014 and quality improvement plan.

Since the previous inspection, the agency had reported five incidents to RQIA, two of which were in relation to medications and the remainder related to behavioural issues. The inspector was satisfied that appropriate action had been taken following each incident and that the agency had managed each incident in conjunction with the HSC Trust.

During the inspection the inspector met with six service users and with four care staff. The inspector distributed questionnaires to staff and service users during the inspection; ten of these were returned by staff and six by service users. During the inspection the inspector requested details of the relatives of service users who would be willing to be contacted by the inspector for the purposes of obtaining their views on the quality of service provision. The inspector also requested contact details of HSC Trust professionals who are involved in the service.

The views of service users, agency staff, relatives and HSC Trust professionals have been incorporated into this report.

The following records were examined during the inspection:

- Recruitment Policy
- Recruitment records
- Alphabetical index of staff
- Job descriptions
- Induction procedures and records
- Staff training records
- Staff handbook
- Supervision and appraisal policy
- Monthly quality monitoring records
- Support agreements
- Care records.
- Staff duty rotas.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the agency was an announced care and finance inspection dated 6 and 10 June 2014. The completed QIP was returned and approved by the inspector. The matters arising from the inspection of 6 and 10 June 2014 related to finance and the agency's progress towards compliance with these regulations and minimum standards was not evaluated during this inspection.

5.2 Theme 1: Staffing Arrangements - suitable staff are supplied to meet the assessed needs of service users

Is Care Safe?

The agency's 'Recruitment of Co-workers and Employees' policy was examined and reflected the arrangements for the recruitment of staff locally, nationally and internationally. The policy outlines the recruitment and selection process including application, shortlisting, interviewing and a range of pre-employment checks. The inspector examined the recruitment records maintained by the agency and these evidenced that criminal history disclosures (Access NI) had been obtained at the enhanced level. The records also provided evidence of the practice of overseas staff (co-workers) having their criminal records checked and evaluated prior to the new worker being offered a position at Camphill Clanabogan.

The pre-employment recruitment information examined provided evidence that all of the matters outlined in the regulations and minimum standards had been obtained and evaluated prior to the new worker being supplied.

The agency maintains an alphabetical index of staff and this also identifies the areas within Camphill Clanabogan each member of staff is deployed. It was noted that several domiciliary care staff have dual roles and provide a service within the registered day care setting which is on site.

The agency's 'Induction of Staff' policy was examined and had been updated in June 2014; the policy referred to the NISCC induction standards and to the Camphill Community Clanabogan workbook which is completed within the new worker's first six months of arrival.

The agency's 'log of induction for support workers' record was examined and reflected a structured induction covering a range of areas including agency policies. The induction period includes service user specific training/guidance, guidance on supervision/appraisal, communication and health and safety.

The agency has arrangements in place for cover of the registered manager and the responsibility to inform RQIA of any absence lasting more than 28 days. The agency's staff cover procedures also outline the arrangements for giving service users notice of staffing changes and communication of all days off, breaks and holidays.

The registered manager confirmed that all staff have been issued with a copy of the 'Camphill Community Clanabogan Community Handbook'; the handbook was examined during the inspection and included information for staff on their roles and responsibilities, training opportunities, supervision and appraisal and a range of other information. The agency had

also prepared a separate 'co-worker' handbook which had been designed for short term workers, many of whom were from overseas.

The agency's Appraisal and Supervision policy outlines the arrangements for formal supervision meetings, the records to be kept and annual appraisal for all staff members. The agency maintains details of supervision provided to staff of all grades. These records were examined and provided evidence of all staff receiving supervision in accordance with the agency's policy.

Staff who participated in the inspection confirmed that they receive regular supervision and that records of these meetings are maintained.

A HSC Trust professional who contributed to the inspection described the staff as dedicated, caring and person centred. The HSC Trust professional also stated that staff are well trained and that the service is well managed with service users' needs and preferences at the centre of service provision.

Is Care Effective?

The agency's records evidenced the supply of staff to each of the households occupied by service users and Camphill staff; Service users who participated in the inspection spoke positively about their relationships with staff and there was evidence of consistency and continuity of service provision.

The registered manager confirmed that the agency does not use any other domiciliary care agency to supplement staffing levels and that staffing is provided only by Camphill Clanabogan employees and co-workers.

Agency staff who returned a questionnaire all indicated that they were satisfied or very satisfied that there is at all times an appropriate number of suitably skilled and experienced staff to meet the needs of service users. All of the service users who returned a questionnaire also indicated that they were satisfied or very satisfied that staffing levels are appropriate at all times.

The provision of induction was discussed in detail with a coordinator who provided a description and records of the three day initial induction period. The coordinator also confirmed that a lengthy induction and training programme was scheduled to commence for a group of co-workers who were due to join the community as volunteers. The induction records examined provided evidence that all staff and volunteers undertake a structured induction which takes into account the views and needs of service users. Staff who returned a questionnaire all confirmed that their induction had adequately prepared them for their role.

Is Care Compassionate?

The registered manager confirmed that staff in supervisory roles have received training in the provision of supervision. Several supervisory staff participated in the inspection and described the range of supervision available to staff including weekly peer supervision and formal supervision every three months.

Staff who participated in the inspection that they were familiar with the agency's policy on Whistleblowing and knew how to access this.

Service users who returned a questionnaire indicated that they are satisfied or very satisfied that staff know how to meet their needs and that staff help them to feel safe and secure in their homes.

A service user's relative advised the inspector that staff provide that their relative with a wide range of activities and opportunities and regularly seek the views of their relative and encourage them to make choices.

Areas for Improvement

There were no areas for improvement identified within this theme.

Number of Requirements:	0	Number of Recommendations:	0
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5.3 Theme 2: Service User Involvement - service users are involved in the care they receive

Is Care Safe?

The agency receives referrals from a number of HSC Trusts, from the HSE and from councils in England and Scotland. The inspector discussed in detail with several agency staff the range of service users' needs being met by the agency.

There was evidence of the needs of service users being reviewed regularly by agency staff and of communication with the relevant Trust/agency in relation to changing needs. Staff who met with the inspector provided a number of examples in which service users' independence and access to the community had been promoted through a process of positive risk taking, regular review and ongoing evaluation.

A service user's relative and a HSC Trust professional commented on the high standard of communication between them and Camphill Clanabogan and highlighted the efforts of staff to ensure that the service users' views are represented during reviews.

A HSC Trust professional advised the inspector that staff provide very comprehensive review reports and ensure that the service user is involved in all aspects of the care and support they receive.

Is Care Effective?

The agency has a policy on Human Rights and this provides guidance to staff on the Human Rights Act, restraint and deprivation of liberty. The policy refers to Camphill Clanabogan's responsibility to provide service users with information about their human rights; the service users' handbook contains information about human rights in a user friendly style.

Service users who contributed to the inspection indicated that they were very satisfied with the care and support received and that their views and opinions are sought about the quality of service provision.

Is Care Compassionate?

The inspector was advised of the arrangements in place for seeking and responding to the views of service users. These include monthly house meetings, monthly quality monitoring,

annual PCP (person centred planning) meetings and through annual questionnaires. Staff who contributed to the inspection indicated that their views are listened to and taken into account in the way services are provided and delivered.

A HSC Trust professional highlighted their experience of effective communication between staff and the Trust and attributed the quality of the services provided by Camphill Clanabogan to good management, staff dedication and person centred approaches.

Areas for Improvement

There were no areas for improvement identified within this theme.

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

Quality Monitoring

The reports of the quality monitoring undertaken were examined and had been completed on behalf of the responsible person. The reports had been completed monthly and reflected the views of service users, their relatives and staff. The reports also contained details of areas for improvement and action plans outlining timescales for improvements. Progress toward identified areas for improvement was also noted. The quality monitoring reports were detailed and included the monitoring of staff induction, training, financial records, house meetings, use of behavioural interventions including restrictive practices and the duty roster.

Staff Training Records

The agency's staff training records were examined and provided evidence of uptake in training in the mandatory areas in accordance with RQIA guidance. There was also evidence of training being provided in the areas of Person Centred Planning, Dealing with Complaints, Learning Disability and Dementia, Mental Health, Advocacy in Social Care and Consent and Capacity.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager		Date Completed	
Registered Person		Date Approved	
RQIA Inspector Assessing Response		Date Approved	

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

Please complete in full and returned to agencies.team@rqia.org.uk from the authorised email address



A completed Quality Improvement Plan from the inspection of this service has not yet been returned.

If you have any further enquiries regarding this report please contact RQIA through the e-mail address info@rqia.org.uk