

# Unannounced Care Inspection Report 9 March 2020











## **Camphill Community Care - Clanabogan**

Type of Service: Domiciliary Care Agency Address: 15 Drudgeon Road, Omagh, BT78 1TJ

Tel No: 02882256100 Inspector: Kieran Murray

www.rqia.org.uk

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 – Clanabogan is a supported living type domiciliary care agency which provides a service to individuals who reside in Clanabogan, which is a life sharing community.

There were 29 individuals receiving care and support at the time of the inspection, all of whom were living in the Clanabogan community and sharing their homes with other service users and community members. Community residents are supported by 25 staff which includes the manager.

#### 3.0 Service details

Organisation/Registered Provider: Camphill Community - Clanabogan  Responsible Individual(s): Martin Sturm	Registered Manager: Ms Peggy Faulhaber
Person in charge at the time of inspection: Ms Peggy Faulhaber	Date manager registered: 02/10/2009

#### 4.0 Inspection summary

An unannounced inspection took place on 9 March 2020 from 14.10 to 17.50.

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 the Domiciliary Care Agencies Minimum Standards, 2011.

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the agency was delivering safe, effective and compassionate care and if the service was well led.

All community residents, relatives, HSCT community professionals and staff spoken with said they were very happy with the care and support provided.

No areas requiring improvement were identified during the inspection.

Evidence of good practice was found in relation to AccessNI and staff registrations with the Northern Ireland Social Care Council (NISCC).

The findings of this report will provide the agency with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users' experience.

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## 4.1 Inspection outcome

	Regulations	Standards
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 Peggy Faulhaber, Registered 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 28 February 2019

No further actions were required to be taken following the most recent inspection on 28 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, notifiable events, and written and verbal communication received since the previous care inspection.

During our inspection we focused on contacting the service users, their relatives and staff to find out their views on the service. We also spoke with HSCT professionals involved with the service.

We ensured that the appropriate staff checks were in place before staff visited service users.

Recruitment records specifically relating to Access NI and NISCC registration.

Ten questionnaires were also provided for distribution to community residents and their relatives; no responses were received prior to the issue of the report.

At the request of the inspector, the manager was asked to display a poster prominently within the agency's registered premises. The poster invited staff to give their views and provided staff with an electronic means of providing feedback to RQIA regarding the quality of service provision. One response was returned; analysis and comments are included within the report.

The inspector requested that the manager place a 'Have we missed you?' card in a prominent position in the agency to allow community residents and family members who were not available on the day of the inspection to give feedback to RQIA regarding the quality of service provision. No responses were received prior to the issue of the report.

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

During the inspection the inspector met with six community residents, manager, responsible individual, social care and general management facilitator, five staff members, HSCT community professional and a telephone conversation with two community residents' relatives.

The inspector would like to thank the manager, responsible individual, community residents, community resident's relatives, HSCT community professionals and staff for their support and co-operation throughout the inspection process.

The findings of the inspection were provided to the manager at the conclusion of the inspection.

#### 6.0 The inspection

There were no areas for improvement made as a result of the last care inspection 28 February 2019.

#### 6.1 Inspection findings

The inspector reviewed 17 staff files (which included seven staff used from a registered domiciliary care agency) and discussed the agency's staff recruitment processes which confirmed that relevant pre-employment checks evidenced that the agency were knowledgeable in relation to safe recruitment practices in accordance with Regulation 13, Schedule 3 and Standard 11 relating to AccessNI.

A review of 25 records confirmed that all staff were currently registered with NISCC as required. The inspector noted that the manager had a system in place each month for monitoring registration status of staff with the relevant regulatory body and confirmed that all staff are aware that they are not permitted to work if their NISCC registration had lapsed.

#### **Community resident's comments:**

- "The environment is nice."
- "It is a safe place."
- "Staff support me all the time."
- "I go home every fortnight on the bus by myself."
- "We can make decisions."
- "We have a farm with cows and pigs."
- "The staff give me a lot of respect."
- "I cook dinner and sometimes invite my friends around."
- "I like the peace and quiet."
- "We have a review with my social worker and family."
- "I live alone in my own home."
- "The staff are friendly."
- "My mum comes to stay over at times."

The inspector spoke to five staff members, who were knowledgeable in relation to their responsibility in reporting concerns. The staff members spoken to were confident that management would take them seriously and act upon their concerns. Some comments received are detailed below:

#### Staff comments:

- "I would report any concerns verbally and written."
- "Everybody gets on well."
- "We promote openness and transparency."
- "Training prepared us for our roles and responsibilities."
- "We got a period of shadowing."
- "A process is in place to cover void shifts."
- "Good level of communication within the community."

The inspector also spoke to two service users' relatives and two HSCT community professionals. Some comments are detailed below:

#### Relative's comments:

- "They are brilliant with XXXX."
- "We are so relieved that they do such a good job."
- "I would speak very highly of the staff."
- "It has taken a great load of our mind."
- "XXXX has a quality of life we never envisaged."
- "We never cease to be inspired by the level of dedication shown by all the community."
- "These people (staff) are really the heroes of our time."
- "They take him out on so many outings, meals and discos."
- "They are very respectful."
- "The place is immaculate."

#### **HSCT** community professional:

- "There is positive feedback at reviews."
- "Staff are very thorough in their review process."
- "The staff meets the community resident's needs."
- "I haven't seen anything other than respect for community residents."

One returned response from staff indicated that they were 'very satisfied' care was safe, 'satisfied' care was both effective and compassionate and 'very satisfied' that the service was well led.

#### Areas of good practice

Areas of good practice were identified in relation to the completion of AccessNI checks and staff's registrations with NISCC.

#### **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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