



The **Regulation** and
Quality Improvement
Authority

Camphill Community Glengraig
RQIA ID: 1608
4 Seahill Road
Craigavad
BT18 0DB

Inspector: Kylie Connor
Inspection ID: IN022644

Tel: 02890423396
Email: kate.price@glenraig.org.uk

**Announced Care Inspection
of
Camphill Community Glencraig
27 May 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 announced care inspection took place on 27 May 2015 from 11.30 to 15.30. We confirmed that a variation to register one bed in a house named Ceridwen was approved. This house was included on the condition of the registration of Camphill Community Glencraig. We inspected the previous QIP and confirmed that all requirements and recommendations were met. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report.

This inspection was underpinned by the Residential Care Homes Regulations (Northern Ireland) 2005, The DHSSPS 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 care 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	2

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

2. Service details

Registered Organisation/Registered Person: Camphill Community Glencraig/Vincent Reynolds	Registered Manager: Catherine Price
Person in charge of the home at the time of inspection: Catherine Price	Date manager registered: Registered from 2013 with RQIA
Categories of care: RC - LD and RC - LD(E)	Number of registered places: 47 Day care places: 13
Number of residents accommodated on day of inspection: 39	Weekly tariff at time of inspection: £684.11 - £916.25

3. Inspection focus

The inspection sought to assess progress with the issues raised during and since the previous care inspection and to carry-out an inspection pertaining to a variation application. This variation was in regard to registering one bed in a house named Ceridwen.

4. Methods/ Process

We met with the registered manager; spoke to two care staff and to two residents. We inspected records including 3 care records, a staff rota for one identified house and 2 registered provider reports. We inspected the environment of two houses named Ceridwen and Novalis.

5. The inspection

5.1 Review of requirements and recommendations from previous inspection

The previous inspection of the home was an unannounced care inspection. The completed QIP was returned and approved by the care inspector.

5.2 Review of requirements and recommendations from the last care inspection

Previous inspection statutory requirements		Validation of compliance
Requirement 1 Ref: Regulation 27 (4)(c) (d) (i)	The registered person must ensure that fire doors are not wedged and that closer control devices are commissioned and installed in accordance with BS7273	Met
	Action taken as confirmed during the inspection: Following an inspection of the identified house, we confirmed that this had been addressed.	
Requirement 2 Ref: 27 (2) (a) (b)	The registered person must ensure that identified re-decoration is completed.	Met
	Action taken as confirmed during the inspection: Following an inspection of the identified house we confirmed that this had been addressed.	
Previous inspection recommendations		Validation of compliance
Recommendation 1 Ref: Standard 20.11	The registered manager should review and improve the template used for registered provider visits.	Met
	Action taken as confirmed during the inspection: We examined two reports and confirmed that improvements had been made.	

Recommendation 2 Ref: Standard 11.6	The registered manager must ensure that care plans are improved.	Met
	Action taken as confirmed during the inspection: We inspected two care plans which confirmed that this had been addressed.	
Recommendation 3 Ref: Standard 9.6	The registered manager must ensure that care plans detail arrangements for support for cleaning teeth, continence and the assistance required to maintain aids and equipment.	Met
	Action taken as confirmed during the inspection: We inspected two care plans which confirmed that this had been addressed.	
Recommendation 4 Ref: Standard 10.5, 10.6, 11.	The registered manager must ensure that staff are de-briefed; risk assessments and care plans are updated following incidents and reviews take place in a timely manner.	Met
	Action taken as confirmed during the inspection: We inspected two care records and following discussion with the registered manager, we confirmed that this had been addressed.	

5.3 Additional areas examined

5.3.1 Residents' views

We met with two residents informally in the company of others. They indicated that they were happy with their life in the home, their relationship with staff, the food and the provision of care and support.

5.3.2 Staff views

We met with two staff members, in addition to the registered manager. They spoke positively about their role and duties, teamwork, environmental improvements and managerial support.

5.3.3 Environment

We inspected the environment of two houses named Ceridwen and Novalis. We confirmed that both environments were satisfactory. The house named Ceridwen had bespoke design, decoration and furnishings.

5.3.4 Staff training, supervision and appraisal

In our discussions with the registered manager and team leader we confirmed that identified staff had received mandatory training, supervision and appraisal.

5.3.5 Staffing levels

In our discussions with the registered manager and team leader, we confirmed that staffing levels met identified needs.

5.3.6 Statement of Purpose and Residents Guide

We approved the variation application to register one bed in a house named Ceridwen. Following approval, we recommended that the Statement of Purpose and Residents Guide are revised and updated.

Areas for improvement

There were two areas of improvements identified within the additional areas examined.

Number of requirements	0	Number of recommendations:	2
-------------------------------	----------	-----------------------------------	----------

6. Quality improvement plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Catherine Price, Registered Manager as part of the inspection process. The timescales commence from the date of inspection.

The registered person/ manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/ manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

6.1 Statutory requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, Residential Care Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The DHSSPS Residential Care Homes Minimum Standards (2011). They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions taken by the person in charge/ registered person

The QIP should be completed by the registered person/person in charge and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to care.team@rqia.org.uk and assessed by the inspector.

Quality Improvement Plan			
Recommendations			
Recommendation 1 Ref: Standard 20.7 Stated: First time To be completed by: 1 August 2015	The registered manager should review and update the homes Statement of Purpose to fully reflect the changes to the registration of the home.		
	Response by Registered Person(s) detailing the actions taken: Statement of Purpose will be amended to fully reflect the changes to the registration of the home by time stated.		
Recommendation 2 Ref: Standard 20.9 Stated: First time To be completed by: 1 August 2015	The registered manager should review the homes Residents Guide to fully reflect changes to the registration of the home.		
	Response by Registered Person(s) detailing the actions taken: Residents Guide will be amended to fully reflect the changes to the registration of the home within the time stated.		
Person in charge completing QIP	Catherine Price	Date completed	29/06/15
Registered Person approving QIP	Vincent Reynolds	Date approved	29/06/15
RQIA Inspector assessing response	Alice McTavish	Date approved	10 July 2015

Please complete 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.