

Inspection Report

Name of Service: Camphill Community Glenraig
Provider: Camphill Community - Glenraig
Date of Inspection: 26 August 2025

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation/Registered Provider:	Camphill Community - Glenraig
Responsible Individual:	Mr. Paul Betts
Registered Manager:	Ms. Anna Picmanova
Service Profile –	
This is a day care setting which delivers care for up to 28 service users. The setting provides a person centred service that provides purposeful activities and opportunities for individuals living with a learning disability.	

2.0 Inspection summary

An unannounced inspection took place on 26 August 2025, between 10.20am and 2.30pm. It was carried out by care Inspector.

The last care inspection of the day care setting was undertaken on 5 September 2023 by a care Inspector. No areas for improvement were identified. This inspection was undertaken to evidence how the day care setting is performing in relation to the regulations and standards; and to determine if the day care setting is delivering safe, effective and compassionate care and if the service is well led.

The inspection established that safe, effective and compassionate care was delivered to service users and that the day care setting was well led. Details and examples of the inspection findings can be found in the main body of the report.

Service users said that the care and support provided by Camphill Community Glenraig was a good experience. Service users who were unable to voice their opinions were observed to be relaxed and comfortable in their surroundings and in their interactions with staff. Refer to Section 3.2 for more details.

It was evident that staff promoted the dignity and well-being of service users and that staff were knowledgeable and well trained to deliver safe and effective care.

Camphill Community Glenraig uses the term 'attendees' to describe the people to whom they provide care and support. For the purposes of the inspection report, the term 'service user' is used, in keeping with the relevant regulations.

3.0 The inspection

3.1 How we Inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how the service was performing against the regulations and standards, at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection we reviewed information held by RQIA about this service. This included registration information, and any other written or verbal information received from service users, relatives, staff or the commissioning Trusts.

Throughout the inspection process inspectors will seek the views of those attending, working and visiting the service; and review/examine a sample of records to evidence how the service is performing in relation to the regulations and standards.

3.2 What people told us about the service and their quality of life

We received feedback from service users and staff regarding their views of attending and working within the day care setting.

Service users commented that there was nothing they disliked in relation to the day care setting. They expressed that they liked seeing their friends and that they enjoyed the lunch provided.

Staff told us that they like working in the day care setting. One staff member remarked 'some days can be challenging, but overall it is good here'.

The information provided indicated that those spoken with had no concerns in relation to the day care setting.

3.3 Inspection findings

3.3.1 Staffing Arrangements (recruitment and selection, induction and training)

Safe staffing begins at the point of recruitment and continues through to staff induction, regular staff training and ensuring that the number and skill of staff on duty each day meets the needs of service users.

There was evidence of systems in place to manage staffing. It was noted that members of the day care setting's management team was not recorded on the staff roster. The manager committed to adding this detail with immediate effect. This will be reviewed at the next inspection.

A review of the day care setting's staff recruitment records confirmed that all pre-employment checks, including criminal record checks (AccessNI), were completed and verified before staff members commenced employment and had direct engagement with service users.

Checks were made to ensure that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC) or the Nursing and Midwifery Council (NMC) or any other relevant regulatory body. There was a system in place for professional registrations to be monitored by the manager.

There was evidence that all newly appointed staff had completed a structured orientation and induction, having regard to NISCC's Induction Standards for new workers in social care, to ensure they were competent to carry out the duties of their job in line with the day care setting's policies and procedures. There was a robust, structured, induction programme which also included shadowing of a more experienced staff member. Written records were retained by the day care setting of the person's capability and competency in relation to their job role.

Staff were provided with training appropriate to the requirements of their role. The day care setting has maintained a record for each member of staff of all training, including induction and professional development activities undertaken.

Staff supervision and appraisal meetings took place in accordance with the agency's policies and procedures.

3.3.2 Care Delivery

Staff interactions were observed to be polite, friendly, warm and supportive. The atmosphere was calm and relaxed. Staff were knowledgeable of individual service users' needs, their daily routine, wishes and preferences.

There was a system in place to ensure that the activities offered to service users were varied and geared towards their individual needs and preferences. Service users spoke extremely positively about the activities offered and how much they enjoyed them. Some of the activities they were involved in included:

- Computers
- Assisting with lunch preparation
- Swimming
- Train trips
- Playing basketball
- Helping around the community
- Arts and crafts
- Writing
- Circus school

Care reviews had been undertaken in keeping with the day care setting's policies and procedures. There was also evidence of regular contact with service users and their representatives, in line with the commissioning Trust's requirements.

Service users said they had no concerns regarding their safety; they described how they could speak to staff if they had any concerns about safety or the care being provided.

3.3.3 Management of Care Records

Service users' needs were assessed when they were first referred to the agency/day care setting and before care delivery commenced. Following this initial assessment care plans were developed to direct staff on how to meet service users' needs and included any advice or recommendations made by other healthcare professionals.

Service users care records were held confidentially.

Care records were person centred, well maintained and regularly reviewed and updated to ensure they continued to meet the service users' needs. A review of a sample of care records evidenced that Service users, where possible, were involved in planning their own care and efforts had been made to ascertain service users' preferences and choices around how their support was provided. The details of care plans were shared and signed by service users and/or their representatives as appropriate.

There were arrangements in place to ensure that service users who required high levels of supervision or monitoring and restriction had their capacity considered and, where appropriate, assessed. Where a service user was experiencing a Deprivation of Liberty Safeguard (DoLS), the care records contained details of assessments completed and agreed outcomes developed in conjunction with the HSC Trust representative. A central register was in place to enable tracking of any DoLS due for review.

3.3.4 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection. Ms. Anna Picmanova has been the manager in this day care setting since 7 July 2021. Service users fed back to us that they knew the manager.

It was positive to note that there were clear staffing structures in place within the day care setting. This supported the service in promoting safe and effective care for service users. Staff required to be in charge of the day care setting in the absence of the manager had the necessary training and competencies to fulfil this role.

There were monthly monitoring arrangements in place in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. A review of the reports of the day care setting's monthly quality monitoring established that there was engagement with service users, service users' relatives, staff and HSC Trust representatives. The reports included details of a review of service user care records; accident/incidents; safeguarding matters; staff recruitment and training, and staffing arrangements.

Review of incident records identified that they were managed appropriately. There was evidence that incidents were audited on a regular basis, to establish any patterns/trends. It was good to note that these were reviewed in detail as part of the monthly quality monitoring process. No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

Day care settings are required to have a person known as the Adult Safeguarding Champion (ASC), who has responsibility for implementing the regional protocol and the day care setting's adult safeguarding policy. A specific individual was identified as the day care setting's ASC. It was established that good systems and processes were in place to manage the safeguarding and protection of adults at risk of harm. The annual safeguarding position report had been completed.

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure.

The Annual Quality Report was reviewed and was satisfactory.

3.3.5 Quality and Management of the Environment

Several service users commented positively about the day care setting environment. The day care setting was observed to be clean and tidy, suitably furnished, warm and comfortable and free of clutter. The décor of the day care setting included art work undertaken by service users as part of the activity programme provided.

Hazardous substances were noted to be stored appropriately in accordance with Control of Substances Hazardous to Health (COSHH) guidance.

Records examined identified that a number of safety checks and audits had been undertaken including fire alarm tests. It was noted that the last full evacuation drill was undertaken 14 November 2024. Fire risk assessments for the setting were available for the inspection and had been completed on 16 June 2025.

Staff fire training was up to date. It was positive to note that six staff were trained as fire wardens. During the inspection fire exits were observed to be clear of clutter and obstructions.

4.0 Quality Improvement Plan/Areas for Improvement

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



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