

Camphill Village Trust Limited(The)

Camphill Village Trust - St Albans

Inspection report

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Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

About the service

Camphill Village Trust - St Albans provides domiciliary support to people who live in privately rented houses and flats. People receive care based on a 'supported living' model to help them live as independently as possible and to provide them with the support they need to help meet their individual needs. Support is provided to a range of people with learning disabilities, autism and mental health needs. At the time of our inspection there were 39 people who were receiving support, however only five people received the regulated activity of 'personal care'.

People's experience of using this service and what we found

People told us they were happy and felt safe when staff supported them except for one person. They told us at times they were anxious as they didn't always know which staff were allocated to support them.

Relatives told us the changes made by the provider had led to some staff leaving. This caused anxiety and upset people who were used to being supported by the same members of staff for several months or years.

Some relatives told us communication between them, and the management of the service was not always good. They said this needed to improve further to ensure they could feel more involved in people's care and that their opinion mattered.

Newly employed staff were happy with the support and training provided to them. They felt this prepared them for their role and helped them provide care and support to people safely and effectively. Other members of staff told us they did not feel supported or listened by the management or the provider.

The provider identified the need to change the ethos of the service and introduced a 'co-production' approach where staff were encouraged to work with people rather than just deliver the care people needed. They implemented a new management structure and re-organised staff to work in teams with the same people.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture for the areas we checked in this inspection. People were encouraged to be independent and staff shared the providers values and ethos in providing people with choices and enabling support.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 30 April 2019).

Why we inspected

We undertook this targeted inspection to check on a specific concerns we received from members of the public about recruitment of staff, staff not being supported by their managers, blanket approach to visiting in people's homes as well as some people missing their health appointments. The overall rating for the service has not changed following this targeted inspection and remains good.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Camphill Village Trust - St Albans on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Camphill Village Trust - St Albans

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check whether the provider had met the requirements on the specific concerns we had about recruitment, staff support and training, visiting people as well as people missing their health appointments.

Inspection team

This inspection was carried out by one inspector.

Service and service type

This service provides care and support to people living in privately rented houses and flats, 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service had not had a manager registered with the Care Quality Commission. The registered manager and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and

improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with the provider`s general manager who was overseeing the service until the new manager started.

We reviewed a range of records. This included risk assessments for two people. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We spoke to three people using the service. Five relatives gave us feedback about the support people received. We received feedback from three members of staff. We also contacted the local authority commissioning team for feedback.

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as Good. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check specific concern we had about recruitment and risk management including if people were supported to attend health appointments. We will assess all of the key question at the next comprehensive inspection of the service.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe when staff supported them except for one person who said, "A lot of staff have left, I will miss them. I sometimes feel safe with staff and sometimes I don't." We have reported this to the general manager.
- Staff told us they reported their concerns to their manager if they had any and they knew how to raise concerns with the local safeguarding authority and CQC.

Assessing risk, safety monitoring and management

- People had risk assessments in place for staff to know how to support them safely. These included risk assessments for various activities people were engaging in like cooking.
- Staff told us they were aware of people's changing needs as care and support plans were updated and had handovers between staff.
- The general manager told us people were supported to attend their health appointments, however due to the pandemic the majority of these were through video links. However, when it was needed, staff supported people to attend hospital or GP appointments.

Staffing and recruitment

- Relatives told us they were not confident that people received all the support hours they were funded for. We shared this information with the local funding authority for them to establish if the service fulfilled their contractual agreement with them.
- Staff recruitment files included the appropriate documentation and checks to satisfy the management team that the staff were suitable to work with vulnerable people. This included verified references, criminal record checks and proof of qualifications.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections. People were encouraged to see their relatives outside going for walks and maintaining social distancing.
- Relatives told us when they had video calls with people, they were reassured that the environment people lived in was clean and staff were wearing appropriate personal protective equipment (PPE).
- Staff told us they received training about how to wear their PPE correctly according to government

guidance.

- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider's infection prevention and control policy was up to date.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as Good. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Two people told us they were very happy with the support they received from staff. One person said, "Since [staff members name] supported me to create a brilliant timetable that works for me and since [staff member] key works me I have a better routine, better support and I go to the day opportunities that I want, I love the allotment!!"
- One person told us that since the staff who was their key worker and knew them very well left and they were not yet familiar enough with the new staff. They said, "I used to be able to talk to my key worker and the care and support manager, but they have gone."
- Two relatives told us that the changes made by the provider had caused staff to leave and this unsettled people. They said communication with the management of the service was not always good and their concerns were not always resolved to their satisfaction. Three relatives were very happy with the service people received.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The general manager told us they made changes to the management structure in the service and this led to staff turnover following the departure of the registered manager. The changes were needed to ensure that staff were supported to deliver care and support to people based on best practice guidelines.
- Newly employed staff were happy and felt supported in their role by their managers, whilst long standing staff found it difficult to adapt to these.
- The staff employed were divided in teams to ensure a more consistent and manageable workload. This created the opportunity for the provider to better monitor the team's performance and address issues as they arose.
- The provider employed a manager to give more stability to the service and to support staff to understand and adhere to their ethos and values when supporting people in the community.