



*Making Social Care
Better for People*

inspection report

CARE HOME ADULTS 18-65

Pennine Camphill

**Boyne Hill House
Chapelthorpe
Wakefield
West Yorks
WF4 3JH**

Lead Inspector
Tony Brindle

Key Unannounced Inspection
24 & 25 May 2007 **1:00**

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

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This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this establishment are those for *Care Homes for Adults 18-65*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

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SERVICE INFORMATION

Name of service	Pennine Camphill
Address	Boyne Hill House Chapelthorpe Wakefield West Yorks WF4 3JH
Telephone number	01924 255281
Fax number	01924 240257
Email address	steve@pennine.ac.uk
Provider Web address	www.pennine.org.uk
Name of registered provider(s)/company (if applicable)	Pennine Camphill Company Limited
Name of registered manager (if applicable)	Mr Stephen Hopewell Mr William Taylor Mrs Liz Taylor Ms Lynda M Abrahams
Type of registration	Care Home
No. of places registered (if applicable)	43
Category(ies) of registration, with number of places	Learning disability (43)

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 29th September 2005

Brief Description of the Service:

The Pennine Camphill Community is situated 4 miles from Wakefield and 7 miles from Barnsley. It includes 5 community houses, craft workshops, classrooms, hall, horticultural and agricultural enterprise and riding school spread over a 35 green acre site. It is served well by public transport and close to public amenities and shops. The Pennine Camphill Community aims to create a hands on learning environment for up to 43 young adults who have a learning disability and who are referred to as students, can learn through living with others, through classroom based lessons and through working together. Support and education are fully integrated to create a therapeutic, holistic and unique environment. Pennine Camphill Community is unique in other ways as it has four registered managers, Mr Stephen Hopewell, Mr William Taylor, Mrs Liz Taylor and Ms Lynda M Abrahams.

SUMMARY

This is an overview of what the inspector found during the inspection.

EASY READ SUMMARY



An inspector visited the Pennine Camphill Community.
He spoke to Steve, William and Gareth.
He also spoke to some of the people living there
and some co-workers.
He looked at the paperwork and had a walk round.



Information given to people living at Pennine Camphill is
easy to understand.



People have access to advocacy services.



People feel included.



People get to put their views forward.



People enjoy an active life.
People go out into the community.



People have their healthcare dealt with.



People have well written care plans.
The plans are person centred.

People have a say about what goes into their care plan.



There are good systems in place to keep people safe.



There are good management systems in place to keep people safe.



The staff are well trained and very caring and helpful.



People living at Pennine Camphill feel happy and feel good about themselves.

Summary

This was an unannounced inspection of the Pennine Camphill Community/care home. We spoke with people living at the home, the registered manager and staff members/co-workers. We also had a look around the site, looked at paperwork and records, and observed the work that was going on.

Before the visit took place, surveys were sent out to people living at the home, their relatives and health and social care professionals who have dealings with Pennine Camphill.

Many of the surveys were returned before the visit took place, and the feedback that people gave was positive. Some of the things people said included:

- "I really love living at Pennine Camphill". – Person living at the home
- "The staff are really good, and I like going out, and like the way that people help me". - Person living at the home
- "My relative is supported well at Pennine Camphill". – Relative of a Person living at the home.

The Commission would like to take this opportunity to thank everyone for their hospitality and assistance during this inspection visit.

What the service does well:

People who use the service and/or their representatives are given the information needed to decide whether the home is appropriate for them, and if the service will meet their needs. Needs are assessed and a contract given to people which clearly tells them about the service they will receive. Individuals are involved in decisions about their lives, and play an active role in planning the care and support they receive.

Choice is promoted and encouraged in relation to individual life style, interests and activities and people are supported to develop their life skills. Social, educational, cultural and recreational activities meet people's expectations. The health and personal care that people receive is based on their individual needs.

The principles of respect, dignity and privacy are put into practice. People who use the service are able to express their concerns, and have access to a robust, effective complaints procedure.

Safeguards are in place to protect people from abuse, with the correct reporting and recording systems in operation and staff training is provided in relation to safeguarding people and protecting their rights. The physical design and layout of the buildings and campus enables people to live in a safe, well-maintained and comfortable environment, which encourages independence.

Co-workers are trained, skilled and are provided in sufficient numbers to support the people who use the service. The management and administration of the home is based upon openness and respect. The manager operates an effective quality assurance system.

What has improved since the last inspection?

Development of the IT system has taken place which allows for better recording of the activities people take part in. The system is used to generate reports for reviews at meetings that can be used to discuss the progress of individual students.

A student council has been set up that is used to empower people and enable them to put forward their point of view. A speech and language therapist has recently been employed. This person works mainly with individuals and can do group work and is seen to be a valuable addition to the staff team.

What they could do better:

Standards have been maintained and outcomes for people living at Pennine Camphill remain positive.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office. The summary of this inspection report can be made available in other formats on request.

DETAILS OF INSPECTOR FINDINGS

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Scoring of Outcomes

Statutory Requirements Identified During the Inspection

Choice of Home

The intended outcomes for Standards 1 – 5 are:

1. Prospective service users have the information they need to make an informed choice about where to live.
2. Prospective users' individual aspirations and needs are assessed.
3. Prospective service users know that the home that they will choose will meet their needs and aspirations.
4. Prospective service users have an opportunity to visit and to "test drive" the home.
5. Each service user has an individual written contract or statement of terms and conditions with the home.

The Commission consider Standard 2 the key standard to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

2

People who use the service experience excellent quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to the service. People who use the service and/or their representatives are given the information needed to decide whether the home is appropriate for them, and if the service will meet their needs. People have their needs assessed and a contract given to them which clearly tells them about the service they will receive.

EVIDENCE:

The records show that the manager and staff/co-workers have a high quality approach to making admissions right for individuals, and they are clear when they feel the home might not be able to meet the needs of a person. The manager explained that decisions are based upon a wide range of evidence and the records show that the person and their relatives are kept informed and involved in the decision making process as much as possible.

One person living at the home spoke about how they had been very involved in deciding to move into the home. This person had had the chance to visit the home, talk to the staff/co-workers, have a look round, talk and spend time with people already living in the home. The assessments also show that there is an interviewing process with students and that their care and support needs and emotional and spiritual needs are considered before they are offered a place.

A staff member/co-worker spoke about how the assessment process focuses on achieving positive outcomes for people and this includes ensuring that the facilities, staffing and specialist services provided by the home meet the person's needs.

The manager confirmed that all the people living in the home receive a contract. The records show that the people living in the Pennine Camphill has agreed this contract. The records also show that when a person does not have the capacity to agree to the contract, a discussion has been entered into with their representative, who has then agreed it on their behalf.

The records show that information is given to people in a meaningful way, and the manager said that information could be put into appropriate languages and formats, or easy read if required. One person living in the home spoke about how information is explained to them so that they can fully understand it. One staff member/co-worker spoke about how the use of advocates to support people is promoted, and one person living in the home spoke about how they know about advocacy services.

Individual Needs and Choices

The intended outcomes for Standards 6 – 10 are:

- 6.** Service users know their assessed and changing needs and personal goals are reflected in their individual Plan.
- 7.** Service users make decisions about their lives with assistance as needed.
- 8.** Service users are consulted on, and participate in, all aspects of life in the home.
- 9.** Service users are supported to take risks as part of an independent lifestyle.
- 10.** Service users know that information about them is handled appropriately, and that their confidences are kept.

The Commission considers Standards 6, 7 and 9 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

6, 7 and 9

People who use the service experience excellent quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to the service. Individuals are involved in decisions about their lives, and play an active role in planning the care and support they receive.

EVIDENCE:

One person living at the home spoke about how they regularly get involved in the planning of their care and support. This person said that they speak to the manager and staff members/co-workers about how they want to be spoken to, how they want to be supported when dressing, bathing and shopping. The manager explained that the care plans are developed with the people living in the home. The service sees care plans as belonging to the people living in the home. The records show that the plans are based on a full and up to date assessment, and the plans are written in a person centred way and focus on people's strengths and personal preferences. One staff member/co-workers spoke about how that plans set out in detail how a person is to receive positive individualised support.

The manager said that care plans can include photos, pictures and are written in plain language. The records confirmed this, and it was clear from looking at

the details within the plans that they are an up to date and working tool. The way that the plans are set out would help someone not familiar with the person to deliver a personalised service when necessary.

The records show that the care plans includes a comprehensive risk assessment, which is regularly reviewed. One staff member/co-workers who was spoken with talked about the service having a 'can do' attitude and he added that risks are managed positively to help people using the service to lead the life they want. The records show that any limitations on freedom, choice or facilities are always in the person's best interests.

One person living at the home spoke about how they understand any limitations that are placed them, and said that if limitations are to be placed on them for any reason, then the staff or manager would speak with them about the issues, the reasons why, and also the best way the person could be supported. The manager explained that a student council has been recently set up and was seen to be another way in which people could be empowered and enabled to put forward their point of view. A relative who responded to our survey said that they saw this as a major development in promoting the "voice of the student".

The records show that people are consulted on how the service is run and are able to influence key decisions in the home. People who live in the home said that they are involved in decisions about day-to-day life in the home, such as cooking, cleaning and activities.

Lifestyle

The intended outcomes for Standards 11 - 17 are:

- 11.** Service users have opportunities for personal development.
- 12.** Service users are able to take part in age, peer and culturally appropriate activities.
- 13.** Service users are part of the local community.
- 14.** Service users engage in appropriate leisure activities.
- 15.** Service users have appropriate personal, family and sexual relationships.
- 16.** Service users' rights are respected and responsibilities recognised in their daily lives.
- 17.** Service users are offered a healthy diet and enjoy their meals and mealtimes.

The Commission considers Standards 12, 13, 15, 16 and 17 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

12, 13, 15, 16 and 17

People who use the service experience excellent quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to the service. People who use the service are able to make choices about their life style, and supported to develop their life skills. Social, educational, cultural and recreational activities meet people's expectations.

EVIDENCE:

Feedback from people living at Pennine Camphill, and from the relatives who responded to our survey indicated that people are given the opportunity to develop and maintain important personal and family relationships, and are able to access information and specialist guidance about issues such as intimate relationships. Discussion with the manager showed that individual rights and choices are promoted, and the records confirmed that people are supported to make informed choices about things such as lifestyle choices, relationships and activities. The manager explained that the service has a strong commitment to enabling people who use live at Pennine Camphill to develop their skills, including social, emotional, communication, and independent living skills.

The records show that individuals are supported to identify their goals, and work to achieve them. One person's records that were looked at showed that they had a programme in their file which when followed helped them to look after themselves more independently, opportunities to improve literacy, numeracy and communication skills and a wide range of sporting, cultural and leisure activities.

Personal and Healthcare Support

The intended outcomes for Standards 18 - 21 are:

- 18.** Service users receive personal support in the way they prefer and require.
- 19.** Service users' physical and emotional health needs are met.
- 20.** Service users retain, administer and control their own medication where appropriate, and are protected by the home's policies and procedures for dealing with medicines.
- 21.** The ageing, illness and death of a service user are handled with respect and as the individual would wish.

The Commission considers Standards 18, 19, and 20 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

18, 19 and 20

People who use the service experience excellent quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to the service. The health and personal care that people receive is based on their individual needs. The principles of respect, dignity and privacy are put into practice.

EVIDENCE:

The Statement of Purpose sets out the competencies and specialisms offered at Pennine Camphill and feedback from people who use the service and from people's relatives shows that the service does deliver care and support of a high quality based on their individual needs. However, over a year ago, two relatives did contact the Commission after their relative had left Pennine Camphill to voice their concerns that some of the care and support given to their relative had not been always been person centred. The service manager did listen to the concerns raised by the relatives and took actions to respond appropriately. Observations of the day showed that the care is person led. Staff were seen to respect people preferences. The records show that the manager and staff ensure that people receive effective and individualised personal and healthcare support using a person centred approach. This was supported by the views of relatives who responded to our survey. A speech and language therapist has recently been employed. This person works mainly with individuals and can do group work and is seen by the management to be

a valuable addition to the staff team. A relative who responded to our survey said that they saw this as a major development and excellent move on behalf of the Pennine Camphill Community as greater individualised support can be given to people.

Concerns, Complaints and Protection

The intended outcomes for Standards 22 – 23 are:

- 22.** Service users feel their views are listened to and acted on.
- 23.** Service users are protected from abuse, neglect and self-harm.

The Commission considers Standards 22, and 23 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

22 and 23

People who use the service experience excellent quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to the service. People who use the service are able to express their concerns, and have access to a robust, effective complaints procedure, and are protected from abuse, and have their rights protected.

EVIDENCE:

Following discussions with people living at the home it was clear that people understand how to make complaints. The records show that the managers of the Pennine Camphill Community have responded appropriately to complaints and concerns raised with them.

The records show that regular training and supervision takes place to make sure staff are fully aware of the policies and procedures provided in relation to protecting and safeguarding the rights of people living at the home. Observations made on the day indicated that the views and experiences of people living at the home are valued.

Environment

The intended outcomes for Standards 24 – 30 are:

24. Service users live in a homely, comfortable and safe environment.
25. Service users' bedrooms suit their needs and lifestyles.
26. Service users' bedrooms promote their independence.
27. Service users' toilets and bathrooms provide sufficient privacy and meet their individual needs.
28. Shared spaces complement and supplement service users' individual rooms.
29. Service users have the specialist equipment they require to maximise their independence.
30. The home is clean and hygienic.

The Commission considers Standards 24, and 30 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

24 and 30

People who use the service experience excellent quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to the service. The physical design and layout of the buildings and campus enables people to live in a safe, well-maintained and comfortable environment, which encourages independence.

EVIDENCE:

Discussions with the people living at the home showed that they are happy with their house and that the living environment is appropriate for their particular lifestyle and needs. Discussions with people indicated that they are encouraged to see the home as their own despite the fact they only live there for a relatively short time e.g. 2 or 4 years. The manager explained that he and the staff ensure that the physical environment of the home provides for the individual requirements of the people who live at Pennine Camphill with adaptations made to the environment as and when required. The campus is very well maintained, with attractive grounds. One person said that they have very good access to the surrounding area, and that they like to go out into town to go shopping and take part in leisure activities.

Staffing

The intended outcomes for Standards 31 – 36 are:

- 31.** Service users benefit from clarity of staff roles and responsibilities.
- 32.** Service users are supported by competent and qualified staff.
- 33.** Service users are supported by an effective staff team.
- 34.** Service users are supported and protected by the home's recruitment policy and practices.
- 35.** Service users' individual and joint needs are met by appropriately trained staff.
- 36.** Service users benefit from well supported and supervised staff.

The Commission considers Standards 32, 34 and 35 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

32, 34 and 35

People who use the service experience excellent quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to the service. Staff in the home are trained, skilled and are provided in sufficient numbers to support the people who use the service.

EVIDENCE:

The manager explained how the term co-worker is used to describe the staff in terms of working alongside a person and sharing in their experience of the world. The rotas show that the service has enough staff/co-workers available at all times to support the needs, activities and aspirations of the people using the service in an individualised and person centred way.

The records show that the service is proactive rather than reactive in its staffing, recruitment and training, with planning for the needs of people taking place on a day to day basis. Observations indicate that there is a diverse staff/co-worker team that has a balance of skills, knowledge and experience to meet the needs of people who use services.

The records show that the service has a highly developed recruitment procedure that has the needs of people who use the service at its core. The manager explained that the recruitment of good quality staff/co-workers is seen as integral to the delivery of an excellent service, and continued saying

that the recruitment of the right person for the job is always seen as more important than the filling of a vacancy.

Conduct and Management of the Home

The intended outcomes for Standards 37 – 43 are:

37. Service users benefit from a well run home.
38. Service users benefit from the ethos, leadership and management approach of the home.
39. Service users are confident their views underpin all self-monitoring, review and development by the home.
40. Service users' rights and best interests are safeguarded by the home's policies and procedures.
41. Service users' rights and best interests are safeguarded by the home's record keeping policies and procedures.
42. The health, safety and welfare of service users are promoted and protected.
43. Service users benefit from competent and accountable management of the service.

The Commission considers Standards 37, 39, and 42 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

37, 39 and 42

People who use the service experience excellent quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to the service. The management and administration of the home is based upon openness and respect. The manager operates effective quality assurance system.

EVIDENCE:

The records show that spot checks and quality monitoring systems are in place which provide the management with evidence that systems are working and that the health and safety of people are promoted. Discussions with people living at the home indicated that their views are listened to, and valued. It was noted that each house has access to the Pennine Community Intranet which gives profiles of co-workers and students. The senior co-worker said that students do have the opportunity to contribute to the Intranet and comment on life in the Community.

The registered managers have the required qualifications and experience, and are highly competent to run the home. Discussions with one of the managers showed that he has sound knowledge of both strategic and financial planning.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Care Homes for Adults 18-65 have been met and uses the following scale. The scale ranges from:

- 4** Standard Exceeded (Commendable) **3** Standard Met (No Shortfalls)
2 Standard Almost Met (Minor Shortfalls) **1** Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion

"N/A" in the standard met box denotes standard not applicable

CHOICE OF HOME	
<i>Standard No</i>	<i>Score</i>
1	X
2	4
3	X
4	X
5	X

INDIVIDUAL NEEDS AND CHOICES	
<i>Standard No</i>	<i>Score</i>
6	4
7	4
8	X
9	4
10	X

LIFESTYLES	
<i>Standard No</i>	<i>Score</i>
11	X
12	4
13	4
14	X
15	4
16	4
17	4

PERSONAL AND HEALTHCARE SUPPORT	
<i>Standard No</i>	<i>Score</i>
18	4
19	4
20	4
21	X

CONCERNS AND COMPLAINTS	
<i>Standard No</i>	<i>Score</i>
22	4
23	4

ENVIRONMENT	
<i>Standard No</i>	<i>Score</i>
24	4
25	X
26	X
27	X
28	X
29	X
30	4

STAFFING	
<i>Standard No</i>	<i>Score</i>
31	X
32	4
33	X
34	4
35	4
36	X

CONDUCT AND MANAGEMENT OF THE HOME	
<i>Standard No</i>	<i>Score</i>
37	4
38	X
39	4
40	X
41	X
42	4
43	X

Are there any outstanding requirements from the last inspection? NO

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations

Commission for Social Care Inspection

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