

Review of compliance

The Mount Camphill Community Limited
The Mount Camphill Community

Region:	South East
Location address:	Faircrouch Lane Wadhurst East Sussex TN5 6PT
Type of service:	Specialist college service
Date of Publication:	July 2011
Overview of the service:	The Mount Camphill Community is owned by The Mount Camphill Community Ltd. It is a specialist college and registered to provide accommodation and personal care in the further education sector for up to 39 residential students. It caters for residential and day students aged 16 to 25 with a learning disability and are also inspected by Ofsted. The Mount's training programme extends over 3

	<p>years. An educational year is approximately 38 weeks with students returning home during holidays.</p>
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

The Mount Camphill Community was meeting all the essential standards of quality and safety.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, checked the provider's records, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

Students told us they were involved in decisions about their day to day lives and their care and support. Students were happy with the support received and had access to health care professionals if required. Students felt safe living at The Mount. Procedures for giving students their medicines were safe. Students told us that all equipment was in working order. Parts of the staff team had been there a long time but others changed each year. Students told us the staff were kind and supportive. Staff were recruited in a safe way and had received training. The service did checks to make sure things ran smoothly and students were satisfied with their care. Students felt confident to raise concerns which were usually resolved during the house meetings. Records were stored appropriately and safely.

What we found about the standards we reviewed and how well The Mount Camphill Community was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

Students were involved in decisions about their day to day lives and ongoing support. Student's privacy and dignity was respected. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 02: Before people are given any examination, care, treatment or support, they should be asked if they agree to it

Students consent to their care and support was obtained. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights

Students received safe, effective and appropriate care and support that meets their needs. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 06: People should get safe and coordinated care when they move between different services

Students received safe and coordinated care. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 07: People should be protected from abuse and staff should respect their human rights

Students were protected from abuse. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 09: People should be given the medicines they need when they need them, and in a safe way

Student's medication was managed safely. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 11: People should be safe from harm from unsafe or unsuitable equipment

Students were not at risk from unsuitable or unsafe equipment. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 12: People should be cared for by staff who are properly qualified and able to do their job

Students were protected by safe recruitment procedures. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

Students received care from trained, supervised and competent staff. On the basis of the evidence provided and the views of the students using the service we found the service to

be compliant with this outcome.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

Students benefit from safe, quality care and support due to effective decision making and management of the service. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 17: People should have their complaints listened to and acted on properly

Students could be sure their comments and complaints were listened too and acted upon. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Other information

Please see previous reports for more information about previous reviews.

**What we found
for each essential standard of quality
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- * Understand the care, treatment and support choices available to them.
- * Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- * Have their privacy, dignity and independence respected.
- * Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

Students told us they had been involved in the decision to move to The Mount. They told us they had attended an assessment weekend (Sunday to Tuesday) to test it out.

Most students said they had received a copy of the student handbook and felt they had enough information about The Mount before moving in.

Students confirmed they had been involved in reviewing their support plan and had decided what 'aims' to work towards. One student told us they had their review "last Tuesday" and talked about how one of their aims had helped them to achieve better independence with their personal hygiene. Students told us within the house they lived they were involved in cooking the meals, cleaning and doing their laundry. One said "we all do our fair share". Another said "I help everyday".

Students told us were able to express their views and were involved in making decisions about what went on in the house where they lived. One said "we have a structured timetable but weekends we can do what we like but it can depend on money and travel". A student confirmed they can get up and go to bed when they like and said "we have all agreed to have a lie in on Saturdays". They told us about the house meetings which were held every week and how at these they decided what to do at the

weekends. One student said of these meetings "these are good and I take the minutes". Students talked about their hobbies and interests enthusiastically, where they had been and what they had done recently. For example a recent trip to a steam rally and the story telling and dancing clubs.

One student when asked what the best thing was about living at The Mount said "I feel I have become more independent and can make decisions for myself".

Students confirmed that their privacy was respected and they were treated kindly.

Other evidence

Staff told us that the student handbook was only available from the main office and we suggested better access for students within the individual houses.

Students attended a minimum of three day assessment stay at The Mount prior to moving in. Students were invited to stay based on assessment information received from professionals that were involved in their support at that time. During the stay their needs were further assessed to make sure they liked it, they would fit in and their needs could be met.

We looked at three care plans and all showed they were drawn up and reviewed with the students.

We saw that students were able to spend time alone or join in what was happening within the house where they lived. Records showed students were able to be part of the local community. Recent trips out had included going into Wadhurst, Tunbridge Wells and Hastings.

We saw students were involved in cooking, meal preparation and clearing away. One person had made a lovely cake which was enjoyed by everyone at lunchtime. Records showed that students had friends over to spend time together, for meals or to stay.

What we saw students were offered choices and they were treated with dignity and respect.

Our judgement

Students were involved in decisions about their day to day lives and ongoing support. Student's privacy and dignity was respected. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 02: Consent to care and treatment

What the outcome says

This is what people who use services should expect.

People who use services:

- * Where they are able, give valid consent to the examination, care, treatment and support they receive.
- * Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- * Can be confident that their human rights are respected and taken into account.

What we found

Our judgement

The provider is compliant with Outcome 02: Consent to care and treatment

Our findings

What people who use the service experienced and told us

Students told us they were able to make decisions about their care and day to day lives. Students said the support they needed was talked about during the assessment period, when they moved in and on an ongoing basis.

Other evidence

The service gets students to sign their support plan and risk assessments as a sign of their consent and this was evident when we looked at these records. It was suggested that weekly records that showed what had been achieved against the students aims could be enhanced with input from the student.

Staff told us no one was subject to a deprivation of liberty safeguard.

Discussions with staff and records showed that care was taken to make sure students had all the information they needed and time to make real choices and decisions.

Our judgement

Students consent to their care and support was obtained. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

Students told us they were happy with the care and support they received. One said "its brilliant couldn't ask for better". Students talked about their aims which were in place to develop further independence.

Other evidence

What we saw showed students had their own individual routines which were respected. The atmosphere was observed to be relaxed but busy with students interacting with each other and staff. Staff were seen to be kind and supportive in their approach.

After discussions with students we examined support plans to ensure they reflected specific needs the individuals had talked about. In all instances the support plans did reflect the needs discussed, together with information of how this was managed. In one case a medical condition was included in the risk assessment but not in the support plan relating to the students health.

When developing or reviewing the support plan students discussed what aims they wanted to help them develop their independence. These aims were then monitored on a weekly basis and recorded. In some cases the aim was quite large and it was difficult to ascertain what progress had been achieved from the records. In discussions with students and staff it was apparent progress had been made or aims had already been achieved. The manager told us that the college was already reviewing how these were monitored.

At times when there was an overlay with systems relating to student's education the support plan was not always updated even though it affected the students social care support. In two cases students had seen a professional but suggestions they had made had not been followed through into the support plan. In discussion with staff it was apparent the suggestions had been implemented. The manager told us the college had already started to look at ways to join up both areas.

Each students support plan included a general risk assessment. Where a risk was apparent a more detailed assessment was in place. These included actions to be taken to reduce the identified risk. In some cases the information was very clear and informative for staff but in others it was not so clear. Discussions with staff showed that appropriate action was actually being taken but could be better recorded in the records to make sure students received consistent support.

One professional spoken with felt the support plans and other documents had really improved and were good.

Feedback received from the last parent quality assurance surveys (June 2010) showed that parents were entirely happy with the care and support received. It also showed that parents felt communication with staff at The Mount was good and effective.

Our judgement

Students received safe, effective and appropriate care and support that meets their needs. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 06: Cooperating with other providers

What the outcome says

This is what people who use services should expect.

People who use services:

* Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.

What we found

Our judgement

The provider is compliant with Outcome 06: Cooperating with other providers

Our findings

What people who use the service experienced and told us

Students told us they had access to health care. One student talked about a hospital appointment they were about to attend. Another talked about the last time they had been to the doctors.

Other evidence

Discussions with staff and records showed students had access to various health professionals such as hospital appointments, community nurse, doctors, psychologist and psychiatrists. Mostly students would see dentists and opticians in college holidays local to where they lived.

Support plans contained contact details of professionals and other people involved in the students care and support.

We spoke to a professional who had recently had contact with the college. They told us "the difference in how the service responds and interacts with the team is huge; they work with us and have embraced our new policy".

Information received before the visit showed the provider was compliant with this outcome although they intended to review their emergency plan to make sure it fully covered requirements under the Civil Contingencies Act 2004. They set a timescale for this of September 2011.

We found no evidence of non compliance during our visit.

Our judgement

Students received safe and coordinated care. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

Students confirmed they felt safe living at The Mount. One student when asked said "oh yes very much so". Another said "they keep me safe".

Other evidence

The atmosphere we saw was busy but relaxed and calm. Discussions and records showed students had the opportunity for meaningful activities.

Records showed that students had received 'Keeping Safe' training from qualified social workers which included information on abuse.

When students had been involved in an incident reporting records by staff showed appropriate action taken and referrals to outside agencies.

Staff spoken with showed a good knowledge of safeguarding students from abuse and how and where to report any suspicions or concerns. Training records were not looked at but staff told us they had received training in safeguarding adults, the Mental Capacity Act and Deprivation of Liberty Safeguarding.

There had been a number of safeguarding referrals and investigations since October 2010. These all related to one student and most were now closed. The college had worked with the local authority to seek further professional advice and guidance in order to manage and meet the student's needs.

One professional told us "their own processes and their safeguarding leads are good now; we get good information coming in". They told us when the manager was unsure about whether to report he would ring and discuss this.

Our judgement

Students were protected from abuse. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 09: Management of medicines

What the outcome says

This is what people who use services should expect.

People who use services:

- * Will have their medicines at the times they need them, and in a safe way.
- * Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

Our judgement

The provider is compliant with Outcome 09: Management of medicines

Our findings

What people who use the service experienced and told us

We did not speak directly to students about this outcome as those spoken with did not take any medicines.

Other evidence

In the house we visited only one person was taking any prescribed medicines.

We saw that medication records were kept. These showed staff signed when giving medicines or recorded a code appropriately. Medication was held securely.

When students went home a record of the medicines that they took home and then returned to The Mount was kept. It was suggested these would be improved if the person who took and then returned the medicines signed the record to confirm what they had taken and returned.

A signature list of staff able to give medicines was seen. Staff told us anyone that gives medicines had received training.

Our judgement

Student's medication was managed safely. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 11: Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

* Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).

* Benefit from equipment that is comfortable and meets their needs.

What we found

Our judgement

The provider is compliant with Outcome 11: Safety, availability and suitability of equipment

Our findings

What people who use the service experienced and told us

Students told us that any equipment used was in working order and nothing needed fixing at that time. One said "yes it all generally works".

Other evidence

We saw that student's needs were such that they did not need any special equipment.

Staff told us equipment was in working order and that the maintenance man was very good and quick.

In information received before the visit the provider declared compliant with this outcome. Information stated that little specialist equipment was used at The Mount due the needs of the students who lived there.

We found no evidence of non compliance during our visit.

Our judgement

Students were not at risk from unsuitable or unsafe equipment. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 12: Requirements relating to workers

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

The provider is compliant with Outcome 12: Requirements relating to workers

Our findings

What people who use the service experienced and told us

One student talked about the staff, some of which had worked there a long time and others who had started at the college at the same time they did. One said "we've got a lot of staff here".

Other evidence

Most staff had been involved with the college over a long period of time. In addition new staff were recruited each academic year and arrived at the college for the start of term in September. They usually stayed one year. Most of these but not all were usually recruited from overseas. Staff and their families lived as well as worked at the college.

Each house/floor had a dedicated staff team, which included two house coordinators, cook and one to three trainee co-workers depending on the number of students. The term co-worker was used as it described the college ethos that staff worked alongside students and shared their experiences. Some house coordinators were part of the management team.

Staff we observed and spoke with were clear about their roles.

Recruitment records were not available for inspection on the day of the visit. Records were inspected by Ofsted in January 2011 and judged as satisfactory.

Staff told us when they were recruited they had attended an interview with two of the management team and completed appropriate checks.

In information received before the visit the provider showed compliance with this outcome. Information stated that the college was currently developing a performance management policy to describe a more robust approach to performance management. The timescale for this was given as July 2011.

We found no evidence of non compliance during our visit.

Our judgement

Students were protected by safe recruitment procedures. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

Students told us staff were kind and caring. They confirmed staff were knowledgeable about the support they needed.

Other evidence

Our observations confirmed good interactions between students and staff. Students were observed to be supported by staff who adopted a kind and caring attitude.

In discussions with staff they showed a good understanding of student's individual needs. Since previous visits it was apparent that staff had taken on board the need for change at The Mount, to make sure current and good practises were embedded into their day-to-day work and the college met legislative requirements. They reflected that the changes had been necessary and had had a positive effect on the whole college.

Staff told us they felt very well supported and received regular supervision. They also told us they had received training in subjects such as safeguarding adults, food hygiene, fire, infection control, managing challenging behaviour and techniques, medication and the Mental Capacity Act and Deprivation of Liberty Safeguards.

Results from the last parent quality assurance surveys (June 2010) showed that parents comments in relation to staff were all very positive.

In information received before the visit the provider showed that in one area further work was needed in order for the college to be fully compliant. They had commenced work on introducing a formal appraisal system for support staff alongside the

supervision arrangements and expected to launch this at the start of the September 2011 term.

Information also stated that an induction to Skills for Care specification was in place. National Vocational Qualifications (NVQ) level 3 and above have been introduced. No one under 18 years was accommodated at the college at the time but they were in the process of reviewing their induction programme to evidence the Children's Workforce Development Induction standards, and would have this established prior to the intake of new students in September 2011.

We found no evidence of non-compliance during our visit.

Our judgement

Students received care from trained, supervised and competent staff. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:

* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us

Students told us they were happy and satisfied with the care received at The Mount. One said it's "very good, very nice I am happy living here". Students talked enthusiastically about house meetings and the student council.

Other evidence

Discussions and what we saw showed that students appeared to be happy, safe and relaxed at The Mount.

The management of the college had been through significant changes in its leadership and management arrangements. The manager and management group had worked hard to achieve compliance with legislative requirements. At the time of the visit there was a clear sense of direction and working together. One member of staff said they felt the changes had been "good and healthy, painful but helpful".

Parents completed a survey each year. Any actions from these were fed into the self assessment report or quality improvement plan. At the time of the visit improved surveys had been sent to parents the previous week. One had already been returned which was very positive. A copy of the last quality assurance survey results was sent to the Commission. This showed that parents were very satisfied with the service provided.

It was apparent that students were encouraged to voice their views and contribute to decision-making within the college through their reviews, house meetings, the student

council and also contributing to various committees including the board of trustees.

Staff told us they received supervision and each morning a meeting was held where events, incidents or concerns were discussed and action collectively agreed.

In information received before the visit the provider showed compliance with this outcome. The service had quality monitoring systems in place such as audits of accidents and incidents, student's progress and support plan reviews and complaints. Information stated that the college was revising their monitoring data in order to better demonstrate progress and integrate systems for both educational and social care. The timescale for completion was September 2011. The Mount was reviewing its transition planning arrangements with students in line with local authority requirements and will further establish a process that describes the roles, responsibilities and expectations resultant from this. The timescale for this was October 2011.

We found no evidence of non compliance during our visit.

Our judgement

Students benefit from safe, quality care and support due to effective decision making and management of the service. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

Outcome 17: Complaints

What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- * Are sure that their comments and complaints are listened to and acted on effectively.
- * Know that they will not be discriminated against for making a complaint.

What we found

Our judgement

The provider is compliant with Outcome 17: Complaints

Our findings

What people who use the service experienced and told us

Students told us who they would complain to if they had any concerns which they did not. Students confirmed any grumbles that had been brought up had been resolved and were confident any complaints would be sorted out. One student gave an example of poor lighting on the site when returning from drama club. They said this had been resolved by "putting extra lights down the drive". A student told us that "once in a while they complete questionnaires" usually at the end of term.

Other evidence

Records showed that any concerns were usually dealt with quickly during discussions at the weekly house meetings.

In information received before the visit the provider declared compliant with this outcome. Information stated that within the student handbook there was a clear complaints procedure in place which included details of advocacy contacts within the local area. Complaints were monitored and action plans developed to rectify any outstanding concerns.

We found no evidence of non compliance during our visit.

Our judgement

Students could be sure their comments and complaints were listened too and acted upon. On the basis of the evidence provided and the views of the students using the service we found the service to be compliant with this outcome.

What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Information for the reader

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Author	Care Quality Commission
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