

# Corbenic Camphill Community Care Home Service

Drumour Lodge  
Trochry  
Dunkeld  
PH8 ODY

Telephone: 01350 723 206

**Type of inspection:**

Unannounced

**Completed on:**

11 February 2019

**Service provided by:**

Corbenic Camphill Community

**Service provider number:**

SP2003002110

**Service no:**

CS2003009749

## About the service

Corbenic Camphill Community is a care home registered to support up to 40 adults with learning disabilities. Those using the service live in seven group homes cared for by house co-ordinators and co-workers. One of the group homes is designed for older residents, and this building also includes four separate studio flats for residents who would like to develop more independence. More independent bedsit type accommodation is also available within the main house. The community also has a large number of workshops attended daily by residents.

Camphill Central Scotland Trust is the owner of the land and buildings which are rented to the registered charity Corbenic Camphill Community Ltd. The manager is responsible for the day-to-day running of the community. Corbenic Camphill Community is also registered to provide a small support service for up to five service users per day, Monday to Friday.

Corbenic's stated aim is "to provide a safe and fulfilling living environment, within the principles of the Camphill Movement".

The service has been registered since April 2002.

## What people told us

During the inspection we spent time in one of the houses in the community. Although not everyone was able to tell us what they thought about living at Corbenic, we observed some very positive interactions between staff and people who used the service. Some people made comments such as:

"I like living here."

"I help in the house when I'm not in my workshops."

"Staff are nice, they help me when I need it."

"I like my room, and I like my workshops."

## Self assessment

We did not request a self assessment this year. We discussed and considered the service's own development plan as part of this inspection.

## From this inspection we graded this service as:

<b>Quality of care and support</b>	5 - Very Good
<b>Quality of environment</b>	not assessed
<b>Quality of staffing</b>	not assessed
<b>Quality of management and leadership</b>	5 - Very Good

## What the service does well

As part of the inspection we sampled some support plans and these gave a good picture of the support needs and interests of individual service users. Risk assessments had been completed, and these were comprehensive, looking at a range of issues and the control measures in place to reduce risk. Support plans included information on guardianship status, ongoing referrals to consultants and health information, including a Hospital Passport for emergency admission to hospital. We looked at medication within one of the houses, and could see that medication had been appropriately administered and recorded.

There had been ongoing development opportunities for the management team to discuss issues around the development of the service, and this would appear to have been a useful and positive process. Training and development had been available to staff in relation to leadership issues. We could also see that there were clear records of training completed by staff and whether this required refresher dates. It was clear that service user specific training had been available to staff. A supervision process was in place for all staff, and this appeared to be a positive process for staff.

Regular leadership team meetings and Board meetings gave opportunities to discuss development issues. There had been several new trustees appointed to the board since the last inspection and the service had developed an induction for them.

Corbenic meetings, where all staff and service users came together to discuss topical issues and decide on any action, continued to be held monthly, and minutes were displayed on notice boards throughout the campus.

At the last inspection the service had introduced a walk through audit which looked at residents, the environment, procedures/recordings, and staffing. This was a red/amber/green system identifying progress on actions. We could see that this had been successfully implemented and had helped to identify areas for improvement for specific houses. A questionnaire for service users had also been developed to seek their opinions on the care and support they received.

The service had put in place a development plan for the service which included long-range developments as well as ongoing improvements.

## What the service could do better

At the last inspection we made a recommendation about reviews. We could see that the service had changed the paperwork which they used to record issues discussed at reviews. This gave a more comprehensive picture of the support needs of individuals, but it was not clear from the records that this was put in place as a result of a review, who had been consulted or action identified as a result of the review. This recommendation remains in place.

Although information in Individual Assessment and Care Plans gave a good picture of individuals, these could be more outcome focussed. The service was aware of this and was working with staff to help them identify outcomes with people who used the service.

Where household remedies are in use the service should ensure that information is available, for example, how to recognise pain in any individual, and clear instructions on dosages.

Although the walk through audits clearly identified areas for improvement, it would be beneficial to have a single improvement plan as a result of this process. This would help to identify trends potentially identify additional training, as well as any environmental improvements. The service was able to identify how they would do this during the inspection.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 1

1. The service should ensure that all people who use the service should have the opportunity to take part in a review of their support needs every six months, or sooner if their needs change. Records of these reviews should be available.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that "my views will always be sought and my choices respected, including when I have reduced capacity to fully make my own decisions" (HSCS 2.11).

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## What the service has done to meet any requirements we made at or since the last inspection

### Previous requirements

There are no outstanding requirements.

## What the service has done to meet any recommendations we made at or since the last inspection

### Previous recommendations

#### Recommendation 1

The service should ensure that all people who use the service should have the opportunity to take part in a review of their support needs every six months, or sooner if their needs change. Records of these reviews should be available.

National Care Standards Care Homes for Older People - Standard 6: Support Arrangements.

**This recommendation was made on 9 March 2018.**

#### Action taken on previous recommendation

The service had taken some action as commented on in the body of this report, but this required further development and the recommendation remains in place.

### Inspection and grading history

Date	Type	Gradings
9 Mar 2018	Unannounced	Care and support 4 - Good Environment Not assessed Staffing Not assessed Management and leadership 4 - Good
28 Mar 2017	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
31 Aug 2015	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good Management and leadership 5 - Very good
29 Aug 2014	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good Management and leadership 4 - Good

Date	Type	Gradings
28 Aug 2013	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good Management and leadership 4 - Good
27 Nov 2012	Unannounced	Care and support 5 - Very good Environment 4 - Good Staffing Not assessed Management and leadership Not assessed
27 Nov 2012	Unannounced	Care and support 5 - Very good Environment 4 - Good Staffing Not assessed Management and leadership Not assessed
21 Aug 2012	Unannounced	Care and support 5 - Very good Environment 3 - Adequate Staffing 5 - Very good Management and leadership 4 - Good
12 Mar 2012	Unannounced	Care and support 4 - Good Environment Not assessed Staffing Not assessed Management and leadership Not assessed
15 Nov 2011	Unannounced	Care and support 3 - Adequate Environment Not assessed Staffing Not assessed Management and leadership Not assessed
10 Jan 2011	Announced	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership Not assessed
4 Aug 2010	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership 5 - Very good

Date	Type	Gradings	
19 Mar 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good Not assessed
30 Jun 2009	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 3 - Adequate 4 - Good
27 Mar 2009	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 3 - Adequate Not assessed 3 - Adequate
4 Dec 2008	Announced	Care and support Environment Staffing Management and leadership	4 - Good 3 - Adequate 4 - Good 3 - Adequate

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