

Bupa Care Homes (GL) Limited Westcombe Park Care Home

Inspection report

112a Westcombe Park Road Blackheath London SE3 7RZ Date of inspection visit: 24 October 2016

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Ratings

Overall rating for this service

Requires Improvement 🖲

Is the service well-led?

Requires Improvement

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Overall summary

We carried out an unannounced comprehensive inspection of this service on 20 and 21 April 2016 in line with our special measures policy, to check what progress had been made in respect of addressing serious breaches of regulations identified at a previous comprehensive inspection of 11 and 12 November 2015.

At the inspection on 20 and 21 April 2016 we found the more serious breaches of regulations had been addressed. However, a breach of legal requirements was found as systems to monitor the quality and safety of the service in relation to staff training and recruitment were not always effective. Following the inspection we mutually agreed some conditions on the provider's registration to help sustain the progress made.

After the comprehensive inspection on 20 and 21 April 2016, the provider sent us an action plan to say what they would do to meet legal requirements in relation to this breach. They told us they would complete the action required by 30 June 2016. We undertook this unannounced focused inspection on the 24 October 2016 to check that they had followed their plan and to confirm that they now met legal requirements.

This report only covers our findings in relation to the focused inspection for one part of the key question is the service well-led? You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Westcombe Park' on our website at www.cqc.org.uk.

Westcombe Park provides care and accommodation for up to 51 older people living with dementia who may have nursing, care and support needs. At the time of this inspection there were 29 people using the service. There was no registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The home had been managed by a relief manager but a new manager had recently been appointed with a view to applying to be the registered manager. They had previous experience of being a registered manager.

At this inspection we found that the provider had made improvements to the systems to monitor staff training and recruitment. Staff records had been audited and staff recruitment records that had been missing at the previous inspection had been located or replaced. Staff training records were now being kept and there was a system to monitor and ensure staff training was refreshed when needed. However records

to evidence assessed nurses' competencies were not always consistently maintained either at the home or by the provider and these required some improvement.

The improvements found were relatively recent and we were not able to judge their consistency or the reliability at this inspection. Additionally, the management of the home was undergoing a further period of change. A new manager had only recently been appointed and was becoming familiarised with the home with the support of the previous relief manager and the recovery team. The previous deputy manager had recently left the service and we were told a new deputy manager was in the process of being recruited. We have therefore not changed the rating for the key question Well Led as we need to see consistent good practice over time. We will check on this at our next inspection. We will be in discussion with the provider about the mutually agreed conditions on their registration and report on this at the next comprehensive inspection.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

The service was not consistently well-led.

We found that action had been taken to improve the effectiveness of the service. There were systems in place to monitor staff recruitment and staff training records, although there was some improvement needed to the recording of nurses' competencies.

The provider met the legal requirements but we have not been able to revise the rating for this key question to improve the rating because of the need for improvement identified and there had been recent changes to the management of the service and the characteristics of a Good rating require consistency over time. Requires Improvement



Westcombe Park Care Home

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook a focused inspection of Westcombe Park Nursing Home on 24 October 2016. This inspection was carried out to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 20 and 21 April 2016 had been made. We inspected the service against part of one of the five questions we ask about services: is the service well-led? This was because the service was not meeting a legal requirement in relation to that question at the last inspection.

The inspection was undertaken by one inspector and was unannounced. Before the inspection we reviewed the information we held about the home, this included the provider's action plan, which set out the action they would take to meet legal requirements. During the inspection we spoke with the new manager, the regional support manager and an area trainer. We looked at seven staff training and recruitment records and training audits.

Our findings

At the inspection on 20 and 21 April 2016 we had found a breach of regulation in relation to systems to monitor the quality and safety of the service. Staff records had not been audited and were poorly organised. We found there were missing training and recruitment records which could not be located at the inspection.

At this inspection we found improvements had been made. An audit of staff recruitment and training records had been completed. Missing documentation had been identified and new documentation or records were provided. There was a more effective system to monitor recruitment records for prospective new staff to ensure that their records were complete. Staff induction records were filed and available as a record of their training and to monitor their development. There was a system to monitor staff training on a monthly basis to identify any gaps and ensure staff were prompted to complete training. Medicines competencies were recorded for those staff that administered medicines. However some improvement was needed in the monitoring and recording of some nurses' competencies to ensure there was a clear record of which competencies had been assessed.

Improvements have been made and the provider was meeting legal requirement in this area. However, we have not revised the rating for this key question to improve the rating to 'Good' at this inspection. This was because there were some improvements needed to the recording of nurses' competencies and there were significant management changes at the time of this inspection. There had been no registered manager in place since August 2015. The home had been managed by a relief manager and a new manager had recently started with a view to registering as manager at Westcombe Park. They were being supported to learn about their role by the previous relief manager and the support of the recovery team. The deputy manager had also recently left and the home was in the process of recruiting a new deputy manager. The characteristics of Good require evidence of consistent management and quality assurance over time.