GCH (Bletchley) Ltd

Bletchley House Residential Care and Nursing Home

Inspection report

Beaverbrook Court
Whaddon Way, Bletchley
Milton Keynes
Buckinghamshire
MK3 7JS

Tel: 01908376049
Website: www.goldcarehomes.com

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20 December 2016

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Ratings

Overall rating for this service	Requires Improvement
Is the service effective?	**Requires Improvement**

Summary of findings

Overall summary

Bletchley House Residential Care and Nursing home provides accommodation for up to 44 people who are elderly and frail, some of whom maybe living with dementia. The home is owned and managed by Gold Care Homes Ltd. At the time of our inspection 26 people were using the service.

We carried out an unannounced comprehensive inspection of the service on 1 and 3 June 2016. A breach of legal requirements was found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to Regulation 18 (2a) HSCA 2008 (Regulated Activities) Regulations 2014. Staffing.

We undertook this unannounced focused inspection on 20 December 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 those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for ACS Care Services Ltd on our website at www.cqc.org.uk.

There was a manager in post who was in the process of registering with the Care Quality Commission (CQC). 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.

We reviewed the supervision system in place and found that it had been strengthened. We saw that staff received regular one to one supervision with a manager on a regular basis. Staff confirmed they had taken place and found them worthwhile.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating 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 effective?

Requires Improvement

The service was not always effective.

Staff members had received regular supervision and one to one support.

A matrix was in place to ensure all staff received regular supervisions, probationary meetings and annual appraisals.

Quality assurance checks had been carried out to ensure staff had received regular supervisions.

We could not improve the rating for effective from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Bletchley House Residential Care and Nursing 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 an announced focused inspection of Bletchley House on 20 December 2016. This inspection was done to check that improvements to meet legal requirements planned by the provider after our inspection on 1 and 3 June 2016 had been made. The team inspected the service against one of the five questions we ask about services: is the service effective? This is because the service was not meeting some legal requirements.

This inspection was undertaken by one inspector.

Prior to the inspection we reviewed all the information we held about the service, including data about safeguarding and statutory notifications. Statutory notifications are information about important events which the provider is required to send us by law. We spoke with the local authority and health and social care professionals to gain their feedback as to the care that people received.

During our inspection, we spoke with the manager, the regional operations director, the administrator, a maintenance person, the head of care and a senior health care assistant.

We looked at supervision records to see if they were accurate and reflected the action the service had taken since our last inspection.

Requires Improvement

Is the service effective?

Our findings

During our inspection 1 & 3 June 2016 we found that staff had not received individual supervision or one to one opportunities to allow them to discuss any concerns or training requirements they may have had. Staff told us they had not had supervisions at all with the previous manager. One member of staff said, "We do not have supervisions, I cannot remember the last time." We looked at the supervision records for all of the staff and found that only one supervision for one member of staff had been recorded within the last 12 months. The management team on the day of the inspection were unaware that supervisions had not taken place. Staff morale was low as they had not been given the opportunity to discuss their issues on a one to one basis with a manager or supervisor.

This was a breach of regulation 18 of the Health and social Care Act (Regulated Activities) Regulations 2014.

At this inspection, we found that the provider had followed their action plan, to meet shortfalls in relation to the regulatory requirements as described above.

Staff we spoke with confirmed they had received regular one to one supervision sessions with their line manager. One staff member said, "I have had two within the last six weeks. We discussed training and I am now doing a NVQ Level 5." Another told us, "They are useful and [manager's name] is very supportive." They went on to tell us how through supervision they had been able to help with an issue and get it resolved.

One staff member said, "When I read the record before I signed it, it reflected what had been discussed so I knew they had listened." Another said, "At my last one I asked about two specific types of training I wanted. I have already had one and the other is booked for January."

One staff member had recently been promoted and told us they had received supervisions to assist with the transition into their new role. The head of care told us they had received training to enable them to conduct supervision meetings with junior staff.

We saw the matrix which showed when supervisions, probationary meetings and annual appraisals had been booked in. Records had been kept of each supervision session which had been signed by the staff member and the person who carried out the supervision. Some had been reviewed and signed by the manager. We checked records for ten staff and found they had received supervision sessions on a regular basis.

The records of the quality assurance visits which had been carried out by the regional manager now included checking that staff had received supervisions.