

# Mark Jonathan Gilbert and Luke William Gilbert

# Willows Nursing Home

## Inspection report

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## Ratings

Overall rating for this service

Requires Improvement ●

Is the service effective?

**Requires Improvement** ●

# Summary of findings

## Overall summary

We carried out an unannounced comprehensive inspection of this service in February 2016 when one breach of legal requirement was found. The breach of regulation was because we had concerns about the lack of staff training and support. We asked the provider to take action to address this concern.

After the comprehensive inspection, the provider wrote to us to tell us what they would do to meet legal requirements in relation to the breach. We undertook a focused inspection on 6 July 2016 to check that they had they now met legal requirements. This report only covers our findings in relation to the specific area / breach of regulation. This covered one question we normally asked of services; whether they are 'effective'. The question 'was the service safe?', 'was the service caring?', 'was the service responsive?' and 'was the service well led?' were not assessed at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Willows Nursing Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Willows Nursing Home provides care and support for up to 28 people with a variety of nursing needs.

A manager was in post though they were not registered with us (Care Quality Commission) as yet. Following our inspection the manager informed us they had submitted their application to us. 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 found the service had made improvements and the breach had been met. Staff were supported and trained to ensure they met people's needs.

The provider had now set up an academy with training managers to oversee the training requirements for staff employed at the Dovehaven homes. This was to ensure the staff have the skills, knowledge and expertise to meet people's individual needs and to further their professional development and learning. Staff attended a rolling programme of training which included formal qualifications in care and subjects such as moving and handling, safeguarding adults, infection control, fire safety and food hygiene.

Systems were in place to support staff and this included the provision of staff meetings and supervision sessions held on a one to one basis by the manager with staff.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service effective?

The service was effective.

We found that action had been taken to meet legal requirements. Staff received training and support to meet people's individual needs and carry out their role effectively.

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 for 'Effective' at the next comprehensive inspection.

**Requires Improvement** ●

# Willows 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.

This focused inspection took place on 6 July 2016 and was unannounced. The inspection was carried out by an adult social care inspector. The inspection was completed to check that improvements to meet legal requirements identified after our comprehensive inspection on 8 February 2016 had been made. We inspected the service against one of the five questions we ask about services; is the service effective? This was because the service was not meeting legal requirements in relation to this question.

We looked at records in respect of training and support for the staff and also spoke with a member of the care team, a registered nurse and the manager to ascertain their views about the training provision. We contacted a commissioner of services prior to the inspection to seek feedback about the service.

## Is the service effective?

### Our findings

We carried out an unannounced comprehensive inspection of this service in February 2016 when we found a breach of regulations regarding the lack of staff training and support at the service. We asked the provider to take action to address these concerns. The provider submitted a provider action report which told us the improvements they had made to meet this breach. On this inspection we checked to make sure requirements had been met. At this inspection we found improvements had been made to meet necessary requirements. Staff were receiving training and support to meet people's individual needs and carry out their role effectively

The provider had set up an academy with training managers to oversee the training requirements for staff employed at the Dovehaven homes. The Dovehaven academy set out short term and long term objectives for the staff in respect of assessing staff's training needs for subjects they consider mandatory and staff were enrolled on formal qualifications in care. This is to ensure the staff have the skills, knowledge and expertise to meet people's individual needs and to further their learning and development.

We discussed with the manager staff training and also formal qualifications in care which staff had achieved or were enrolled on. We saw that staff were undertaking an accredited qualification made up of units such as, NVQ (National Vocational Qualification) or Diploma under the QCF (Qualifications and Credit Framework). With regards to formal qualifications in care the manager told us five members of care staff had obtained a NVQ in care. This was confirmed by records we saw. Staff were also enrolled on the Care Certificate. This is 'an identified set of standards that health and social care workers adhere to in their daily working life'. The standards cover areas such as, infection prevention and control, safeguarding adults, work in a person centred way and duty of care. The Care Certificate requires staff to complete a programme of training, be observed by a senior colleague and be assessed as competent within twelve weeks of starting employment. The manager told us that any staff who did not have a qualification in Health & Social Care were being signed up immediately.

In respect of subjects such as safeguarding adults, moving and handling, infection control and food hygiene, we saw training certificates for courses undertaken following the last inspection. The manager told us about discussions held during staff meetings around abuse, the Mental Capacity Act 2005, Deprivation of Liberty Safeguards and fire safety, as a way of enhancing staff knowledge.

We spoke with a member of the care team who told us about their induction when they started at the home. They told us that they initially worked alongside a more experienced member of staff and that the induction provided them with the information they needed about the service and how to carry out their job role safely. We saw two completed staff induction records.

The manager informed us that training was provided face to face and also via DVDs and questionnaires. If required, training was outsourced to meet staff's individual training requirements.

The training matrix/plan was not available during our inspection to view as the information had not yet

been updated. We requested this information to be sent to us following the inspection. On receipt of this information we saw evidence of the staff's training plan/matrix and planned courses in areas such as, moving and handling, fire, infection control, medication, safeguarding, Mental Capacity Act 2005 and food hygiene. Following the inspection the manager was able to confirm that a number of staff had attended training courses which had been held following our visit.

Staff support included supervision meetings conducted by the manager with individual staff. The manager told us they only completed a small number to date though with a recent increase in supernumerary hours allocated to them, they felt they would be able to conduct these meetings in a more timely manner. A staff member told us they felt fully supported and could speak with the manager and other senior members of the staff team at any time.

We spoke with the manager about 'pulling together' a more detailed over view of staff training and close working with the academy as not all the information we requested was available during our inspection. We appreciate however the information we required was provided following our visit.