

Care Providers (UK) Limited

Ashcroft - Bromley

Inspection report

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Date of inspection visit:
18 May 2017

Date of publication:
14 June 2017

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 on 27, 28 and 30 November 2016. A breach of legal requirements was found in respect of staff training. We found training records did not always verify that staff had received training considered mandatory by the provider. Additionally, where internal senior staff provided training to staff we were not shown evidence that they had the necessary skills or qualifications to do this safely. The provider also had no guidelines about the training nurses were expected to undertake to ensure they could meet people's needs safely.

After the comprehensive inspection, the provider sent us an action plan to say what they would do to ensure they met the fundamental standards. We undertook this unannounced focused inspection on 18 May 2017 to check that they had followed their action plan with regard to staff training and to confirm that they now complied with the regulations.

Ashcroft Nursing Home provides accommodation and nursing care for up to 22 people with residential and/or nursing needs, including end of life care. On the day of the inspection there were 20 people living at the home.

There was no registered manager in place. The home had been managed by the deputy manager since the previous registered manager de-registered in March 2016. The deputy manager told us they were in the process of applying to become the registered manager of the home. 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.

At this inspection we found improvements had been made to the arrangements for staff training and staff were provided with the training they needed. The training policy had been updated and the provider had a list of the mandatory and additional training expected of staff to ensure they could meet people's needs safely. We found recent training, including moving and handling training had been provided by an external trainer. Nursing staff had received additional training in areas such as specialist feeding techniques to ensure they could meet the clinical needs of the people they cared for. Staff told us they thought their recent training had been effective and useful to them to help them to meet people's needs. The home now met regulatory requirements in this respect.

However, although improvements have been made, we are unable to change the rating of this key question at this inspection. This is because there were other areas in the key question that were rated as requires improvement at the last comprehensive inspection that we did not look at during this inspection. We will check on these areas 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?

The service was not consistently effective.

The provider had made improvements to the arrangements for staff training to ensure staff were competent to meet people's needs safely. Improvements had been made to the recording of training. The home now met regulatory requirements in this respect.

However there were other aspects of this question rated as requires improvement at the last comprehensive inspection and so we are unable to change the rating of this key question at this inspection.

Requires Improvement ●

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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 carried out a focused inspection of Ashcroft on 18 May 2017 to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 27, 28 and 30 November 2016 had been made. We 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 legal requirements in relation to a part of this key 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 they sent us following the comprehensive inspection in November 2016. The plan set out the action they told us they would take to meet legal requirements. During the inspection we spoke with the acting manager, a nurse and two care workers. We looked at the systems to manage training and six staff training records to check whether the provider was meeting legal requirements.

Is the service effective?

Our findings

At the last inspection on 27, 28, and 30 November 2016 we had found a breach of regulatory requirements in relation to staff training and support. Internal staff had undertaken some staff training at the home including moving and handling training. The provider was unable to verify that these internal staff had the necessary qualifications and competency to carry out the training competently. Staff training certificates were not always signed to evidence that the training had been completed. The provider had no guidance about what training nurses were required to have completed to support people at the service. Following the inspection, the provider sent us an action plan telling us how they would make improvements to meet legal requirements.

At this inspection on 18 May 2017 we did not ask for people's views about the training provided to staff as they were unable to comment on the training provided. We spoke with three staff who told us that the provider had recently organised training from an external training company on a range of topics, including moving and handling training which included practising with equipment. One staff member said, "The training is really good now, we got tested at the end to make sure we understood everything."

The manager told us that further refresher training was being sourced from this trainer as well as the local authority run training courses. They had also worked with another home to share training on food hygiene and that staff were positive about the training provided.

Staff received training on a range of courses the provider considered mandatory. These included safeguarding adults, end of life care, infection control, first aid, fire safety and health and safety. We saw there was an up to date system to record all staff training which included a check of when this training would expire. Staff also received training on other areas to meet people's identified health and care needs. For example staff had recently completed a course on hearing aid care.

We looked at six staff files and found certificates to evidence training had been signed and dated by the trainer to verify staff attendance. Nurses had completed a range of training to help them meet people's clinical needs, which included specialist feeding regimes and catheterisation. Staff were therefore supported to have adequate training to meet people's needs.

The provider has met the legal requirements with regard to this breach of regulation, however, there were other areas of this key question that required improvement at the last inspection which will be checked at the next comprehensive inspection, in line with our guidance. We are therefore unable to change the rating of this key question at this inspection.