

Laurel Residential Homes Limited

Russell Hill Lodge

Inspection report

39 Russell Hill Road
Purley
Surrey
CR8 2LD

Tel: 02086683212

Date of inspection visit:
20 March 2017

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Ratings

Overall rating for this service	Good ●
Is the service effective?	Good ●

Summary of findings

Overall summary

This inspection took place on 20 March 2017 and was unannounced.

The inspection was carried out by an adult social care inspector.

At our previous inspection in January 2016, we found the service was not providing staff with regular training and refresher training.

Russell Hill Lodge provides rehabilitation and recovery care for up to 18 adults who have mental health problems. The service had a registered manager. 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 carried out a focussed inspection to check staff were receiving appropriate training and found the service had made improvements and was meeting the requirements of the Regulations.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service effective?

Good ●

The service was effective. Staff received appropriate training.

Russell Hill Lodge

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.

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The inspection was carried out by an adult social care inspector.

During the inspection we spoke with three members of staff. After the inspection we were provided with records of staff training.

Is the service effective?

Our findings

At our previous inspection in January 2016, we found areas of training and refresher training had been overlooked by the previous manager. For example, three members of staff had not had any refresher training in the Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DoLS) since 2013; two members of staff had not completed safeguarding refresher training since 2013; and, one team leader had received no medicines awareness training since 2013.

We did not look for further examples as the records confirmed what we had already been told by staff about the decline in training. We were concerned that staff might not have up to date knowledge in key areas for them to deliver safe and appropriate care and support. These anomalies in training provision were a breach of Regulation 18 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Despite the problems with training we found the impact on people was limited because staff had the knowledge and skills they needed to carry out their roles. Staff told us training had improved since November with the arrival of the new regional manager and new service manager. Provider audits had identified the gaps in training and every effort was being made to bring staff back up to date. We saw records and were told by staff about recently completed training. The regional manager informed us about planned training. New members of staff were required to complete an induction programme, including training, that reflected the requirements of the Care Certificate. The Care Certificate sets out the learning outcomes, competences and standards of care expected in health and social care.

We carried out an inspection that focussed on training to ensure the provider had made improvements. One member of staff told us training had improved since our previous inspection. We were provided with training records showing staff were attending regular training in areas identified by the provider as mandatory, service specific and requested by staff. Records showed staff were completing regular training. Training plans identified future training. We will check staff training at our next comprehensive inspection to ensure improvements have continued.