

C.T.C.H. Limited

# Chargrove Lawn

## Inspection report

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### Ratings

Overall rating for this service

Good ●

Is the service effective?

Good ●

# Summary of findings

## Overall summary

Chargrove Lawn provides accommodation for up to 26 older people. At the time of the inspection there were 21 people living there, of whom 13 were living with dementia. People had bedrooms with en suite facilities, some included shower rooms or baths. People also had access to shared bathrooms as well as living and dining areas. The grounds around the home were accessible to everyone. Areas of the home had recently been refurbished and there were plans to continue to upgrade other areas.

There was no registered manager in post. 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. A manager had been appointed and they were going through our registration process.

We carried out an unannounced comprehensive inspection of this service on 20 October 2015. 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 the breach.

We undertook this focused inspection to check that they had followed their plan and to confirm they now met legal requirements in relation to a breach of regulation 18. This report only covers our findings in relation to this requirement. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Chargrove Lawn on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

At the comprehensive inspection of this service on 20 October 2015 a breach of legal requirements was found. After this comprehensive inspection, we asked the provider to take action to:

- ensure staff had access to the training, supervision and appraisals they needed to enable them to carry out their duties.

At this inspection we found action had been taken to address this. A new system had been put in place by the provider to manage the training needs of staff. This meant each month the manager would be reminded of any refresher training which was due. Staff confirmed their training was kept up to date. Staff had individual meetings with managers every two months and an annual appraisal. They were also observed doing such tasks as personal care, moving and handling and medicines administration. Staff said they felt supported in their roles and communication within the home was good.

The provider had displayed the rating for this service on their website and in the home.

## 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. We found action had been taken to ensure the service was effective. People were supported by staff who had access to training and support to help them understand people's needs and to carry out their roles.

# Chargrove Lawn

## **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 unannounced focused inspection of Chargrove Lawn on 24 January 2017. This inspection was done to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 20 October 2015 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 some legal requirements.

The inspection was undertaken by one inspector and was unannounced. As part of this inspection we spoke with the manager and with four staff about their training needs and the support they received. We looked at training records, schedules for individual meetings and annual appraisals and individual supervision and appraisal records.

# Is the service effective?

## Our findings

At our inspection of 20 October 2015 we found the provider had not ensured staff had received the training they needed to carry out their duties. Staff had also not received individual support or annual appraisals so they could reflect about their roles and responsibilities as well as their training needs. The provider sent us an action plan telling us what action they planned to take.

At our focused inspection on 24 January 2017 we found the provider had taken action to address these issues. Staff told us they felt supported in their roles. They said, "I find the manager open and honest, I can speak with her whenever I have any conflicts with others in the team and she sorts it" and "I speak with the managers as issues arise". A schedule of individual meetings (supervisions) confirmed these had been arranged every two months during 2016 and scheduled every two months throughout 2017. If for any reason they had not been able to go ahead this was clearly identified on the schedule for example, long term absence. Annual appraisals had also been carried out in 2016 and were scheduled for 2017. A member of staff confirmed they had completed this year's annual appraisal in January. The manager described how they also carried out observations of staff practice to include delivering personal care, administration of medicines and moving and handling. Staff meetings had also been scheduled throughout the year to take place every two months. Staff said communication was very good and they were working well as a team.

People were supported by staff who had access to a range of training. Staff confirmed they did "lots of training" and they were told when training needed to be updated. They said they were given a timeframe to complete this. A member of staff said they had started their shift earlier so they could update their mandatory training. They were doing this on the computer during our visit. A new system had been introduced by the provider whereby a senior manager had responsibility for overseeing the training needs of staff. Each month a spread sheet would be sent to the manager detailing the training needs of staff. The dates this training had been completed were then entered to confirm this had been done. The manager said they were looking at alternative ways of providing training to the current open learning accessed on computer. More face to face training was being planned and managers had been trained to deliver some training such as moving and handling and safeguarding. A member of staff commented, "It's absolutely brilliant, you never stop learning. I learnt a lot from doing the two day dementia training." Staff spoke keenly about additional training they had completed specific to the needs of people they supported such as dementia and end of life. The manager said they had allocated key roles to staff to take the lead in such areas as dementia, privacy and dignity and end of life. Additional information had also been provided for staff to learn about people's individual conditions such as dysphasia (a difficulty with swallowing). Staff confirmed they were supported to develop professionally and were registered for the diploma in health and social care at levels two and three.