

# Farnborough(War Memorial)Housing Society Limited

# Knellwood

# **Inspection report**

83 Canterbury Road Farnborough Hampshire GU14 6QN

Tel: 01252542169

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Date of publication: 12 September 2017

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| ratings                         |                        |
|---------------------------------|------------------------|
| Overall rating for this service | Requires Improvement   |
|                                 |                        |
| Is the service effective?       | Requires Improvement • |

# Summary of findings

### Overall summary

We undertook an unannounced comprehensive inspection at Knellwood on 06 and 07 December 2016 where a breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 was found. Not all staff had received training or training updates in line with nationally recognised standards. There were gaps in staff training records for first aid, infection control, equality and diversity, The Mental Capacity Act (2005), moving and handling, safeguarding and control of substances hazardous to health (COSHH).

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach. The provider wrote to us on 23 May 2017 to inform us they had completed all the improvements listed on their action plan.

We carried out a focused inspection on the 08 July 2017 to check whether that they had followed their action plan and to confirm that they now met legal requirements. This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Knellwood' on our website at www.cqc.org.uk.'

Knellwood is a care home with nursing providing a service for up to 52 older people, some of whom may be living with dementia. There were 44 people living at the service when we carried out the inspection.

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.

At our focused inspection on 8 July, we found that some staff still had not received all the training required by legislation and recommended as best practice by the Department of Health and Skills for Care (SfC), for staff working care homes with nursing. Some staff had not received training in first aid, infection control and equality and diversity. Other staff required training updates in first aid to help ensure their skills and knowledge were current. This meant that people were potentially put at risk as staff had not received suitable training to deliver basic life support in an emergency situation or work effectively to reduce the risk of spreading infections.

The provider had made improvements to ensure that the content of their mandatory training for staff was in line with legalisation and best practice. The provider was due to introduce a new reoccurring programme of refresher training which would give staff access to regular training updates for subjects covered in their training induction. The course had yet to be implemented and therefore we could not comment on its effectiveness during this inspection, but we will look at this during our next comprehensive inspection.

Staff had received improved access to training in, safeguarding, The Mental Capacity Act 2005, food hygiene,

moving and handling and control of substances hazardous to health.

Training was classroom based and the registered manger believed in the benefits of providing real life experiences during training to promote empathic care in staff.

We found one breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. You can see what action we told the provider to take at the back of the full version of this report.

### 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 always effective.

Not all staff had received appropriate training and updates that were necessary to enable them to carry out the duties they were employed to perform. Although improvements had been made, some staff were still requiring outstanding mandatory training and the provider's new system for keeping staff's training updated had not been embedded.

This meant that the provider was still not meeting legal requirements.

#### Requires Improvement





# Knellwood

**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. The inspection was carried out to check that improvements had been made to meet legal requirements, identified in a requirement notice served after our comprehensive inspection on the 06 and 07 December 2016.

This inspection took place on 08 July 2017 and was unannounced. The inspection was carried out by one inspector.

We reviewed the previous inspection report and information we held about the service including notifications. A notification is information about important events which the service is required to send us by law.

We spoke with the registered manager and two staff members. We spoke to three people living at the service. We observed staff providing care and support to people in the lounges.

We looked at training records, records of staff competency assessments and a quality audit from the local authority.

We inspected the service against part one of the five questions we ask about services: Is the service effective? This is because the service was not meeting some legal requirements.

### **Requires Improvement**



### Is the service effective?

# Our findings

At a comprehensive inspection carried out on 06 and 07 December 2016, we found the service was not always effective. We found a breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Staff had not always been provided with training necessary to enable them to carry out the duties they were employed to perform. We asked the provider to submit an action plan to us detailing how improvements would be made. At this inspection, we found a continuing breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Although the service had made some improvements to the provision of appropriate training for staff, further improvements were needed in order for the service to fully meet the requirements of this regulation.

At our previous inspection on 06 and 07 December 2016, we found that the provider's mandatory training courses for staff did not include all training required by legislation or recommended as best practice in care homes with nursing, such as infection control. In our guidance for providers on meeting the regulations we state that we expect registered providers and managers to take account of other nationally recognised guidance that might be specific to the services they deliver. This includes guidance produced by the Department of Health and Skills for Care (SfC). For example, the Department of Health expect all health and care facilities to follow their code of practice on the prevention and control of infections and related guidance. In that guidance it states, "The registered manager must ensure that everyone who is working in the care setting, including agency staff, contractors and volunteers, understand and comply with the need to prevent and control infections."

At this inspection we found that the provider had made improvements to the content of staff's induction training. Care staff new to care received training in line with The Care Certificate. This is awarded to staff that complete a learning programme designed to enable them to provide safe and compassionate care to people. Care staff with previous experience were due to receive induction training which included; infection control, food hygiene, equality and diversity, safeguarding, The Mental Capacity Act 2005 (MCA), first aid, moving and handling, fire safety, health and safety and continence support. Nursing staff were supported to maintain their professional registrations and attend external training relevant to their roles.

At our previous inspection on 6 and 7 December we found that not all staff had received mandatory training or training updates in line with legislation or best practice within care homes with nursing. This included training in food hygiene, moving and handling, safeguarding, equality and diversity, MCA, first aid and substances hazardous to health (COSHH). At this inspection, we found that some improvements had been made. The service was developing a rolling annual training refresher programme for staff. However, this had not been embedded and some staff had still not received training in first aid, infection control and equality and diversity, which was identified as outstanding at our last inspection.

The service had a total of 56 staff employed. This included nine nurses, 32 care staff and 15 ancillary staff. Since our last inspection on 06 and 07 December 2016, 39 staff had received training in MCA, 54 staff had received training in moving and handling, 50 staff had received training in food hygiene, 53 staff had received training in safeguarding and those identified as requiring training in COSHH at the last inspection

had now received it.

However, 17 staff had not received training in first aid and a further 13 staff's first aid training was completed over three years ago. The SfC "Ongoing learning and development in adult social care" guidance sets out the recommended or required minimum learning and development in adult social care. This sets out that all staff should have first aid and basic life support training with annual refreshers. Therefore, out of 47 care and ancillary staff, 30 had either not received first aid training or their training was outside the recommended timeframe for an update. This meant that people were potentially at risk if they required first aid or emergency assistance such as CPR, as not all staff were suitable trained or skilled to assist in these areas.

The provider's training matrix showed that only three staff had received training in infection control. This meant that out of 47 care and ancillary staff, 44 had not received training in this area. This meant that not all staff had not received training to ensure they had the knowledge to promote safe infection control practices, to help reduce the risk of spreading infections in their work setting.

Of 47 care and ancillary staff, eight staff had not received training in equality and diversity. Equality and diversity training helps staff to improve workplace cultures and behaviours by helping them identify, tackle and eradicate unlawful discrimination. Equality and diversity is one of the standards of the Care Certificate. Skills for Care (SfC) define the care certificate as, 'a set of standards that social care and health workers stick to in their daily working life. It is the new minimum standards that should be covered as part of induction training of new care workers.'

The provider did not have an effective system in place to ensure all staff received appropriate training. This was a continued breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We brought this to the attention of the registered manager who arranged for the 17 outstanding staff to be booked onto a first aid training course due to be completed in July 2017. They also told us that the staff requiring first aid updates and infection control training would receive this training as part of the provider's new rolling 'refresher training course', due to start in September 2017. The 'refresher course' was a classroom based full day training where all the provider's mandatory training courses would be covered. Staff would be due to complete this 'refresher training' yearly. The registered manager had arranged four separate reoccurring training dates throughout the year. This was to enable the service to structure staff's training to help ensure vast quantities of staff would not be called away to training at the same time. The registered manager told us they intended to prioritise putting staff who had outstanding training on the first two 'refresher training courses', which would help ensure that all staff had received training to support people in an emergency situation, promote good infection control practices and protect people from discrimination. We were unable to make a judgement about the effectiveness of this 'refresher training', but will see how it has been implemented during our next comprehensive inspection.

In the interim, the registered manager had ensured that there were always staff members on duty who had received training in first aid and infection control. Staff rota's showed that nursing staff with appropriate training qualifications in these areas were always allocated on duty and could attend to people in an emergency situation.

The registered manager told us they were committed to continuing the improvements the service had made to ensure staff received appropriate training and training updates. They said that they felt that classroom based training with practical elements was most effective in ensuring that the staff's knowledge was embedded. They reflected, "In our training, staff are encouraged to use real life situations and scenario's as

| much as possible. For example, staff are fed thickened fluids because we feel that staff need to have an understanding a of people's experience of receiving care in order to be truly empathetic." |  |
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### This section is primarily information for the provider

# Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

| Regulated activity   | Regulation  |
|--|---|
| Accommodation for persons who require nursing or personal care | Regulation 18 HSCA RA Regulations 2014 Staffing The provider did not have an effective system in place to ensure all staff received appropriate training. Regulation 18(2)(a) |