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Case Study





Increased recorded evidence of competence resulting in an excellent follow up inspection

To build onto our CQC inspection results, we felt we needed to adapt our Workforce Development Processes.

Highlights

- Our Inspector was clearly impressed with what we had done
- Made us think a lot more about our residents', their needs and what our staff needed to meet residents' needs
- Saved £11k by reducing classroom training
- Prepared us for the Care Certificate
- Identified and addressed knowledge gaps
- Staff were glad they were encouraged and challenged

About Harwood House Nursing Home

Care homes are renowned for deciding what's best for the residents they serve. People are often denied an opinion on how they live and as a result can become alienated and even institutionalised. At Harwood House we have rejected this approach.

We believe that it's not possible to create a home that works well for residents unless they have a voice in the way it's run. We're here to deliver what residents want – not what we think they should want – and that means listening to their ideas.

That's why we've developed a unique approach that encourages residents to participate fully in the running of the home.



An Inspector Calls... Our Inspector returned to follow up on issues he identified on his previous visit where he had informed us he could see staff were doing an excellent job but he couldn't see any evidence that their competence was being checked. We weren't doing a very good job of recording and evidencing competence and he suggested we put steps in place to improve this.

We asked The Grey Matter Group to help us and as a result, we implemented online assessments and e-Learning using CIS-Assessment and Log on to Care.

When the Inspector returned he gave us a glowing report, especially about training and development. He said what we had done was really good, it was exactly in line with what CQC wanted and that we were well ahead of the game compared to other homes in preparation for the Care Certificate.

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How do you induct and train your staff?

All of our existing staff have taken the assessments during the last 12 months and new staff take them before they join us so we can plan their induction. We have an idea of the % we want people to achieve and their results go into their staff file as evidence. We talk to people about their results in supervision. The results give us a steer on what areas to focus on and to pick up glaring issues or misunderstandings.

Most of our staff are extremely competent because we recruit people at a high level. We have had a few areas where we identified knowledge gaps, often around the more complicated subjects like MCA and we may send them to classroom training or they might do some e-Learning via Log on to Care.

We have started giving people buddies and mentors for the first 3 months and we do a local induction which is more practical e.g. about our policies and procedures.

It made us think a lot more about our residents' needs and what our staff needed to deliver these.

Before we were not always collecting evidence to show that we were doing an excellent job. We have been working much harder on testimonials and to gain feedback. This has captured the thoughts of residents to give staff positive feedback. It has also helped us to build on our good practice. This has been really positive for staff, especially when residents have given lovely testimonials about their work. These are also used to evidence staff competence.

What savings have you made?

We were less focussed on cost savings because we weren't doing enough to satisfy CQC and if we hadn't changed the way we were working, we could have run into problems.

However, we have reduced our 6 annual refresher days to 1 with more focus on supervision discussions. Time is a huge saving and some of our courses weren't being fully utilised so not offering value for money.

Taking into account the external trainers' costs and our staff time, we have saved £11k which has halved our training budget this year.

It has also been a lot less stressful to manage administratively which will have added to these time and costs savings.





"We knew the first 12 months would be a bit bumpy getting the Supervisors on board. In the past there had been no expectation on them except quick job chats, we are expecting a lot of them but that's now part of a supervisor's role in our sector."

What challenges did you have?

Asking all of our staff to take the assessments was a huge undertaking but we achieved it over the last year alongside implementing our new Workforce Strategy.

Most of our staff accepted the change without any issues. Computers are more widely used now and many have NVQs and are used to assessments. A few people felt threatened and some lacked IT skills so one of our RGN's took a month out and did the assessments with some of our care workers.

A couple of people admitted the reason they were resistant was because they were worried they were going to mess up but afterwards they were glad they did it as they didn't find it as hard as they thought they would. They said they were glad they had been encouraged to do this and to challenge themselves.

"It's reassuring when you look at the results and you can see that you have a competent workforce"



Emma.Dunton@HarwoodHouse.co.uk
www.HarwoodHouse.co.uk