

Saved time & money, had a great CQC inspection

CQC said “this is a good method of showing evidence of competence”. We support our staff to learn in different ways to suit their learning styles and personal situations – they are our biggest asset.

Highlights

- CQC confirm we are demonstrating best practice
- Save £500 for each new induction
- Saves time and money in refreshing knowledge
- Reinvesting savings into specialist training
- Improved staff retention
- Staff survey 87.5% says our training is excellent
- Supports staff to have training method choices
- Informs our interview process
- Experienced staff prefer to be assessed
- We manage competency checks more efficiently

Background

SureCare (Preston & South Ribble) are a Domiciliary Care Provider currently supporting 90 people throughout South Ribble and the surrounding districts and employing 40 staff who are local people. We have been providing support services to people for over 10 years and we are preferred providers for Lancashire County Council.

We strongly believe in promoting the eight person centred values and our focus is about enabling people to relax and feel safe in knowledge that we support people to cope and live happily at home. We also believe training is very important but that the right training is more important.

“Experienced staff prefer to have their knowledge and practice assessed because they already have specialist skills, qualifications and knowledge about clients’ needs that a training provider cannot contribute towards.”



How did you previously induct and train staff?

People attended 2 day induction training courses with a training provider and we introduced our own in-house training courses.

What challenges did this method present?

We did not get any evidence that learning had been achieved, although staff were provided with a brief workbook, this method and a training course certificate does not evidence competence. Managing rotas and staff cover for training is also challenging.

How do you induct and train your staff now?

We have moved to “on the job” training methods supported by the assessments. We use workbooks, shadowing, assigned supervisor and training manager for coaching and discussion, competence observations, spot checks and we have an open office policy whereby we provide support to staff to meet their learning based on their individual requirements. This is a more effective and efficient training method.

How does using CIS Assessment for induction save you time and money?

We now save £150 per person for 2 day induction course plus we save 2 days of staff time and 2 days of backfill time, at approximately £300 per person. There are additional management time and cost savings as we no longer have to organise to backfill rotas so **we save around £500 for each induction**. We no longer have the challenges of organising for people to attend training courses at inconvenient times for our business and our staff.

We believe using the assessments has helped with staff retention which is difficult to put a cost to. According to Skills for Care it costs £3.5k to recruit and train a care worker, so we save this every time we don't have to recruit unnecessarily. We review the assessments in-house and work with the staff to record the evidence, identify their learning needs and plan their learning. This can be a little time consuming but it far outweighs the trainer time we have saved and the associated costs but more importantly, it provides a much more robust method of inducting staff.

What have CQC observed during inspection?

Whilst CQC said they cannot promote any kind of training system, they did say what we are doing is a good method for showing evidence and shows, by providing competency based results, that we are demonstrating best practice .

How does CIS Assessment save you time and money as part of your refresher process?

We could run 2 hour refresher courses but then we have to think about travel time to attend, re-allocating work rota's and if staff are prepared to attend. In some instances classroom attendances have been down to one attendee due to cancellations and this wastes time and money. We can manage regular holistic competency checks more efficiently (than training certificate expirations) and because a training certificate does not evidence competence in the workplace, this method supports us to improve the quality of care. This shows inspectors we are meeting their recommendations to refresh staff based on their role, their clients and their learning needs.

During 1:1's and appraisals, staff still have the option to access various methods of training via e-learning, workbooks, www-SCIE.org.uk, correspondence, in-house workshops or with a training provider. Our most experienced staff, usually Diploma qualified, are opting for the assessment, due to the fact they have completed a course on the subject and also re-visited this during their Diploma and there is no need for them to repeat classroom training.

What other benefits has CIS Assessment supported?

During a recent staff survey, results confirmed 87.5% of staff answered "excellent/very good" about our training, the remaining 12.5% answered "good". This is important to us as we need to help **our employees as they are our biggest asset.**

What do your staff think of your induction?

It can be scary for new staff who are new to the sector, but when we completed the 2 day training course, it was a lot of information to take in over a short period of time and then this had to be put into practice. It is now a steady process with learning that is easier to take on board.

Were there any challenges you had to overcome in order to implement CIS Assessment?

Getting used to finding the correct answer if the employee got a question wrong. We can research and check the circumstances to find the correct answers relevant to our working environment, policies and procedures.

How do you use CIS Assessment?

Interview - We use the assessments for senior staff as a recruitment tool so applicants can demonstrate their knowledge and experience.

Induction – New inductions are working very well. Each new person is provided with the CIS workbook and they complete assessments online. During their 12 week induction period they are monitored, supervised and shadowed so that the workbooks and assessments can be completed. The line manager will assess each standard and will sign off when they are happy that the individual has reached a competent level.

Refresher – A very good tool for refresher training. An assessment can be taken to evidence the theory aspect, then our supervisor will conduct a practical assessment in the client's home using their care plan, their equipment and based on their support needs. We use the assessments for moving and handling, medication and safeguarding.

Supervision – Our supervising team use the results information, generated by the assessments, during spot checks, 1:1's and appraisal. The questions prompt discussion about relevant issues and what is right for each situation.

Qualifications – The tool provides good evidence for the Diplomas so we can get staff qualified much quicker.

Specialist Needs – We are now training all staff in End of Life Care and Dementia to meet the increase in demand for staff who are competent in these areas.

“Some staff are 10-15 miles from our office. More are starting to prefer computer based learning because it saves them time, cost of travel and child care”



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