

Sense

SENSE - 30 Norbins Road

Inspection report

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Ratings

Overall rating for this service Inspected but not rated Inspected but not rated

Summary of findings

Overall summary

The home provides a service for four people. Three people live in a large Victorian house; the fourth person lives more independently within the self-contained bungalow located at the rear of the property. The home is within walking distance of Glastonbury town centre.

At this inspection we met with the team leader as the registered manager was on annual leave and therefore unavailable to speak with us. At the time of the inspection all residents and staff had tested negative and the home had not had any outbreaks during the pandemic.

We found the following examples of good practice.

Staff had good knowledge of infection prevention control (IPC). All staff had received IPC training, including how to safely put on and take off PPE such as gloves, aprons, and face coverings. A staff member said, "We get refresher training and competency checks as well."

The home was clean and tidy. Staff were responsible for keeping the premises clean. There was a cleaning schedule that included disinfecting touch points several times a day and steam cleaning soft furnishings. One staff member told us, "We use lots of anti-bacterial wipes and we have changed our cleaning products in response to COVID-19."

The provider's visitor's policy was clear and in line with national guidance. Visitors were required to follow the homes infection control procedures. The provider had a summer house for safe visits as their bedrooms did not allow for social distancing.

The home was split into two floors. The team leader explained how they would implement zoning in the event of another outbreak. There was a contingency plan in place that described key people to be contacted in the event of a pandemic. The home had support from the local GP surgery, the local commissioning team and the organisations senior management team.

The provider was not admitting people to the home because they did not have any vacancies. The team leader told us, no one would be admitted without a negative test first and they would have to isolate for 14 days. They also told us, "Their belongings would go into isolation for 72 hours prior to the person moving in". The providers admissions policy confirmed this was the correct process for the home.

Regular testing was being carried out, weekly for staff and monthly for people living in the home. This was in line with COVID-19 testing guidance. Consent was recorded in line with the Mental Capacity Act 2005.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Inspected but not rated

Further information is in the detailed findings below.



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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.

As part of CQC's response to the COVID-19 pandemic we are looking at the preparedness of care homes in relation to infection prevention and control. This was a targeted inspection looking at the infection control and prevention measures the provider has in place.

This inspection took place on 14 June 2021 and was announced.

Inspected but not rated

Is the service safe?

Our findings

S5☐ How well are people protected by the prevention and control of infection?

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.
- We were somewhat assured that the provider was using PPE effectively and safely.

We saw staff wearing appropriate PPE when delivering personal care, but they left one room before removing it. Peoples bedrooms did not have foot operated bins to dispose of clinical waste and there were no PPE stations kept outside of bedrooms. Staff told us this was because most people had access to their own bathroom. The team leader assured us they would review this and make sure staff removed PPE inside the person's bed room to further reduce the risk of cross contamination.

When staff came on shift, they sanitised their hands, recorded their temperatures and put on personal protective equipment (PPE) at the front entrance. They walked to a nearby toilet to wash their hands, but did not change into fresh clothes when they came to work. The team leader told us they would ask the registered manager to review this and ask staff to get changed when they come to work in a separate room where they could also sanitise and put on the correct PPE before they enter the building. This will further reduce the risk of cross contamination.

We have also signposted the provider to resources to develop their approach.