Rodney House (Weston) Limited

Rodney House Residential Home

Inspection report

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Somerset
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Ratings

Overall rating for this service	Inspected but not rated

Is the service safe?	**Inspected but not rated**

Summary of findings

Overall summary

About the service
Rodney House Residential Home accommodates up to 28 older people in one adapted building across three floors. The service specialises in the care of people who are living with dementia. At the time of our inspection there were 20 people living at the home.

People's experience of using this service and what we found
For this inspection we only looked at one key line of enquiry in the safe domain as we were following up on a specific concern we had about infection prevention and control (IPC).

Risks relating to infection control were not all being managed safely. We observed staff were not always wearing personal protective equipment (PPE) appropriately. Not all staff had received up to date training in infection control, COVID-19 and how to put on and take off their PPE. There was a lack of suitable bins to dispose of PPE. The manager was addressing this at the time of the inspection. The storage of mop heads for cleaning did not follow good infection control practice.

People and staff were regularly tested for COVID-19. People who lacked the capacity to consent to the testing had not been assessed in line with the Mental Capacity Act 2005. At the time of the inspection no one living at the home had tested positive for Coronavirus.

There were procedures to ensure the service was clean. Staff had access to enough PPE. There were systems in place for staff to change their clothing at the point of entry into the home. The provider provided staff with clothes to wear whilst on shift. There were visiting policies and procedures in place. There were systems in place to communicate information to staff and people's relatives.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection (and update)
The last rating for this service was Requires Improvement (published 16 August 2019).

Why we inspected
We undertook this targeted inspection to check on a specific concern we had about how infection prevention and control procedures were being managed in the home. The overall rating for the service has not changed following this targeted inspection and remains Requires Improvement.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

We have identified a breach in relation to safe care and treatment at this inspection, relating to infection control. Information about CQC's response to the breach in regulation can be found at the end of this report.

We have made a recommendation relating to the service assessing people who lack the capacity to make specific decisions in line with the Mental Capacity Act 2005.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Rodney House Residential Home on our website at www.cqc.org.uk

Follow up
We will request an action plan from the provider to understand what they will do to improve the standards of IPC. We will work alongside the provider and local authority to monitor progress. We will return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Rodney House Residential Home

Detailed findings

Background to this inspection

The inspection
This was a targeted inspection to check on specific concerns we had about the infection control and prevention (IPC) measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team
This inspection was carried out by two inspectors.

Service and service type
Rodney House Residential Home is a 'care home. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager in who had been in post since November 2020. The manager told us they were in the process of applying to become registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection
This inspection was unannounced.

What we did before the inspection
We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to

send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all this information to plan our inspection.

During the inspection
We also spoke with five members of staff including the manager, care staff, housekeeping staff and laundry staff in relation to how IPC procedures were managed at the home. We observed the environment, including people's rooms and communal areas.

After the inspection
We spoke with three staff members. We continued to seek clarification from the provider to validate evidence found. We looked at a range of records, these included training data, risks assessments and quality assurance records in relation to infection prevention and control procedures.

Inspected but not rated

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as Requires Improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

Preventing and controlling infection

● Risks relating to infection control were not all being managed safely. Staff were not always wearing personal protective equipment (PPE) correctly. We observed three staff had their mask underneath their nose. The manager also had difficulty with the fitting of their mask, with it slipping down. We discussed options that may enable the masks to fit better. The manager told us they would review this and arrange training on wearing PPE for all staff.

● Staff had not all received up to date infection control training, including COVID-19 and training in putting on and taking off PPE correctly.

● There were a lack of pedal operated bins in the service for staff to dispose of their PPE. The manager had identified this and taken action prior to the inspection by ordering bins.

● The service had colour coded mops to cleaned specific areas of the home. These were all stored in one bucket which posed an infection control risk.

This was a breach of Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We discussed our concerns with the manager who had been in post for two months. They told us they would arrange for all staff to receive up to date training regarding PPE and infection control. They also arranged for more suitable storage for the mop heads.

● There were regular arrangements for COVID-19 testing to be completed for people and staff. Where people lacked the capacity to consent to the test a mental capacity assessment and best interest decision had not been completed. We discussed this with the manager who confirmed no one was refusing the test, they also stated they would address this as a priority.

We recommend the service complete assessments where people lack the capacity to consent to testing in line with the Mental Capacity Act 2005.

● Staff had access to enough PPE. The service provided uniforms for staff and these were changed on entry to the home. Staff had an allocated entrance to the home to prevent the risk of the virus entering the home.

● There were visiting policies in place, although the home was currently closed to visitors.

● 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 promoting safety through the layout and hygiene practices of the premises.

● We were assured that the provider's infection prevention and control policy was up to date.

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

The manager completed an action plan and sent this to us following the inspection detailing the areas for improvement and action they had taken and were going to take.

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 12 HSCA RA Regulations 2014 Safe care and treatment Infection control procedures did not fully protect people from risk of the spread of infection. Regulation 12 (2) (h)