

Cornwallis Care Services Ltd

Trecarrel Care Home

Inspection report

Castle Dore Road
Tywardreath
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30 March 2021

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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

Trecarrel is a residential care home that provides care and accommodation for up to 44 older people, some of whom are living with dementia. At the time of the inspection there were 32 people living in the service.

We found the following examples of good practice.

There had been an outbreak of Covid-19 at the service. Shortly after the start of the outbreak there was a change of management and the new manager had identified some areas for improvements in how the outbreak was being managed, at that time. These changes had been effectively implemented and included how the service was zoned, how staff were allocated, how staff took their breaks, correct mask wearing and the frequency of the cleaning of people's bedrooms.

The service had been zoned into two areas to enable people who had Covid to be cared for in one area and people who were Covid free in the other. This also meant staff could work in separate teams dedicated to each zone, to help reduce the risk of cross infection. When the number of people infected increased and a large proportion of the staff team were unable to work, it had not been possible to maintain the separate Covid positive and Covid negative zones or have dedicated staff teams for each zone. However, people who remained free from infection were cared for by a small group of staff and were still separated in an area of one of the zones.

The procedure for staff and visitors to enter the premises was robust. Supplies of PPE and suitable hand sanitising facilities were available at the entrance to the service and throughout the building. The service had maintained good stocks of PPE throughout the pandemic. Appropriate waste bins were in place for the disposing of used PPE. There was signage at the entrance explaining the infection control measures in place and well as posters around the service to remind staff and visitors of the infection control procedures.

On arrival for their shift staff went to a designated room to wash and sanitise their hands and put on their uniforms before they entered the main area of the home. This helped to reduce the risk of infection because staff did not enter areas of the home, where people lived, until appropriate infection control measures were in place.

Staff breaks were staggered and only one staff member used the staff room at a time, due to the size and limited ventilation in the room. Staff also used the well-ventilated dining room for breaks when it was not being used by people living at the service.

Staff had completed infection prevention and control and Covid-19 training. Re-fresher training was completed as guidance changed and training was updated. Additional PPE, such as visors, had been provided for staff to use during the outbreak. Senior staff carried out observations of staff practice to check staff were competent in carrying out the correct infection control procedures. Staff were observed wearing and using the appropriate PPE.

All areas of the service were clean and uncluttered. Seating and tables had been spaced out in the shared areas to allow people to stay socially distanced. Effective cleaning routines had been put in place to ensure infection control risks were minimised and people were kept safe. Domestic staff hours had been increased at the start of the pandemic and further increased during the outbreak.

Staff had worked closely with external healthcare professionals to enable people to have access to the appropriate health care and equipment such as hospital beds and oxygen. There were daily calls with the GP where staff reported people's daily observation results, such as oxygen levels. This meant, for people who were unwell with Covid, the right care could be provided in a timely manner.

Regular testing was carried out for staff and people who used the service. All visiting professionals were asked to either carry out a rapid test, and wait for the result before entering, or provide prove of a negative rapid test result carried out shortly before arrival.

Visiting had recently resumed, and relatives were tested in line with recent government guidance. The service had set up a visitor's room close to a side entrance, so relatives could access the room without the need to walk through the main home.

The provider had reviewed the infection control policy in response to the pandemic. Specific Covid-19 policies had also been developed to provide guidance for staff about how to respond to the pandemic and the outbreak. These policies were kept under continuous review as changes to government guidance was published.

Further information is in the detailed findings below.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Further information is in the detailed findings below.

Inspected but not rated

Trecarrel Care Home

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 care homes with outbreaks of coronavirus, we are conducting reviews to ensure that the Infection Prevention and Control practice was safe and the service was compliant with IPC measures. This was a targeted inspection looking at the IPC practices the provider has in place.

This inspection took place on 30 March 2021 and was announced.

Is the service safe?

Our findings

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 using PPE effectively and safely.
- 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.