

DFB (Care) Limited

Palm Court Nursing Home

Inspection report

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Date of inspection visit:
11 March 2021

Date of publication:
06 April 2021

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

Palm Court Nursing Home provides personal and nursing care for up to 53 people. There were 35 people living at the service when we inspected, most of whom were living with dementia.

People's experience of using this service and what we found

Following the last inspection in August 2020, the provider sent us their action plan. This included information about the steps they had taken to make improvements to the home.

The home was clean and hygienic and there was a designated housekeeping team. However, improvements needed to be made to the cleaning of frequently touched surfaces. Some communal bathrooms had items in them that needed to be removed.

Staff were wearing personal protective equipment (PPE) and were seen to wear masks at all times, however we observed that one staff member was not always following safe PPE practices. We informed the registered manager who assured us this would be addressed. Staff received competency checks around putting on and taking off PPE safely.

People living at the home were supported to social distance from each other. Chairs in communal areas were spaced out to encourage this. Small groups of people were supported to spend time in the lounge each day.

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 (9 September 2020) and a breach of regulation was found in relation to infection control. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found that improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection.

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.

Follow up

We will continue to monitor information we receive about the service until we 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?

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.

Inspected but not rated

Palm Court Nursing Home

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check whether the provider had met the Regulation 12 Safe care and treatment of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

As part of this inspection we looked at the infection control and prevention 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

The inspection was carried out by two inspectors.

Service and service type

Palm Court Nursing 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 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 of this information to plan our inspection.

During the inspection

We spoke with four staff members during the inspection including the registered manager, registered nurse, care worker and housekeeping staff. We made observations of the environment to check that infection control procedures were being followed correctly.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at the infection control policy, most recent infection control audit, business continuity plans and risk assessments for people around COVID-19.

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.

The purpose of this inspection was to check if the provider had made improvements in infection prevention and control. We will assess all of the key question at the next comprehensive inspection of the service.

Preventing and controlling infection

At the last inspection the provider had failed to ensure they were assessing the risk of, and preventing, detecting and controlling the spread of infections. This was a breach of regulation 12 Safe Care and Treatment of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection, we found the provider had made improvements to infection prevention and control and was no longer in breach of regulation 12.

- We were somewhat assured that the provider was using PPE effectively and safely. At the last inspection, we found that staff were not using PPE in line with government guidance and were not wearing face masks. At this inspection, we found that all staff were wearing face masks at all times. Staff were also wearing gloves and aprons. We saw that one staff member was not changing their gloves in between going into people's bedrooms to speak with them. We raised this with the registered manager who assured us that this would be addressed with further competency checks. There were signs around the home to remind staff of how to put on and take PPE off safely.

- We were somewhat assured that the provider was promoting safety through the layout and hygiene practices of the premises. The home was clean and hygienic and there were designated housekeeping staff. There were cleaning schedules in place which included frequently touched areas once a day. We raised this with the registered manager who assured us that this would be increased to ensure these areas were cleaned throughout the day by all staff. Bins throughout the home were foot-operated pedal bins. We saw that some of the bins in communal areas had broken pedals which meant staff had to lift the lid of the bins with their hands. The registered manager assured us that these bins would be replaced. We also saw that toiletries were being kept in one of the communal bathrooms which staff told us were spare in case people ran out. The registered manager assured us that she would remove these items and ensure that toiletries would only be kept in people's rooms.

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

- We were assured that the provider was preventing visitors from catching and spreading infections. There was a clear visitor policy in place and people had individual risk assessments on how to support visits safely.

Visitors were asked to complete a lateral flow test before entering the building and had their temperatures checked. Visiting was taking place using a visitor pod and the registered manager was in the process of risk assessing further access for visitors into the home. The registered manager had supported visits for people at the end of life throughout the pandemic. They had ensured that when these visits were necessary, visitors took the shortest route through the home to the person's bedroom.

- We were assured that the provider was meeting shielding and social distancing rules. At the last inspection, we found that people and staff were not socially distancing in line with government guidance. At this inspection we found that people were being encouraged to socially distance from one another. The registered manager encouraged people to come into communal areas in small groups and ensured that people were sat socially distanced from each other. Staff handover information was sent to staff by electronic messaging before their shift to reduce the need for staff to group together.
- We were assured that the provider was admitting people safely to the service. People were supported to isolate on admission to the home for two weeks in line with government guidance. People isolating were supported by staff in full personal protective equipment (PPE) and signs on people's doors identified their isolation start and end period. People required to isolate were supported with one to one activities at a safe distance.
- We were assured that the provider was accessing testing for people using the service and staff. People living at the home were supported to have tests for COVID-19 every 28 days. Staff completed lateral flow tests twice a week as well as polymerase chain reaction (PCR) tests once a week.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed. Staff working at the home did not work anywhere else. Where agency staff had been required on occasion to cover last minute sickness or absence, these staff had lateral flow tests before entering the building. Staff had received training in infection prevention and control and additional training in relation to COVID-19.
- We were assured that the provider's infection prevention and control policy was up to date. The registered manager had completed risk assessments for people and staff to identify and manage any increased risk from COVID-19.