

Ashbrook House Limited Ashbrook House

Inspection report

20 St Helier Avenue Morden Surrey SM4 6LF Date of inspection visit: 13 January 2022

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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

Ashbrook House is a residential care home providing personal and nursing care for up to nine people. At the time of our inspection there were seven people living in the home.

We found the following examples of good practice:

The provider had developed new ways of recording daily observations about people's health which were shared with healthcare professionals and appointments were arranged where required.

The provider was following best practice guidance to prevent visitors to the home spreading the Covid-19 infection. The provider had set up a room designated for visiting on the ground floor of the building, which had a separate entrance to the home. Facilities were available in this room for visitors to wash and sanitise their hands. The provider requested that all visitors booked appointments for visiting and staggered visits. The provider ensured that visitors had no contact with other residents and minimal contact with staff. It provided drinks in disposable cups and toilet facilities were directly outside of the visiting room. The provider supported visitors to wear a face covering when visiting. It screened all visitors for symptoms of acute respiratory infection before being allowed to enter the home and asked visitors to put on personal protective equipment (PPE) before the resident was brought to the room so as not to cause alarm. Visitors were required to undertake a lateral flow test, either on the premises or at home, and provide a negative result prior to visiting. There were multiple signs on the premises about infection control and PPE. The provider checked the vaccination and Covid-19 status of relevant visitors, recorded vaccination or exemption status and provided assurance of meeting vaccination requirements.

The provider supported alternative forms of maintaining social contact for friends and relatives; for example, keeping in touch using video calls, visiting in the communal garden in the summer months and using a telephone to communicate. The provider had previously supported visits in the car park and residents being brought to the window and had arranged for a local shop keeper to attend the car park for residents to purchase items when they were unable to leave the home due to Covid-19 restrictions. The provider completed risk assessments for residents who were leaving the home for outside visits and reviewed the risks and how these could be mitigated.

The provider ensured that the home was well ventilated, with windows and doors opened where appropriate to facilitate ventilation. Risk assessments had been completed for staff, which were updated in January 2022, and staff wore appropriate PPE.

The provide had arranged activities for residents to promote well-being and morale, including a first aid course in the garden, regular takeaway nights and visits to a local park. The provider had engaged with the Positive Behaviour Support (PBS) team who had helped prepare social stories, which had helped explain the Covid-19 pandemic to residents. The provider had received a certificate from the local authority in April 2021 in recognition of its dedication and commitment in providing ongoing care for residents during the

challenging period of the Covid-19 pandemic.

The provider had supported staff well-being throughout the Covid-19 pandemic and held regular one to one sessions with staff to provide support and guidance. It held regular meetings with staff to disseminate infection prevention and control guidance.

The provider had an admissions policy in place and there were clear procedures for people admitted to the home. The home had not had any recent admissions. Residents were assessed twice daily for development of a high temperature and PCR tests were undertaken on residents every 28 days. The provider had a procedure for testing and isolation of residents if they returned from a hospital admission and for testing of residents who had a scheduled outside visit.

The provider had an outbreak procedure and policy and recovery strategy plan.

Rooms were designated for specific activities, such as for visitors, and were subject to regular enhanced cleaning. The registered manager had oversight of infection prevention and control (IPC) at the home alongside two IPC champions. The provider completed a weekly IPC checklist to ensure compliance with IPC responsibilities.

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



Ashbrook House 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 how services manage infection control and visiting arrangements. This was a targeted inspection looking at the infection prevention and control measures the provider had in place. We also asked the provider about any staffing pressures the service was experiencing and whether this was having an impact on the service.

This inspection took place on 13 January 2022 and was announced. We gave the service 24 hours notice of the inspection.

Is the service safe?

Our findings

Staffing

• The provider told us they had measures in place to mitigate the risks associated with COVID-19 related staff pressures

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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

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