

Abbeyfield North Northumberland Extra Care Society Limited

Abbeyfield House - Alnwick

Inspection report

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Alnwick
Northumberland
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05 May 2021

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15 June 2021

Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Abbeyfield House – Alnwick provides personal care and accommodation for up to 25 people. Accommodation was provided on one level. There were 23 people living at the home at the time of the inspection, some of whom had a dementia related condition.

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

Risks relating to IPC had not been fully assessed, monitored and managed. Government guidance relating to safe working practices regarding infection control, including the use of PPE was not always followed by staff.

Checks to monitor the quality and safety of the service were carried out. However, an effective system to assess and monitor infection control was not fully in place.

People's needs were met by the number of staff on duty. Medicines were managed safely.

Staff spoke positively about working at the home and the people they supported. They explained they had worked as a team to help promote people's wellbeing throughout the pandemic. People were actively engaged in a range of activities throughout the day. The provider was facilitating visits for people living in the home.

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

Rating at last inspection

The last rating for this service was Good (published 14 October 2019).

Why we inspected

We undertook this targeted inspection to look at infection control processes at the home. We looked at infection prevention and control measures under the safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

When we inspected, we found there was a concern with infection control, so we widened the scope of the inspection to become a focused inspection which included the key questions of safe and well-led.

The overall rating for the service has changed from good to requires improvement. This is based on the findings at this inspection.

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

Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to discharge our regulatory enforcement functions required to keep people safe and to hold providers to account where it is necessary for us to do so

We have identified breaches relating to safe care and treatment and good governance. Please see the action we have told the provider to take at the end of this report. Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.

Follow up

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?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

Abbeyfield House - Alnwick

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 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 undertaken by one inspector.

Service and service type

Abbeyfield House – Alnwick 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. A registered manager 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

The 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. We used all of this information to plan our inspection. We did not request a provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make.

During the inspection

We spoke with eight members of staff including the registered manager, deputy manager, senior care worker, care workers, domestic, maintenance and kitchen staff. We reviewed three people's care plans and records relating to medicines.

After the inspection

We sought clarification from the registered manager to validate evidence found. We looked at information relating to staff training and reviewed policies and procedures.

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 good. At this inspection this key question has now deteriorated to requires improvement. This meant some aspects of the service were not always safe. There was an increased risk that people could be harmed.

Preventing and controlling infection; Assessing risk, safety monitoring and management

- A safe and effective infection control system was not fully in place to ensure people were protected from the risk of infection.
- Risks relating to IPC had not been fully assessed, monitored and managed. Government guidance relating to safe working practices regarding infection control, including the use of PPE was not always followed by staff.

The failure to ensure risks relating to IPC were assessed, monitored and managed was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- Checks on equipment and the premises were carried out to ensure they were safe.

Using medicines safely

- Medicines were managed safely. Records were maintained to show that medicines were administered as prescribed.

Learning lessons when things go wrong

- Accidents and incidents were monitored to ensure any trends or themes were identified so that action could be taken to prevent any reoccurrence.

Staffing and recruitment

- People's needs were met by the number of staff on duty.
- A recruitment procedure was in place to help ensure suitable staff were employed. Staff told us that recruitment checks were carried out before they started work.

Systems and processes to safeguard people from the risk of abuse;

- Systems were in place to safeguard people and protect them from the risk of abuse.
- Staff raised no concerns about staff practices, or the care and support people received.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated good. At this inspection this key question has now deteriorated to requires improvement. This meant the service management and leadership was inconsistent.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Checks to monitor the quality and safety of the service were carried out. However, an effective system to assess and monitor infection control was not fully in place.
- The infection control policy and audit had not been updated to reflect the changes in practice relating to COVID-19. Therefore, the shortfalls we identified had not been identified and actioned by the provider's quality monitoring system.

The lack of an effective system to assess, monitor and manage infection control was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Staff spoke positively about working at the home and the people they supported. They explained they had worked as a team to help promote people's wellbeing throughout the pandemic.
- People were actively engaged in a range of activities throughout the day. The provider was facilitating visits for people living in the home.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- There had been no incidents which required the provider to act on this duty.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Processes were in place to involve people and staff in the running of the home. Staff meetings had not been carried out as planned due to COVID-19; staff explained that they received sufficient information and updates via handovers and one to one supervision meetings.

Working in partnership with others

- Staff liaised with health and social care professionals to make sure people received care which met their needs.

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 17 HSCA RA Regulations 2014 Good governance An effective system to monitor the safety of the service in relation to IPC was not fully in place. Regulation 17 (1)(2)(a)(b)(f).

This section is primarily information for the provider

Enforcement actions

The table below shows where regulations were not being met and we have taken enforcement action.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment Risks relating to IPC were not fully assessed, monitored and managed. Staff were not always following government guidance relating to the safe use of PPE. Regulation 12 (1)(2)(h).

The enforcement action we took:

We issued a warning notice.