

Avery Homes Weybridge Limited

Silvermere Care Home

Inspection report

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Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated

Summary of findings

Overall summary

Silvermere is a care home without nursing for up to 72 people, some of whom may be living with dementia. There were 47 people living at the home at the time of our inspection.

We found the following examples of good practice

People told us staff had supported them well during the pandemic. They said the care and support provided by staff had been invaluable during the periods when they were unable to have family visits. One person told us, "We have been looked after wonderfully well."

Staff had given information to people about COVID-19 and had considered how to do this in accessible ways where necessary. People who lived at the home were given the choice of whether or not to wear PPE.

People had been able to see a doctor if they felt unwell. The home's GP carried out a virtual round every week and the registered manager said the GP visited to assess people face-to-face if necessary. COVID-19 screening was carried out on any professionals who needed to visit the home, such as the GP and district nurses.

During a recent outbreak of COVID-19, people had been supported to isolate in their rooms. Staff provided one-to-one support in people's rooms, including activities, and people's meals were delivered to them.

Since the COVID-19 outbreak, the provider had begun to reopen communal areas in a safe way. For example, tables in the dining rooms were well-spaced and had two places at each to enable people to socially distance. The use of table linen had been temporarily suspended.

Activities had restarted in the communal areas. Attendance at each session was limited to six people to enable social distancing. Activities co-ordinators provided additional sessions so all those who wished to take part could do so.

Prior to lockdown restrictions, the provider had enabled indoor visiting in allocated rooms which were cleaned after each visit. The provider had recently installed a visiting 'pod' in the home's garden for future visits. The visiting 'pod' was designed to enable safe visiting, with separate entrances for people and their visitors and a floor to ceiling screen.

The home was clean and hygienic. Additional cleaning schedules had been implemented, including of frequently touched areas. All staff had attended in-house IPC and COVID-19 training. Staff had access to the PPE they needed and used this safely and effectively during our visit. There were appropriate arrangements for the disposal of clinical waste.

Staff travelled to and from work in their own clothes and changed into a clean uniform on arrival at the

home. There was a staff changing room, which was used by one member of staff at a time, and an allocated room for donning and doffing PPE on each floor. Staff temperatures were taken and recorded before each shift and staff were required to take a lateral flow test (LFT) for COVID-19 twice a week. Staff breaks were staggered to ensure only one member of staff at a time used the staff room.

Staff retention during the pandemic had been good and staff sickness levels had been low. This meant people received their care from a consistent staff team. Some agency staff were used, although the provider had an arrangement with the agency that the staff supplied worked only at Silvermere. The registered manager told us agency staff undertook the same screening procedures, including LFT testing, as permanent staff.

The provider's IPC policy had been reviewed and updated in the light of COVID-19. IPC audits were carried out regularly and 'Rapid improvement audits' had been introduced following the outbreak of COVID-19 at the home.

The provider had a contingency plan. which addressed risks related to COVID-19, such as an increase in staff absence. Risk assessments had been carried out for people who may be disproportionately at risk of COVID-19, such as staff in vulnerable groups, and measures implemented to reduce risks where necessary.

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?	Inspected but not rated
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Further information is in the detailed findings below.



Silvermere 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 25 February 2021 and was announced.

Inspected but not rated

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.