

Doobay Care (Lychgate) Limited

# Lychgate House

## Inspection report

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11 February 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

Lychgate House provides accommodation and personal care for up to 15 people who have mental health needs, some of whom required support with personal care needs. At the time of inspection 11 people were living at the service.

We found the following examples of good practice.

- Staff had tried to manage the risk of isolation for people caused by COVID-19 social distancing restrictions. They had ensured people had virtual access to social groups, religious and spiritual organisations and regular contact with friends and relatives during lockdown. This supported people's mental wellbeing so they could still be part of important relationships they would have previously enjoyed outside the service.

## 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**

# Lychgate 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 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 11 February 2021 unannounced.

# Is the service safe?

## Our findings

S5□ 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 somewhat assured that the provider was meeting shielding and social distancing rules. Symptomatic residents were isolated in single occupancy rooms. However, in the communal lounge, chairs were placed close together and did not allow for social distancing. The room was small in size, but the provider had not considered how to use the space to ensure maximum spacing.
- 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 somewhat assured that the provider was promoting safety through the layout and hygiene practices of the premises. Some fixtures in the service were in poor condition. This included laminate flooring in the utility and dining room. The worktop in the utility room was damaged and patched with tape which needed to be replaced. We found two commodes in communal bathrooms which were in poor condition. One was rusty and one had a stained fabric backing. We were confident that these were not in use; however, they were in accessible areas. The condition of the commodes had previously been highlighted to the provider as an issue during a commissioning authority infection prevention and control visit. However, they had not been removed from the service.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed. However, Staff had not had individual COVID-19 risk assessments and consideration had not been given to staff who belonged to high risk groups such as people from the Black, Asian and minority ethnic groups.
- We were somewhat assured that the provider's infection prevention and control policy was up to date. There had been an infection control audit of the home carried out by an infection prevention and control professional and a number of recommendations had been made. This included some of those areas identified as poor practice in this report. The provider was in the process of putting these areas right, such as purchasing new commodes, wall docking stations for PPE and reviewing social distancing in the home. The service was in the process of updating the contingency plan that had been put in place during the significant outbreak in the home.

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