

Spemple Limited

# Rosebery House

## Inspection report

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21 January 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

Rosebery House is a residential care home providing care and accommodation for up to 30 older people living with dementia or dementia type illness. There were 23 people living there at the time of the inspection.

We found the following examples of good practice.

The home was currently closed to admissions and non-essential visitors. Measures had been implemented to ensure people and staff entering the home did so safely. This included temperatures being taken on arrival and personal protective equipment (PPE) being used.

People and staff had individual COVID-19 risk assessments completed where appropriate. This considered people's associated risks, including long term and underlying health conditions and ethnicity.

The home had experienced a high number of positive COVID-19 people and staff. During the outbreak staff monitored people's physical health and recorded this on a monitoring form, this included people's temperatures and general symptoms.

## 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**

# Rosebery 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 21 January 2021 and was announced.

# 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 assured that the provider was admitting people safely to the service.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider's infection prevention and control policy was up to date.

We were somewhat assured that the provider was meeting shielding and social distancing rules. People were mostly isolating in their rooms. Staff supported people who chose to leave their rooms to help them remain safe. However, staff were not seen to socially distance themselves from other staff to mitigate risk of transmission of infection. For example, in corridors and when accessing stairwells. This was addressed by the director and deputy manager during the inspection. The registered manager told us following the inspection all staff had been reminded of the need to ensure they socially distanced whenever possible to mitigate risk.

We were somewhat assured that the provider was using PPE effectively and safely. The home was using a high number of agency staff to cover for staff isolating. PPE was available at PPE stations on each floor. Not all staff were wearing PPE effectively. We observed a member of agency staff leave a person's room and enter another without changing their PPE. Other staff were seen to wear gloves continually around the home, this meant that hands were not being washed or hand gel applied between tasks. Foot operated bins were required for the safe disposal of PPE when staff left peoples rooms. The registered manager addressed these concerns following the inspection.

We were somewhat assured the provider was promoting safety through the layout and hygiene practices of the premises. A more detailed cleaning schedule was required to incorporate high touch areas to reduce the risk of spreading infection. The registered manager implemented this schedule following the inspection and has sent confirmation to evidence that this is now incorporated into hourly checks throughout the home.

We were somewhat assured that the provider was making sure infection outbreaks can be effectively prevented or managed. Staff were not consistently following Infection Prevention Control (IPC) guidelines, this was addressed by the deputy manager and director during the inspection.

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