

Parkgate Manor

# Parkgate Manor

## Inspection report

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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

Parkgate Manor provides accommodation and personal care for up to 40 people who have learning disabilities. Some people had specialist needs associated with downs syndrome and with behaviours that challenged. Some people communicated verbally, and others used gestures and body language to make their needs known. The majority of people were under 65 years of age. There were 28 people living at the service when we visited.

The home had been closed to visitors due to a recent Covid -19 outbreak. The home had three sets of cubicle toilets that had not been risk assessed to minimise the risk of cross contamination or infection. We found personal possessions had been left in bathrooms following personal care, increasing the possibility of shared use. There were limited records to demonstrate that baths and shower areas were cleaned after use and non-slip mats bathmats were left on the floor. No infection control audit had been carried out throughout the lockdown.

Policies and procedures were being reviewed at the time of our visit. We signposted the provider to resources to develop this area.

During the outbreak, the pandemic had put pressure on staff levels. Although the registered manager managed the situation, they did not follow government guidance.

The home had remained closed to all visitors due to a recent Covid-19 outbreak. However, visiting was about to start again in line with government guidance on 8 March 2021. The day centre had been designated as a visiting area as this had a direct outside entrance that supported safe visiting arrangements. Staff had supported people to maintain contact with their loved ones with the use of video calls and telephones.

There was a programme to ensure people and staff were tested regularly. This was alongside daily temperature testing for everyone and observing people for any signs or symptoms of Covid-19.

There were daily, weekly and monthly cleaning routines and all were recorded. Alongside normal cleaning routines all touch points were cleaned four times a day. All staff wore scrubs and personal protective equipment (PPE) such as aprons, gloves and masks. Staff had received training on infection control, the putting on and taking off of PPE and hand washing. There were clear arrangements in place for the management of laundry and waste.

When the home had their outbreak, people were cared for in their bedrooms and commodes were bought for individual use in rooms. As people recovered, tables in the dining rooms were spaced out to ensure social distancing. Some were moved to the sun lounge and to another lounge area.

A staff questionnaire had been completed to assess how staff were coping throughout the lockdown. Advice and support was provided for any staff who were assessed as vulnerable.

We asked one person how they were coping with lockdown and they said, "It's ok, it doesn't bother me." They also told us that they liked to talk to their relative on the phone. Where possible people kept to their usual routines, there are large grounds and over the past year a large poly tunnel had been erected and people who chose to, were encouraged to take part in growing vegetables. A number of people liked to spend time in the garden. We were told others liked to go for a drive or a walk on the sea front or to a park.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection (and update)

The last rating for this service was requires improvement (published 12 July 2019). There were no breaches of regulation. At this inspection, we only looked at IPC arrangements. We found the provider to be in breach of regulation 12, Safe Care and Treatment. This was because the provider had not fully implemented national guidance in response to the Covid-19 pandemic.

#### Why we inspected

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 COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Parkgate Manor on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

## 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**

# Parkgate Manor

## **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 CQC's response to the coronavirus pandemic we are looking at the preparedness of care homes in relation to infection prevention and control. This was a targeted inspection looking at the infection control and prevention measures the provider has in place.

This inspection took place on 4 March 2021 and was announced.

# 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 as good. We have not changed the rating of this key question, as we have only looked at the part of the key question in relation to infection control.

### Preventing and controlling infection

S5□How well are people protected by the prevention and control of infection?

- We were not assured that the provider was promoting safety through the layout and hygiene practices of the premises.

There were several bathroom/shower rooms. All had items of people's personal possessions that had been left after care had been provided. These included a bar of soap, towels and toiletries. In one bathroom there were large photo frames. In a number of areas there were non-slip bathmats that had been left on the floor. Although there were room checks completed daily there was no system to check bathrooms. We were told the cleaner cleaned the bathrooms daily. When we asked if staff cleaned baths/showers after every use we were told they were but there was no system to demonstrate this. Given the number of bathmats left on the floor and people's personal items we could not be sure this was the case, and this posed a risk in terms of cross infection.

There were three sets of cubicle toilets. One had a toilet and two urinals, and the others had two toilets. We spoke at length about these areas and the risks in terms of cross contamination as the dividers did not go up to the ceiling and people using them would not be two metres apart. This had not been identified. These areas had been raised at inspections previously in relation to privacy and dignity and we had been advised that they were part of a refurbishment plan.

- We were not assured that the provider was making sure infection outbreaks could be effectively prevented or managed. We asked to see the last infection control audit. However, no audit had been completed for a number of months. A new manager had been appointed and started in post the week before our inspection. They told us they would carry out an audit. During the home's second outbreak, the pandemic had put pressure on staff levels and some staff had to isolate which increased risks to people. Whilst the registered manager made pragmatic decisions to staff the home, they did not follow government guidance. When we raised this with them at the time they responded immediately, and government guidance was implemented.

- We were somewhat assured that the provider's infection prevention and control policy was up to date. We received a copy of the home's policy and this lacked detail.

The provider failed to assess the risk of, prevent, detect and control of the spread of infection. This is a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following the inspection, we received a copy of an updated cleaning schedule that clarified the cleaning arrangements for bathrooms. We spoke with the managing director about the use of cubicles. It was agreed that the two urinals would be removed and one of the toilets in each of the other two cubicles would be taken out or access denied. They confirmed these measures would be monitored for a month and then a decision made about how to refurbish these areas with a longer-term solution that met infection control, privacy and dignity. They also assured us that the infection control audit would be carried out as a matter of urgency. In relation to the home's policy on infection control, we asked the local authority to provide the home with a sample format for completing a more detailed document that could pull all key information together in a more useable format. This had been sent to the home.

- 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.

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 12 HSCA RA Regulations 2014 Safe care and treatment  The provider had not ensured they were assessing risks and controlling the spread of infections.  12(2)(h)