

Parkcare Homes (No.2) Limited

# Eastrop House and Lodge

## Inspection report

Eastrop House  
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## Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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Is the service well-led?	Inspected but not rated
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# Summary of findings

## Overall summary

### About the service

Eastrop House and Lodge is a residential care home for people with a learning disability or autism. The home is a large detached building in keeping with other houses locally. The building had four en suite bedrooms on the ground and first floors and an annexe.

The home supports up to nine adults, at the time of the inspection there were six people living at the service.

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

We were assured the provider had robust infection control procedures in place, which staff were following, to keep people safe from the risks of COVID-19. There was enough personal protective equipment and staff were wearing this appropriately.

There was good oversight of quality and safety in the service by the staff team, manager and quality leads supporting the service. Staff fed back positively about the management team. The service worked with people to gain their views about how the service should run and how their care should be provided. People's relatives had confidence in the management and felt involved.

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

The last rating for this service was good (published 13 December 2017).

### Why we inspected

We undertook this targeted inspection to follow up on specific risks we had identified related to the service. A decision was made for us to inspect and examine those risks. The risks included: multiple changes in registered manager at the service and concerns over the culture within the home.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

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.

The overall rating for the service has not changed following this targeted inspection and remains good.

### Follow up

We will continue to monitor information we receive about the service until we 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?**

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

### **Is the service well-led?**

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

# Eastrop House and Lodge

## Detailed findings

### Background to this inspection

#### The inspection

This was a targeted inspection to follow up on specific risks and concerns we had about the lack of registered manager and the culture within the home.

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 carried out by one inspector with an assistant inspector supporting remotely.

#### Service and service type

Eastrop House and Lodge 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 who had applied for registration, though this had not yet been processed. Throughout the report they will be referred to as "the manager".

#### Notice of inspection

This 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.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

We used all of this information to plan our inspection.

#### During the inspection

We spoke with three people's relatives. We observed how staff interacted with people in the home and whether they were wearing the appropriate personal protective equipment. We looked around parts of the home to review cleanliness and management of infection control. We spoke with seven members of staff including the manager, senior care workers and the positive behaviour support lead.

We reviewed a range of records. This included a variety of records relating to the management of the service, including policies and procedures, support plan reviews, audits and training records.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found.

# 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 we had specific concerns about.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted as part of our Thematic Review of infection control and prevention in care homes. We will assess all of the key question at the next comprehensive inspection of the service.

### Preventing and controlling infection

- We identified two amendments to the provider's policies related to infection control to bring them in line with national guidance and best practice. We found no evidence this was impacting safety of people living in the home. The manager agreed to escalate this through the provider's policy team.
- We were assured that the provider had an appropriate visitors policy and procedure in place which protected people from the risk of infection.
- 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 personal protective equipment (PPE) effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff and considering people's best interest.
- 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. For example, staff spoke positively about the training they had received and understood what they should do in the event of an outbreak to keep people safe.

# 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 as good. We have not changed the rating of this key question as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check a specific concern related to the turnover of registered managers and the culture in the service. We will assess all of the key question at the next comprehensive inspection of the service.

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

- The manager had applied to register with the CQC. Staff and families told us the manager had been a positive, stabilizing influence on the home.
- Staff told us they felt the culture within the home had improved. One staff member told us, "So far now we've got such a good team, we're all getting on so much better. It's so much more positive." Staff felt confident to raise concerns.
- Families told us there was regular contact from the home and, though visitation limits had been difficult, understood why these were in place. The service was flexible in how often and in what way families were kept up to date and reassured, including phone calls and sending photographs of people to their loved ones.
- We could see good evidence of involvement of people in planning their care and the service was focussed on outcomes and achievements for people. We saw evidence of the service working closely with people to identify their goals and to work towards them, with good results. For example, one person had positive support to help them reduce incidents of behaviour which may challenge, improving their quality of life.
- The service used a range of communication aids which were tailored to meet people's needs and reflected their interests. Care plan reviews involved people and their relatives to ensure people were empowered to make decisions about their support.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- There was a clear schedule of audits which covered a wide range of quality and safety in the service. There was clear oversight both internally and externally. There was a clear service improvement plan with higher risk actions completed first. There was oversight of progress and sign off of completed actions.
- We reviewed team meeting minutes which covered a wide range of topics and areas of focus for staff, this included improvements identified by the provider from incidents or audits. The service sought feedback from people, relatives, professionals and other stakeholders to guide improvements and quality within the home.
- We looked at oversight of medicines management in the home. There was a robust procedure in place for checking medicines at the start and end of each shift with audits completed in addition to this. Staff had



their competencies in medicines administration checked.

- Relatives' feedback was mostly positive., All relatives we spoke with told us they had confidence in the manager to deal with any issues they had raised. One relative said, "I am really impressed with the way [manager] is dealing with it – ...I'm very happy [manager] has been there almost from when [loved one] started she's been the best one we've had she's fantastic and I'm really impressed with her."