

Anchor Hanover Group

Annesley Lodge Care Home

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

Annesley Lodge is a purpose-built residential care home providing accommodation for up to 51 people who require support with personal care. At the time of this inspection 30 people were living at the home and receiving support from staff.

We found the following examples of good practice.

People and their visitors were protected from catching and spreading COVID-19. During a current COVID-19 outbreak at the home the provider ensured people still had access to an 'essential care giver'. This is a named person who can still visit during a COVID-19 outbreak. This reduced the risk of people experiencing social isolation or loneliness and helped to address any concerns about people's on-going mental health and wellbeing.

The provider adhered to current government guidelines on people's right to have friends and family members visit them. People had three named visitors who could attend the home regularly (when there not an outbreak of COVID-19). All visitors were informed of the requirement to provide a negative Lateral Flow Test (LFT) result and to show evidence that they had received the appropriate vaccinations. Visitors were required to wear Protective Personal Equipment (PPE) in accordance with the provider's COVID-19 policies and procedures.

People were supported to use and access their environment in a safe way. Social distancing was encouraged wherever possible. We observed people sitting in communal areas a suitable distance from each other to reduce the risk of the spread of COVID-19. People were also close enough to maintain adequate social interaction. Rooms were well ventilated.

The home was coming to the end of an outbreak of COVID-19. One person had COVID-19 at the time of this inspection. Safe isolation procedures were in place to protect others from the risk of infection. Staff had also taken the time to explain to the person why they needed to isolate and what would happen over the coming days. Named staff provided personal care for this person. A separate PPE station was placed outside this person's bedroom for staff to use. Appropriate procedures were also in place to dispose of used PPE safely.

The home was not accepting new admissions. This decision was taken due to the outbreak of COVID-19, but also prior to the outbreak to deal with staff sickness and staffing shortages. People currently living at the home were prioritised over new admissions. Once the outbreak has concluded, the home has been deep-cleaned and it is deemed safe to do so, new people may be admitted.

When people were admitted to the premises, procedures were in place to ensure this was done so safely. Proof of a negative LFT were required whether the person was arriving from hospital or their own home. People were supported to isolate upon arrival until further confirmation of a negative test was received. It was acknowledged isolation for people living with dementia was problematic. For those people, specific

staff were assigned to support them and were ready to identify any potential risks. Wherever possible, staff refrained from mixing on other floors of the service, reducing the risk of the spread of infection.

There were ample supplies of PPE at the home. Staff had received training on how to 'Don and Doff' (put on and take off) their PPE to reduce the risk of cross-contamination. Staff explained to people why PPE was needed, and people accepted this.

A robust testing regime was in place. All staff and people living at the home were tested regularly and in accordance with government guidance. Staff test results were recorded. A new central database was due to be implemented. This will enable the provider to check the vaccination status of staff, if any had not received a booster for example, this would be identified quickly. All staff were fully vaccinated. Most people living at the home had been fully vaccinated and received a booster. All had received at least two vaccinations.

The layout of the premises ensured the risk of the spread of COVID-19 was reduced. Regular cleaning of all touch points and other key areas was carried out throughout the day. PPE was readily available, and we observed staff wearing PPE as required.

There were enough staff to support people safely and to cover any staff holidays, sickness and COVID-19 isolation. There had been some pressures on staff numbers. When needed in urgent situations, managerial and administrative staff, (all who were trained to administer care), provided assistance. This ensured any staff shortages did not have a direct impact on people's health and safety. The provider was proud of how their staff had worked over the past three months, and, whilst there had been an outbreak of COVID-19 at the home, care was still provided, and people had not suffered any other adverse health conditions.

Where needed, regular agency staff provided cover for shifts. A negative LFT result and vaccine passport was required prior to agency staff commencing their role.

The provider had assessed the impact of potential 'winter pressures' and acted accordingly. Regular COVID-19, outbreak and other related audits were carried out to help identify any areas of concern. Action plans were in place and reviewed. Staff wellbeing was paramount, and the provider had implemented a number of initiatives to support staff.

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

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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 the COVID-19 pandemic we are looking at how services manage infection control and visiting arrangements. This was a targeted inspection looking at the infection prevention and control measures the provider had in place. We also asked the provider about any staffing pressures the service was experiencing and whether this was having an impact on the service.

This inspection took place on 20 January 2022 and was announced. We gave the provider 24 hours' notice of the inspection

Is the service safe?

Our findings

Staffing

- The provider told us they had measures in place to mitigate the risks associated with COVID-19 related staff pressures

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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

From 11 November 2021 registered persons must make sure all care home workers and other professionals visiting the service are fully vaccinated against COVID-19, unless they have an exemption or there is an emergency.

- The service was meeting the requirement to ensure non-exempt staff and visiting professionals were vaccinated against COVID-19.