

## Chitimali Locum Medical Limited Whitworth Lodge

### **Inspection report**

52 Whitworth Road London SE25 6XJ

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### Ratings

### Overall rating for this service

Requires Improvement

Is the service safe?	Requires Improvement 🛛 🗕
Is the service effective?	Insufficient evidence to rate
Is the service well-led?	Insufficient evidence to rate

## Summary of findings

### **Overall summary**

Whitworth Lodge is a care home for up to six people with learning disabilities, some of whom had additional needs such as autism. There were six people living at the service at the time of our inspection.

### We found the following examples of good practice

The service encouraged visitors to reduce the risk of isolation for people. The registered manager was booking visits to space them out and avoid potential infection transmission with other visitors. Visitors were also provided with a mask and hand sanitiser. All staff had been trained in infection prevention and control in relation to COVID-19 infections. The provider tested all staff and residents for COVID-19 infections in accordance with government guidance and all staff had been vaccinated against this infection. Staff received the support they needed to meet people's needs through training and regular supervision. The provider had resolved previous health and safety concerns such as a damp wall and uneven flooring. This meant the premises were safe for the people who lived there.

### We found the following examples of practice which could be improved

We found the service required improvement in relation to infection prevention and control. The registered manager had not established a suitable system to check visitors were safe to enter the care home and any checks were not always recorded, in line with government guidance. The registered manager told us they would improve immediately. Staff did not always use personal protective equipment (PPE) safely and the registered manager told us they would monitor this more carefully ongoing. The provider's infection prevention and control policy required updating to ensure it was in line with government guidance. The registered manager told us they would update it as soon as possible. The provider had not assessed infection risks to people and staff at higher risk of COVID-19 due to having learning disabilities. The registered manager told us they would carry out these assessments as soon as possible. The registered manager told us they would carry out these assessments as soon as possible. The registered manager told us they would carry out these assessments as soon as possible. The registered manager's knowledge of infection prevention and control required improvement as did their oversight of the service as they did not carry out infection control audits which would have identified the concerns we found. We found a breach in relation to regulation 12, safe care and treatment. You can see the action we told the provider to take at the back of the full length version of this report.

The provider carried out the expected recruitment checks on staff to be sure they were safe to work with vulnerable people. However, the provider did not always get a full employment history for staff as required. The registered manager told us they would improve going forwards.

### Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to discharge our regulatory enforcement functions required to keep people safe and to hold providers to account where it is necessary for us to do so.

The service has been rated requires improvement and we have identified a breach in relation to people's safety. You see the action we told the provider to take at the back of the full length report.

### Follow up

We will request an action plan for the provider to understand what they will do to improve the standards of safe care. We will work alongside the provider and local authority to monitor progress. We will 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?	Requires Improvement 😑
The service was not always safe.	
Details are in our safe findings below.	
Is the service effective?	Insufficient evidence to rate
There was insufficient evidence to rate the service.	
Details are in our effective findings below.	
Is the service well-led?	Insufficient evidence to rate
There was insufficient evidence to rate the service.	
Details are in our well-led findings below.	



# Whitworth Lodge 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.

We received information of concern about infection prevention and control measures, health and safety, staff recruitment and management of the service. This was a targeted inspection looking at the infection prevention and control measures the provider has in place and these other concerns. 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 26 January 2022 and was unannounced.

### 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 not assured that the provider was preventing visitors from catching and spreading infections. This was because the provider did not follow government guidance in relation to checks they carried out on visitors. We have also signposted the provider to resources to develop their approach.

• 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 somewhat assured that the provider was using PPE effectively and safely. We observed a care worker was not wearing a face mask. When we raised our concerns we were told they had forgotten and they put a mask on. However, it was concerning that a care worker would forget to wear a mask and the registered manager told us they would monitor staff closely. We have also signposted the provider to resources to develop their approach.

• 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 not assured that the provider's infection prevention and control policy was up to date as it was not always in line with government guidance. The provider had not assessed infection risks to people and staff at higher risk of COVID-19 due to having learning disabilities or being from black and minority ethnic groups. We have also signposted the provider to resources to develop their approach.

These infection control related risks to people meant provider was breach of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Visiting in care homes

The visiting arrangements at this service were in line with government guidance.

From 11 November 2021 registered persons must make sure all care home workers and other professionals

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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.

### Staffing and recruitment

• The provider carried out recruitment checks including those relating to criminal records, references, fitness to work and identification. However, for the one staff member recruited since our last inspection the provider had not ensured a full employment history which was an oversight. The registered manager told us they would improve this going forwards.

Assessing risk, safety monitoring and management; learning lessons when things go wrong

• The provider had carried out renovation work which meant previous health and safety concerns, including a damp wall and uneven flooring, had been resolved. We viewed the most recent local authority inspection report which also confirmed the concerns had been resolved.

## Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection there was insufficient evidence to rate the service.

Staff support: induction, training, skills and experience

- Staff received the support they needed to meet people's needs. This included support with regular training in key topics such as infection prevention and control and health and safety.
- Staff received regular supervision from their line manager to support them in meeting people's needs.

## 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. At this inspection there was insufficient evidence to rate the service.

Continuous learning and improving care; Managers and staff being clear about their roles, understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The provider's systems to monitor the service required improvement as there was no infection control monitoring audit nor adequate recruitment audit carried out by the provider. This lack of oversight meant the registered manager had not identified or resolved the concerns we identified.
- The registered manager was experienced in managing care services and had a suitable care management qualification. However, their knowledge of best practice in relation to infection prevention and control required improvement. The registered manager told us they would ensure they improved through further training and reading guidance.

## 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 registered person did not always ensure they provided care safely to people through assessing the risk of, and preventing, detecting and controlling the spread of, infections, including those that are health care associated. Regulation 12 (1)(2)(h)