

# Queen Elizabeth's Foundation Queen Elizabeth's Foundation Dorincourt

## 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

Queen Elizabeth Foundation Dorincourt is a residential care home providing accommodation and personal care for up to 43 people living with physical support and health needs, some of whom also have a learning disability. There were 37 people living at the service at the time of the inspection.

We found the following examples of good practice.

- Current government guidelines in relation to COVID-19 were being followed by staff and visitors to reduce the risk of infection to people living at the home. This included comprehensive checks for visitors on arrival.
- Staff had received regular training about infection prevention and control including specific training about personal protective equipment (PPE) and how to use it correctly. The frequency of infection prevention and control training had increased in response to the COVID-19 pandemic.
- People who had to isolate in their rooms received frequent support from staff to engage with activities of their choice and equipment had been purchased to help with this.
- Rotas and the deployment of staff had been adapted to ensure that wherever possible staff did not work across different units within the service to reduce the risk of infection being spread.

## 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**

# Queen Elizabeth's Foundation Dorincourt

## **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 8 February 2022 and was announced. We gave the service 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 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.
  
- Visits for people living at the home were facilitated in line 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 Government has announced its intention to change the legal requirement for vaccination in care homes, but the service was meeting the current requirement to ensure non-exempt staff and visiting professionals were vaccinated against COVID-19.

We were somewhat assured that the provider was promoting safety through the layout and hygiene practices of the premises. The service appeared to be clean however there was no recording of the cleaning that was taking place which meant the management team did not have effective oversight of this. We discussed this with the manager who ensured that a suitable cleaning schedule was put in place immediately following the inspection.

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