

Crosscrown Limited

Summerhill Residential Home

Inspection report

46 Glenwood Road
West Moors
Ferndown
Dorset
BH22 0ER

Date of inspection visit:
16 February 2021

Date of publication:
08 March 2021

Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Inspected but not rated

Summary of findings

Overall summary

Summerhill Residential Home is registered to accommodate a maximum of 15 people who require personal care. The home does not provide nursing care, during this inspection there were 13 people living at Summerhill Residential Home, some of whom were living with dementia.

We found the following examples of good practice.

At the time of our visit the home had never had a resident that had contracted Covid-19 and 100% of residents had received their first vaccine for Covid-19.

The home was clutter free and visibly clean. Cleaning schedules were in place for day to day cleaning.

All visitors' temperatures were screened prior to visitors entering the premises and an IPC checklist was completed for all visitors. All visitors including contractors were required to complete a Covid-19 lateral flow test and wait 30 minutes prior to entering the premises. Staff always answered the door to visitors and prompted them to follow IPC procedures. Visitors and contractors were emailed visitor guidelines prior to pre-booked visits.

The home was having closed windows visits at the time of inspection. Staff had spoken with families about the visiting arrangements and all families were happy with them. In addition, residents could use the home's tablet computers to have virtual visits with families by appointment. If a resident was receiving end of life care (EOLC) they would be facilitated with visits in their rooms.

Handovers during shift took place in the lounge or dining room. Staff took breaks at different times and socially distanced during breaks in the home's garden or dining room. There were posters at the nursing station and around the home to remind staff of social distancing. There could not be more than one staff member at the station at a time.

Residents were supported with a range of socially distanced activities to promote their wellbeing. Staff told us they had not had any issues with residents' mental health in response to the pandemic and residents had managed social distancing and IPC control measures well.

With the exception of one resident with safeguards in place, the home did not have any residents that had asked to go out or leave the home during lockdown. Staff told us residents were supported to use the garden to access outside space.

Staff always wore face masks and personal protective equipment (PPE) when providing personal care. PPE was donned in residents' rooms and doffed in the room. PPE was disposed of immediately in clinical waste bins. Staff told us this was to minimize the risk of cross-contamination.

All new residents or residents returning from hospital must have had a Covid-19 test prior to entry from hospital or if they were a new resident they would be tested on arrival at the home. All new residents or residents returning from hospital were isolated for 14 days in their own room.

PPE used in the home was CE marked in accordance with current regulations. Posters around the home explained to residents why staff wore PPE. Staff told us the home did not have any residents with anxiety in regards to staff wearing PPE.

The CCG had trained all staff to recognise signs of deteriorating physical health and to identify when people were at risk of deterioration. As part of this training 20 staff were trained on the use of pulse oximeters. All staff had up to date IPC mandatory training. All staff completed online Covid-19 training via e-learning.

Staff underwent polymerase chain reaction (PCR) Covid-19 testing weekly, this was supplemented by twice weekly lateral flow testing. Residents had whole home PCR testing every 28 days.

The home had never had a resident test positive for Covid-19. Staff told us if a resident tested positive, they would immediately isolate the resident, the same policy applied for residents with symptoms. The manager said the home had never had a staff member refuse a test and staff would not be allowed to work if they refused a test. If a resident declined a test staff would closely monitor them for symptoms.

The home had an IPC policy which was in date. The providers operations team had audited IPC policies and created new policies in response to the pandemic.

The home did monthly IPC audits. The audits included extra measures the home had put in place due to Covid-19. The most recent IPC audit was on 28 January 2021. The audit was a checklist which identified actions staff had taken in response to the audit questions. All audit questions had answers recorded.

All staff had Covid-19 risk assessments in place. The risk assessments included measures the provider had taken to risk assess staff that may be disproportionately affected by the virus.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

We were assured the service were following safe infection prevention and control procedures to keep people safe.

Inspected but not rated

Summerhill Residential Home

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 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 16 February 2021 and was announced.

Is the service safe?

Our findings

S5□ 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.