

Pathway Healthcare Ltd

# Cabot House

## 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

### About the service

Cabot House is a care home providing accommodation and personal care for up to nine people living with a learning disability, including autism. At the time of inspection the service was supporting nine people.

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

People understood why staff had to wear protective clothing because of the risk of infection from coronavirus. One person told us that they had their own mask they wore if they went out.

Relatives confirmed their family members were cared for by a staff team who knew them well and one relative felt that a particular member of staff, "Goes above and beyond and aside from being a professional is so genuinely caring". Relatives felt the service was doing its best to manage in such difficult times.

As part of this inspection we also spoke with staff on the day and following the visit. Staff had received training in Infection Prevention and Control (IPC), however, personal protective equipment (PPE) was not always used safely. Staff demonstrated an understanding of the importance of being consistent in the management of infection and told us that they were wearing full PPE including face shields.

There was a risk of cross contamination through the use of the laundry area for multiple tasks. IPC practices were not always robust to ensure people's safety or to prevent the risk of infection. This was communicated at inspection and the manager took appropriate action to address the concerns.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the guidance CQC follows to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. Our evidence is included in this report.

### Right support:

- Model of care and setting maximises people's choice, control and independence

### Right care:

- Care is person-centred and promotes people's dignity, privacy and human rights.

### Right culture:

- Ethos, values attitudes and behaviours of leaders and care staff ensure people using services lead confident, inclusive and empowered lives.

### Why we inspected

As part of CQC's response to care homes with outbreaks of coronavirus, we are conducting reviews to ensure

that the Infection Prevention and Control practice was safe and the service was compliant with IPC measures. This was a targeted inspection looking at the IPC practices the provider has in place.

This inspection took place on 3 November and was unannounced.

CQC have introduced targeted inspections 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 have found evidence that the provider needs to make some improvements. Please see the Safe sections of this full report. You can see what action we have asked the provider to take at the end of this full report

### 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.

We have identified breaches in relation to Infection Prevention Control. Please see the action we have told the provider to take at the end of this report. Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

The last rating for this service was Good (published 12 June 2019).

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Cabot House on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### 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**

# Cabot House

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 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 care homes with outbreaks of coronavirus, we are conducting reviews to ensure that the Infection Prevention and Control practice was safe and the service was compliant with IPC measures. This was a targeted inspection looking at the IPC practices the provider has in place.

This inspection took place on 3 November 2020 and was unannounced. The inspection was carried out by two inspectors.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

The inspection was unannounced.

#### What we did before the inspection

We reviewed the information we held about the service and the service provider. We looked at the notifications we had received for this service. Notifications are information about important events the service is required to send us by law.

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 two people who used the service and two care staff. We observed staff interactions with people and observed their IPC practice whilst ensuring we were working within social distancing guidelines.

We completed a walkthrough with staff to observe IPC practices. We reviewed documentation off site to minimise contamination risk.

After the inspection

We received feedback from three relatives and spoke with four staff members. We looked at a range of records relating to infection prevention and control policies that included COVID-19 procedures. We reviewed three peoples COVID- 19 risk assessments, care staff training records and records in relation to infection prevention and control.

# 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.

The purpose of this inspection was to investigate a specific concern we had received about infection prevention and control. We will assess all of the key question at the next comprehensive inspection of the service

### Preventing and controlling infection

- We were partially assured that the provider was promoting safety because of their hygiene practices and due to the layout of the premises. The laundry room was used for a variety of purposes including personal protective equipment (PPE) storage, staff lockers, storage of residents' toiletries alongside the processing of infected and soiled laundry. These practices posed a risk of cross infection.
- We were partially assured that the provider was using PPE effectively and safely. On the day of inspection, we observed some staff not always wearing masks correctly, to cover both nose and mouth whilst working in close proximity with people. This increased the risk to people and staff of further infection. We informed the staff in charge on the day of inspection who addressed this with the staff concerned.

Infection prevention and control practices were not robust to ensure people's safety or to protect people and staff from the risk of infection. Staff did not always use personal protective equipment safely. This is a breach of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- In response to feedback from the inspection, the provider told us that they had made improvements in the laundry. Staff also told us the provider had made alternative arrangements for them to change their clothes and don PPE. The registered manager told us of their plan to improve this further which would result in adaptations to parts of the home.
- The location had comprehensive cleaning routines and the home was clean and tidy. Cleaning schedules were detailed, completed by staff and included regular cleaning of high touch areas. Staff told us they were concerned about infection in the home and had suggested the provider considered commissioning a specialist to carry out a deep clean.
- In response to the inspection, the manager told us that they had made arrangements for a deep clean company to visit the home and had arranged for a "fogging machine" for the home. Fogging machines sanitise through micro-droplets of disinfectant that remain on surfaces for an extended period of time.
- People understood why staff needed to wear PPE and told us that they wore a mask when they went out. Staff told us that they understood the importance of using PPE effectively and that they had received training in COVID-19 and donning and doffing of PPE. We were informed that the location had enough PPE and could access further supplies if they were needed.
- Following improvements made after inspection we were assured that the provider was making sure

infection outbreaks could be effectively prevented or managed. The registered manager had followed outbreak reporting procedures and kept relatives and stakeholders informed and updated. People had support and risk plans that detailed any symptoms to be monitored and how staff should support the person to manage potential infection and self-isolate. For example, records for one person stated that the person should be praised and encouraged by staff to help them understand why they might need to self-isolate.

- We were assured that the provider was preventing visitors from catching and spreading infections. The location had effective checks in place ensuring essential visitors completed appropriate checks and were wearing PPE in line with the provider's policy. Visiting by relatives was not available at the time of the inspection, as the service was managing an infection outbreak. The service had made alternative arrangements for relatives to remain in contact with people. One relative told us, "I think they have coped with a difficult situation in a very considerate way". Another relative said staff had remained in regular contact by telephone and through social media.
- We were assured that the provider was meeting shielding and social distancing rules. We were aware of particular challenges this presented for people and observed activities taking place in the home. We were informed that people had not accessed the community for activities that involved breaching social distancing guidance, and this was confirmed by staff and the reviewing of records.
- We were assured that the provider was admitting people safely to the service. Staff explained the processes they followed when a person returned to the home following a visit to a relative. This ensured that staff were aware of the need to support people to socially isolate to minimise potential infection.
- We were assured that the provider was accessing testing for people using the service and staff. Risk assessments had been completed in a person-centred way that ensured the views of people were considered as part of the testing process. The registered manager and staff told us they accessed testing in line with current guidance.
- We were assured that the provider's infection prevention and control policy was up to date.

This section is primarily information for the provider

## 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  Regulation 12 (2) (h) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Safe Care and Treatment The registered person had not ensured the proper and safe use of personal protective equipment