

Eastbourne Grange Limited

Eastbourne Grange

Inspection report

2 Grange Gardens
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Eastbourne
East Sussex
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Tel: 01323733466

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25 January 2021

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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

Eastbourne Grange is a residential care home providing personal care for older people some of whom were living with dementia. The service can accommodate up to 20 people and at the time of the inspection there were 16 people living at the home.

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

The registered manager was new to the service and had identified that improvements were needed regarding the management of accidents and incidents. A new system for recording these issues had been introduced which identified risks and trends. Staff training in moving and handling had been refreshed and staff were confident in procedures and what actions to take in the event of, for example, a person falling. Risk assessments were in place to cover all risks and were audited monthly, or more frequently in the event of an accident. People told us they felt safe, one said, "Oh yes, I am very safe here."

Infection prevention and control was well managed with the appropriate use of personal protective equipment (PPE) and compliance with the latest government guidelines.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 18 March 2020)

Why we inspected

We undertook this targeted inspection to follow up on specific concerns which we had received about the service. The concerns were about the management and recording of accidents and incidents for example, falls management and moving and handling. Further concerns had been raised relating to PPE not always being used by staff. We inspected using our targeted methodology developed during the COVID-19 pandemic to examine those specific risks and to ensure people were safe.

We looked at infection prevention and control measures under the safe question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

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.

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

Eastbourne Grange

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. This was a targeted inspection due to concerns we had about people's safety. These concerns included whether staff were following correct manual handling procedures and that effective infection prevention and control measures were in place.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Eastbourne Grange is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided and both were looked at during this inspection.

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

We gave a short period of notice of the inspection. This was because of the COVID-19 pandemic. We wanted to be sure that appropriate infection prevention and control measures were in place before visiting the service.

What we did before the inspection

Before the inspection we reviewed the information we held about the service and the service provider. We sought feedback from the local authority and healthcare professionals that were involved with the service. We looked at the notifications we had received from the service. Notifications are information about

important events the service is required to send us by law. We used all of this information to plan our inspection.

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.

Due to the COVID-19 pandemic we needed to limit the time we spent at the home. This to reduce the risk of transmitting any infection. Therefore, we called the registered manager immediately before entering the service and discussed how we would safely manage the inspection. We also wanted to clarify the providers infection control procedures to make sure we worked in line with their guidance.

During the inspection

We spoke to two residents who used the service. We spoke with three members of staff including the registered manager, a senior and a carer. We spent as short a time as possible at the service to safely look at different areas of the home and to meet people and staff whilst observing social distancing guidelines. It also gave us an opportunity to observe staff interactions with people.

We reviewed a range of records including accident and incident reports and two care plans.

After the inspection

To minimise the time in the service, we asked the registered manager to send some records for us to review remotely. These included policies and procedures relating to infection prevention and control and the training matrix for staff. We continued to seek clarification from the provider to validate evidence found.

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 check on specific concerns we had about people's safety and care needs were being met. We will assess all of the key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management

- We looked at accident and incident records. A new system had been put in place which involved all records being kept in a single folder. This made it clear to identify people who had more than one fall and showed any patterns or themes that developed. Previous records were kept in people's care plans which made auditing of accident and incidents took much longer.
- The reports themselves clearly showed details of what had happened, the immediate actions taken by staff and included body maps where people had sustained injuries. A further section gave details of the investigation into the incident and mitigation put in place to prevent recurrence. For example, records relating to falls showed follow up analysis which looked at sensory impairments, medicines the person was taking, footwear worn at the time as well as location. Risk assessments were then updated with clear instructions for staff.
- Staff told us that there had been very little training during the past year however since the new manager had arrived training in important areas had been completed or scheduled for the next few weeks. A member of staff said, "Manual handling training has now been done, we had done a bit online before." People told us they felt safe when staff helped them with moving. We looked at training records which confirmed that all staff had completed moving and handling training in the past month.
- Staff had a good understanding of risk and were able to tell us what action they would take in the event of an accident or incident. Staff told us the registered manager was supportive, often on the floor working alongside staff and always held debriefing sessions after incidents to consider lessons learned. We saw enough staff on duty during our visit to be able to support people without being rushed.
- The registered manager told us that a new electronic system for recording care plans was being introduced the following month. Current care plans did contain a lot of detail but were large and difficult to navigate.

Preventing and controlling 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.