

## Care UK Community Partnerships Ltd Cumberland

#### **Inspection report**

The Cumberland 67 Whitford Gardens Mitcham Surrey CR4 4AA Date of inspection visit: 26 January 2022

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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**

Cumberland is a residential care home providing personal and nursing care for up to 56 people. At the time of our inspection there were 42 people living in the home.

We found the following examples of good practice:

The provider was following best practice guidance to prevent visitors to the home spreading the Covid-19 infection. All visitors were screened for symptoms of acute respiratory infection before being allowed to enter the home. There was a toilet next to the reception area where visitors were able to don and doff personal protective equipment (PPE). The home had a stock of PPE for visitors to use in the reception area and there were designated bins for PPE after use. The provider requested that visitors book visiting appointments. There were four slots available per day, two in the morning and two in the afternoon. Essential care givers were able to visit in the room of their friend or family member. Other visitors were able to visit residents in the visiting pod which had been set up in the grounds of the premises. Visitors were supported to wear the appropriate PPE when visiting. Visitors were required to undertake a lateral flow test, either on the premises or at home and provide the home with a negative result. There were multiple signs on the premises about infection prevention and control (IPC) and PPE.

The provider understood and was meeting Covid-19 vaccination requirements. The provider supported alternative forms of maintaining social contact for friends and relatives; for example, keeping in touch using video calls, window visits, visits in the communal garden and using a telephone to communicate. During a recent outbreak, the provider had minimised visiting. It had held a meeting with the families of residents who had tested positive for Covid-19 and explained the reasons for this. The provider had a process for the monitoring of residents for Covid-19 symptoms and lateral flow testing was completed if they had an outside visit or a hospital appointment. The provider had completed risk assessments for residents, which it had reviewed, where it considered the risks of Covid-19 and how risks could be mitigated.

The provider had a process in place for the isolation of residents in the case of positive Covid-19 cases and if staff tested positive for Covid-19. The home had a recent outbreak of Covid-19 and had completed a specific outbreak management plan to manage this outbreak. This reviewed the clinical action taken, staff allocation, laundry and housekeeping management, catering management and wellbeing. During the outbreak, the provider had increased the testing for both staff and residents.

The provider had no admissions during the Covid-19 pandemic, however, it had a process for admissions and there were clear procedures to be followed for people admitted to the home.

The manager had oversight of IPC and IPC lead, who both helped train staff internally. Audits were undertaken to ensure compliance with IPC responsibilities and there were also hand washing audits and spot checks of cleaning completed. Staff had completed IPC training and refresher training. Use of PPE at the home was in accordance with current government guidance.

The provide had supported staff wellbeing during the Covid-19 pandemic, and in particular during the recent outbreak. The provider had a staff member who ensured that residents were engaged and had activities available.

The provider ensured that the home was well ventilated, with windows and doors opened where appropriate to facilitate ventilation. The home had a separate laundry and good practice for linen and laundry guidance was followed.

Further information is in the detailed findings below.

#### 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** 



# Cumberland

**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 26 January 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 in that the provider had not admitted anyone to the service during Covid-19 but had a process should this be required.
- 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.

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