

Rockmount Northwest Limited

Rockmount Northwest

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

Rockmount Northwest is a residential care home for people with a mental health diagnosis. The service provides recovery and rehabilitation support for up to 20 adults with complex mental health needs, who may also have a learning disability.

We identified prior to the inspection that no people living in the service had tested positive for COVID-19 in the last 5 days.

People were supported to understand and comply with visiting and social restrictions in line with all best practice guidance and this is communicated and updated as needed.

The provider follows relevant COVID-19 testing guidance. This includes staff testing requirements as well guidance on testing for people using the service and visitors.

The service was mindful of people's rights under the Mental Capacity Act (MCA) 2005 to make unwise or risky decisions. This included managing the risks for unvaccinated people living in the service and encouraging all people to meet social distancing and wearing masks.

Maintaining the mental health of people and staff was a priority with proactive support from the service to encourage peoples well being.

Where the provider is responsible for cleaning, there are clear schedules in place, which include the frequency of cleaning of high touch areas. Records show compliance with the cleaning schedule.

Staff are trained and know how to immediately instigate full infection control measures to care for a person who develops symptoms, who tests positive or who has been exposed to the virus to avoid the virus spreading to other people and staff.

Staff wear PPE in line with guidance where appropriate social distancing cannot be maintained or achieved.

Routine testing for all staff and people who receive support has been implemented.

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 that this service met good infection prevention and control guidelines as a designated care setting

Inspected but not rated

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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 care homes with outbreaks of COVID-19, we are conducting reviews to ensure that the Infection Prevention and Control (IPC) practice is safe and that services are compliant with IPC measures. This was a targeted inspection looking at the IPC practices the provider has 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 20 January 2022 and was announced. We gave the service 48 hours of 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. The service has not needed to use any agency minimal staff have had to take time of due to COVID-19 and the staff in place have worked some extra hours to assist. Staff are paid whilst having to isolate in order to support them appropriately.

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. All visitors must present a COVID pass and a confirmation of a negative test undertaken within 24 hrs on entry to the building. This is checked by staff and recorded on a survey when visitors sign in. Essential carers were also supported to be appropriately trusted and visit their relatives.
- We were assured that the provider was meeting shielding and social distancing rules. The provider had done all that they could rearranged communal areas to provide social distancing. Staff and people living in the service were aware of the need to maintain social distancing. The service has made it a priority to maintain mental health providing encouragement and alternative social events such as take away nights as a thank you for the assistance they have received from the people living in the service.
- We were assured that the provider was admitting people safely to the service. There service had an admittance procedure, this included ensuring that a recent negative result for coronavirus had been recorded before admittance. At the time of the inspection there were no service users with a positive result. There had been people living in the service who had tested positive to maintain safety the provider had had made the decision to close to any further admittances. The service was awaiting confirmation that they could reopen to admissions.
- We were assured that the provider was using PPE effectively and safely. There was enough PPE available for staff and visitors. Throughout the service there was PPE readily available for staff to replace as needed. However, the service needed to make sure that they increased the usage of eye protection when supporting people with a positive COVID-19 result and implementing bare below the elbow as best practice.
- We were assured that the provider was accessing testing for people using the service and staff. Testing was in place for all staff when they commenced their shift. Testing practice was normally lateral flow test (LFT) three a week and a polymerase chain reaction (PCR) weekly. People living in the service who accessed the community were also tested. Staff gave additional support when people went out to encourage social distancing, mask wearing and good hand hygiene. The staff had taken the time to provide information to ensure that people living in the service understood the reasons why restrictions were implemented.

- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises. There were cleaning schedules in place that were monitored by the service in order to make sure that cleaning was appropriate.
- We were assured that the provider was making sure infection outbreaks were effectively prevented or managed. The registered manager sought guidance appropriately and followed external infection control advice when received.
- We were assured that the provider's infection prevention and control policy was being updated. The policy was available for all staff and regular updates were made available to make sure staff were aware of best practice. The manager intended to update the policy to include eye protection and bare below the elbow guidance for staff.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance. All visitors were checked on entry that they were up to date with vaccinations and had tested negatively within last 24 hours. Logs were kept of any testing and monitored to make sure that the service would be able to plan and mitigate any risks. Where people were leaving the service risk management plans were in place and the staff supported people going into the community as much as possible.

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 service was meeting the requirement to ensure non-exempt staff and visiting professionals were vaccinated against COVID-19. Checks were in place and logs of staff vaccination status including boosters were recorded and monitored. Where staff had not yet received a booster vaccination the service encouraged them to undertake the latest vaccination. Risk assessments were in place for people living in the service that did not want to receive an immunisation and advice, education and support was readily available.

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