

Care For Your Life Ltd

# Grosvenor Hall Care Home

## Inspection report

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## Ratings

Overall rating for this service

Requires Improvement



Is the service safe?

Requires Improvement



## Overall summary

We carried out an unannounced comprehensive inspection of this service on 14 January 2015. A breach of legal requirements was found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach.

At the last inspection on 14 January 2015 we found that the provider was not meeting the standards of care we expect in relation to maintaining appropriate standards of cleanliness and hygiene. We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. At our inspection on the 1 July 2015 we found the provider had made improvements in the areas we had identified.

This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Grosvenor Hall on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Grosvenor Hall provides care for older people who have mental and physical health needs including people living

with dementia. It provides accommodation for up to 40 people who require personal and nursing care. At the time of our inspection there were 35 people living at the home.

At the time of our inspection there was not a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Systems and processes had been put in place to ensure that infection control risks were managed. Cleaning schedules were in place and audits had been carried out on a regular basis and action plans were in place. A system for ensuring equipment was cleaned on a regular basis was in place?, however the record for this had not been updated.

# Summary of findings

Staff had received training on infection control and knew about policies and procedures. However staff were unaware of whom the lead for infection control was at the home. Protective clothing was readily available and staff wore this appropriately when providing personal care.

Refurbishment had taken place to address concerns raised at our previous inspection and an ongoing programme was in place.

Hand hygiene facilities were available throughout the home and in working order.

# Summary of findings

## 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 found that action had been taken to improve the safety of the service.

Processes were in place to ensure that cleaning had taken place.

Staff had received training about infection control.

Equipment was cleaned on a regular basis however the records had not been consistently completed to reflect this,

This meant that the provider was now meeting legal requirements.

We could not improve the rating for safe from 'requires improvement' because to do so requires consistent good practice over time. We will check this during our next planned Comprehensive inspection

**Requires Improvement**



### Is the service responsive?

# Grosvenor Hall Care Home

## Detailed findings

### Background to this inspection

We undertook an unannounced focussed inspection of Grosvenor Hall on 1 July 2015. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 14 January 2015 had been made. We inspected the service against one of the five questions we ask about services: is the service safe. This is because the service was not meeting some legal requirements in relation to those sections.

The inspection team consisted of an inspector.

During our inspection we observed care and spoke with the nurse in charge, two care staff, and a member of ancillary staff. We also looked at records of audits and cleaning regimes. Following our inspection we spoke with the manager and asked for additional information about training and audits.

# Is the service safe?

## Our findings

At our previous inspection in January 2015 we identified that people were not adequately protected against the risks associated with the risk of infection. This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

After our inspection the provider wrote to us to say what they would do to meet the legal requirements. At this inspection we found the provider had made the required improvements.

At this inspection we found that the provider had followed the action plan they had written to meet shortfalls in relation to the requirements of Regulation 12.

One person we spoke with said that they thought the home was clean. We observed visitors using the hand hygiene facilities on entering and exiting the building to prevent the flow of any infections.

When we spoke with staff they were able to tell us about the processes which were in place to ensure that the risk of cross infection were reduced. Staff told us that they had received training regarding infection control and felt that they had the skills to prevent cross infection. When we asked staff they were unable to tell us who the lead for infection control was, (providers are expected to have leads for infection control according to national infection control guidance). The nurse in charge told us that they had had an infection control lead but that they had left and they weren't sure who was the lead currently.

Staff told us that they thought there were sufficient cleaning staff available to maintain a good standard of cleanliness in the home. Cleaning procedures and monitoring had been reviewed. We saw that cleaning schedules included areas that required cleaning on a daily basis but also included detail about any additional tasks

that had been carried out, for example cleaning skirting boards of dust. Arrangements were in place for regular cleaning and monitoring of bedrooms and we saw that these were being carried out. Care and domestic staff were able to describe the correct method for cleaning bodily fluids and keep people safe from infection.

Arrangements had been put in place to ensure that equipment such as walking frames and hoists had been cleaned on a regular basis. We looked at the record and saw that a system for cleaning had commenced in 27 February 2015 and had been carried out on a weekly basis, however the record had not been completed after 9 June 2015. We looked at the equipment and found it to be clean and had been labelled to indicate when it had been cleaned. Staff told us that they carried out the cleaning of equipment on a regular basis.

We saw that there were sufficient facilities for hand hygiene. For example hand gel and soap dispensers were available throughout the home and were filled. Hand gel is important for staff to use in order to reduce the risk of cross infection. Staff wore protective clothing to carry out personal care tasks and when serving meals. We observed that staff removed gloves and aprons appropriately. Arrangements were in place to protect people against the risk of infection.

Flooring had been placed in some areas such as the downstairs shower room, so that they could be cleaned more easily. However one bathroom had a chair which was covered in a cloth material which meant it could not be easily wiped to prevent the risk of cross infection.

The registered provider had policies and procedures in place to support staff to maintain standards of cleanliness and prevent cross infection. We saw that audit processes were in place and an infection control audit had been carried out in June 2015.