

Mere Lodge Healthcare Limited

Mere Lodge

Inspection report

93 Mere Road Leicester Leicestershire LE5 5GQ

Tel: 01162517441

Date of inspection visit: 07 April 2021

Date of publication: 30 April 2021

Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated

Summary of findings

Overall summary

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 a specific concern we had about infection control. We will assess all of the key question at the next comprehensive inspection of the service.

This is the second Infection Control inspection and was planned to follow up the refurbishment of the property.

- Some areas of the service were still not well maintained. The flooring in the lounges and corridors have been replaced and some areas of the home have been decorated. However, the flooring in the laundry has not been changed and will not allow proper disinfection.
- There were still areas of unpainted wood on doors which could also allow the transfer of infection. Mops are stored outside the back door of the home and are open to the weather and other potential contaminants. There was no defined plan of mop head changing or disinfection programme that would reduce the potential of cross contamination. These areas compromised infection control measures and the effectiveness of cleaning and disinfection, which meant there was a higher risk of infection spread between people and staff.

The provider failed to adequately protect people and reduce the potential of cross infection or cross contamination. This was a breach of regulation 12 (2h) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- The provider had obtained a continuing supply of personal protective equipment (PPE). This included face masks, gloves, aprons and hand sanitiser and we saw staff used these appropriately. Staff told us they were encouraged to change their PPE regularly.
- Used PPE was disposed of appropriately in foot operated pedal bins placed throughout the home. This reduced the potential for transfer of infection.
- Staff encouraged people to wash their hands frequently throughout the day. Where this was not possible, hand sanitiser was offered to reduce the potential for transfer of infection.
- The provider participated in regular COVID-19 testing of people living in the service and staff. This ensured action could be taken swiftly to reduce the potential spread of infection if a positive test was returned.
- Areas were disinfected with products approved to reduce the potential transfer of infection.
- Risk assessments had been completed to protect people and staff who may be at a higher risk if they contracted COVID-19. Measures were in place to support them.
- Staff worked in allocated teams which lessened the potential of cross infection between staff members.

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Inspected but not rated
The service was not always safe	
Further information is in the detailed findings below.	



Mere Lodge

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 the preparedness of care homes in relation to infection prevention and control. This was a targeted inspection looking at the infection control and prevention measures the provider has in place.

This inspection took place on 7 April 2021 and was announced.

Inspection team

This site visit was carried out by one inspector.

Service and service type

Mere lodge 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 the service notice of the inspection just before we entered the home. This supported the service and us to manage any potential risks associated with COVID-19.

What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority and used all of this 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.

During the inspection

We spoke with three people at the inspection and observed the interactions between people and staff. We reviewed a range of records and looked around the home.

Following the inspection

We asked the registered manager to send us documents which were taken into consideration whist producing this report.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

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

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- Some areas of the service were still not well maintained. The flooring in the lounges and corridors have been replaced and some areas of the home have been decorated. However, the flooring in the laundry has not been changed and will not allow proper disinfection.
- There were still areas of unpainted wood on doors which could also allow the transfer of infection. Mops were stored outside the back door of the home and were open to the weather and other potential contaminants. There was no defined plan of mop head changing or disinfection programme that would reduce the potential of cross contamination. These areas compromised infection control measures and the effectiveness of cleaning and disinfection, which meant there was a higher risk of infection spread between people and staff.

The provider failed to adequately protect people and reduce the potential of cross infection or cross contamination. This was a breach of regulation 12 (2h) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- Following the inspection the provider forwarded a plan to improve the disinfection process of floors and sterilisation of equipment.
- The provider had obtained a continuing supply of personal protective equipment (PPE). This included face masks, gloves, aprons and hand sanitiser and we saw staff used these appropriately. Staff told us they were encouraged to change their PPE regularly.
- Used PPE was disposed of appropriately in foot operated pedal bins placed throughout the home. This reduced the potential for transfer of infection.
- Staff encouraged people to wash their hands frequently throughout the day. Where this was not possible, hand sanitiser was offered to reduce the potential for transfer of infection.
- The provider participated in regular COVID-19 testing of people living in the service and staff. This ensured action could be taken swiftly to reduce the potential spread of infection if a positive test was returned.
- Areas were disinfected with products approved to reduce the potential transfer of infection.
- Risk assessments had been completed to protect people and staff who may be at a higher risk if they

contracted COVID-19. Measures were in place to support them.

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