

Barchester Healthcare Homes Limited

Rothsay Grange

Inspection report

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Ratings

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

Summary of findings

Overall summary

About the service

Rothsay Grange is a residential care home providing personal and nursing care to 48 people at the time of the inspection. The service can support up to 60 people.

The location is purpose built and delivers care on three floors. One floor is specifically for people living with dementia.

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

There were no specific care plans for mouthcare and records of mouthcare were not maintained.

A new policy and procedure on mouthcare had been planned, however, the pandemic had postponed its introduction.

We made a recommendation about the provision of mouthcare at Rothsay range.

Staff were wearing appropriate levels of personal protective equipment and there were clear instructions for visitors to the premises to follow before entering.

We were assured that the service was working within current infection control guidance.

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 requires improvement (published 1 October 2020).

Why we inspected

We undertook this targeted inspection to check on a specific concern we had about the standard of mouthcare. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

CQC have introduced targeted inspections to follow up on Warning Notices or 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.

We looked at infection prevention and control measures under the Safe key 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 COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Rothsay Grange on our website at www.cqc.org.uk.

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 requires improvement. 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

Is the service effective?

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

Rothsay Grange

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check on a specific concern we had about the quality of mouthcare being delivered to people living at Rothsay Grange.

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

Rothsay 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.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We reviewed information received about the specific concerns we were checking on and checked the provider's website for information on mouthcare. We reviewed best practice guidance on mouthcare. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service about their experience of the care provided. We spoke with six members of staff including the manager, and care workers.

We reviewed three people's care records and the day-to-day notes detailing the care delivered to them.

After the inspection

We spoke with professionals about the concerns we had reviewed.

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 requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

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 Rothsay Grange. We will assess all of the key question at the next comprehensive inspection of the service.

Preventing and controlling infection

- The provider had worked hard to maintain hygiene levels in the service during the pandemic to minimise the possible spread of infection. They were working in line with current guidance on use of personal protective equipment.
- There were clear processes in place for visitors to the service to follow before entering the premises.
- The manager reported there were fewer prescriptions of antibiotics issued within the service since the start of the pandemic and there had been no confirmed cases of COVID-19 in the service.
- 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.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

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 Rothsay Grange. We will assess all of the key question at the next comprehensive inspection of the service.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- We inspected Rothsay Grange following concerns raised about the standard of mouthcare delivered to a person during a short respite break. The condition of their dentures on leaving the service had caused concerns that were raised with the Care Quality Commission, (CQC). We decided to inspect so we could review mouthcare care plans and speak with staff and people about support with mouthcare.
- We looked at care records of people receiving respite care at Rothsay Grange, looking in particular at care plans for personal hygiene, bathing and mouthcare. We found a range of care plans had been included in the record, however, there were no specific oral healthcare or mouthcare plans.
- People had assessments covering all areas of personal hygiene and in one record we saw an oral health assessment tool had been completed but a care plan had not been devised to meet the identified needs.
- We looked at people's 'progress and evaluation records', a record of the care delivered to them. There were two people receiving respite care at Rothsay Grange when we inspected, both had been resident for over a month. One of them had a specific mouthcare programme devised by Speech and Language Therapists, (SaLT). We saw only two mentions that mouthcare had been delivered in the daily notes for both people.
- We spoke with staff about mouthcare. Two of three care staff believed that mouthcare had been included in their induction training about personal care. They told us that people would be encouraged to clean their teeth or receive support to clean them twice per day. We asked what they would do should someone refuse support with cleaning their teeth. They all responded they would leave the person and return later or ask a colleague to provide the support. No staff member told us they would inform the registered nurse (RN) on duty, even when asked what they would do if someone refused mouthcare for several days. We were not assured that concerns about mouthcare would be escalated appropriately.
- Care staff had limited awareness of the potential risks of poor mouthcare. All staff knew that poor mouthcare could lead to cavities, however none considered the possibility of infections, abscesses, pain or more serious conditions that could happen in extreme cases such as infection spreading through the body or sepsis. All staff told us that it was the person's choice to refuse mouthcare and they would respect this.
- We shared our concerns with the manager who had already spoken with the staff team and had asked them to be more specific in care records, detailing what mouthcare support had been given to people and whether it had been refused. This had not yet been acted upon.
- The provider had developed a mouthcare policy and procedure which would be implemented in all services. This had been put on hold when the pandemic began in 2020. The provider assured us that they would be ready to introduce the new procedures in two months and they would be providing training to support the rollout. They were also intending to approach local dentists to arrange training for staff in

mouthcare and specialist support techniques.

We recommend the provider reviews current provision of mouthcare and implements their new policy, procedure and training as soon as possible. We recommend that mouthcare needs and care plans are detailed explicitly in care documents and that staff members receive training in delivering mouthcare.

- The manager has, since the inspection, attended an online training session on oral healthcare provided by the local clinical commissioning group, (CCG).