

Pilgrims' Friend Society

Leonora Home

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

About the service

Leonora Home is a residential care home providing personal care and accommodation for up 20 people. At the time of our inspection there were 13 people in the home and a further two people in hospital.

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

We identified some areas of practice where improvements needed to be made. We have made a recommendation to the provider to review their monitoring systems in order to identify and take action on infection prevention and control (IPC) concerns.

The staff bin where they disposed of their used face masks did not have a lid on, increasing the risk of spreading infection. We saw that around the home some PPE stations were in areas where they could become contaminated. Staff were working between the different floors of the home, which increased the risk of infection transmission.

Staff had completed mandatory IPC training and undertaken further refreshers and training in COVID 19 and correctly putting on and taking off their personal protection equipment (PPE).

We observed that staff were all wearing the correct levels of PPE in the service and saw correct handwashing practice was followed.

Regular testing was completed in the home twice a week, this was also extended to include agency staff.

There had been an impact on regular staffing levels in the home during this outbreak. Agency staff were being utilised in the home and the management had firstly gained assurance they would only be working in this service.

The environment appeared clean, odour free and hand sanitiser was available at points throughout the home.

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 good (published 16 October 2018).

Why we inspected

As part of CQC's response to care homes with outbreaks of coronavirus, we are conducting reviews to ensure that the Infection Prevention and Control (IPC) practice was safe and the service was compliant with IPC measures. This was a targeted inspection looking at the IPC practices the provider has in place. Targeted inspections do not change the rating from the previous inspection. This is because they do

not assess all areas of a key question.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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 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



Leonora Home

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to review infection prevention control procedures due to the outbreak of COVID-19 at this service.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Leonora Home 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

This inspection took place on 27 November 2020 and was unannounced.

What we did before the 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.

Before the inspection we reviewed the information we held about the service and the service provider. We looked at the notifications we had received for this service. Notifications are information about important events the service is required to send us by law. We used all of this information to plan our inspection.

During the inspection

We observed how staff interacted with people. We looked at all communal areas of the home and some

bedrooms to assess how the infection control procedures were being put into practice. We spoke with a senior carer, the business manager and three members of the care and housekeeping staff about the infection prevention and control systems.

After the inspection

We reviewed documents relating to infection prevention and control procedures which we requested from the registered manager following the visit.

We spoke with the local public health team who will shortly be conducting a virtual visit with the service.

Inspected but not rated

Is the service safe?

Our findings

Preventing and controlling infection

- We identified some areas of practice where improvements needed to be made. The staff bin where they disposed of their used face masks did not have a lid on, increasing the risk of spreading infection. The registered manager has informed us this has now been addressed.
- Staff were cleaning equipment after each use. Cleaning schedules were in place and daily cleaning during each shift was being undertaken. However there had not been consideration to increase high touch point cleaning in light of the outbreak. The senior said this was being done by staff as they went but was not being recorded. Staff also confirmed to us that they were constantly cleaning within the home.
- We saw that around the home PPE stations had been set up to enable staff easy access. However, there were some places where this was on a window ledge where one person was walking up and down and was unable to isolate. This exposed the risk of this PPE becoming contaminated before staff used it. The registered manager told us following our inspection these had now been relocated to a locked upstairs room.
- Staff had started off working in certain areas of the home but as the infection had spread staff were working between the different floors of the home. The registered manager informed us following the inspection that they were re-implementing the zoning system to reduce transmission flow by staff.

We recommend that the provider reviews their infection prevention audit tool in line with safe infection prevention control guidelines to ensure they are identifying and addressing areas of improvement in a timely manner.

- Staff had completed mandatory infection prevention control training (IPC) and undertaken further refreshers and training in COVID 19 as well as correctly putting on and taking off their personal protection equipment (PPE). One staff told us, "We have had lots of refresher training, had COVID training and PPE donning and doffing."
- Agency staff supporting the service were given a questionnaire sheet about any symptoms they may be experiencing and an induction form around health and safety practices in the service.
- We observed that staff were all wearing the correct levels of PPE in the service and saw correct handwashing practice was followed. The service had created a changing area for staff near the laundry room where they could put on their PPE and change after each shift. Staff came to work in their normal clothes and all uniforms were kept and washed at the service. This was also completed for agency staff members.
- Staff told us they had not run out of PPE and there had been a constant supply available as needed. One staff raised that they had been informed they needed to share a face visor with a member of staff when they returned to shift. We raised this with the management team who assured us there was a whole box of face visors available. Each staff member had their own with their name on, which was then disinfected after each use. This had been a miscommunication and the senior lead addressed this following our inspection.
- Regular testing was completed in the home twice a week, this was also extended to include agency staff.
- Staff told us they received guidance and updates as things changed and that communication had been good. There was a COVID lead within the organisation and information was cascaded twice weekly to staff.

- There had been an impact on regular staffing levels in the home during this outbreak. Agency staff were being utilised in the home and the management had firstly gained assurance they would only be working in this service. The senior lead said they had good relationships with three agencies and one agency staff member would be with them for the next three months.
- Staff were starting to slowly return to the service following their isolation periods and one staff told us they were pleased to be back commenting, "We have a great team, staffing has been hard but we have had agency staff. We still look after our residents the same."
- Morale amongst the staff team was positive with one staff saying, "I want to be here and help, it's a nice morale in the home, we are working together." The senior lead told us, "Staff have been brilliant and pulled together. We have focused on people and families are very supportive."
- The environment appeared clean, odour free and hand sanitiser was available at points throughout the home. On arriving at the service temperatures were taken and handwashing facilities were situated by the entrance.
- Communal areas were not being used during the outbreak. People were isolating in their rooms and their meals were taken to bedrooms. All rooms had handwashing facilities. Staff told us they had continued to give people activities to engage them and spent one to one time with them when they could.
- The home had been facilitating safe visits for people's relatives, however due to the current outbreak the home was closed to visitors at this time. For anyone that was receiving end of life care the home had continued to allow short safe visits to take place.