

Dovecote View Limited Dovecote View Chichester

Inspection report

Claypit Lane Westhampnett Chichester West Sussex PO18 0NT Date of inspection visit: 01 February 2021

Date of publication: 23 March 2021

Tel: 01243779080

Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?	Inspected but not rated
Is the service responsive?	Inspected but not rated

Summary of findings

Overall summary

About the service

Dovecote View Chichester is a care home registered to provide accommodation and personal care for up to 34 older people, including those living with dementia. At the time of the inspection there were 21 people living at the home.

People's experience of using this service and what we found The service had experienced an outbreak of Covid -19 that had impacted on people living in the service and staff.

Relatives spoke positively about the care their loved ones had received. One relative told us, "they go the extra mile for my mum. Our hats go off to the care staff at this time." Relatives felt that the registered manager and staff had "done their best to keep people safe in the most trying of times." Another relative told us, "the home is well organised and well managed. Staff tend to stay, and I have seen several of them progress into senior roles where they have shown professionalism and skill. In conversation with staff I was consistently reassured of their capacity to look after [persons] increasing needs".

We were assured that the service was following guidelines for preventing and controlling infection (IPC). 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 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.

Relatives told us about how the registered manager and staff had worked to ensure people received safe care and how they felt involved in discussions around care planning including end of life care.

We were assured that people's preferences and choices for their end of life care was considered and people were supported at the end of their life to have a comfortable, pain free and dignified death.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Why we inspected

The targeted inspection was prompted due to concerns received about infection prevention and control and end of life care. We decided we would inspect and examine those risks.

We looked at infection prevention and control measures under the Safe key question. The service had

experienced an outbreak of Covid-19 affecting both people living at the service and staff. We were assured by practices the service had in place to manage outbreaks.

We looked at how people were supported at the end of their life to have a comfortable, dignified and painfree death under the Responsive key question. This was in response to a concern that had been raised during the recent outbreak of Covid-19. We found evidence that the service had worked closely with people and involved family members in providing appropriate support to people that respected their preferences.

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. The overall rating for the service has not changed therefore following this targeted inspection and remains Good.

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?	Inspected but not rated
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.	
Is the service responsive?	Inspected but not rated
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.	



Dovecote View Chichester

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to look 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. We also looked into infection prevention and control during end of life due to information of concern that has been shared with this.

Inspection team This inspection was completed by one inspector

Service and service type

Dovecote View Chichester 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 was unannounced.

What we did before the inspection

We reviewed the information we held about the service. We looked at the statutory notifications received. Notifications are information about important events the service is required to send us by law. We reviewed information from partner agencies and stakeholders and on-going monitoring information

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. We used all of this information to plan our inspection.

During the inspection-

We observed people at the service whilst ensuring that safe social distancing measures were maintained at all times. We spoke with the registered manager and observed staff supporting people using the service.

After the inspection -

We spoke with three relatives of people living at the service, this included those with a direct experience of the Covid-19 outbreak. We spoke with four staff members. We reviewed a range of records, this included care plans for two people, advanced decision care plans for two people and records relating to management of infection prevention and control (IPC). We continued to seek clarification from the registered manager to validate evidence found.

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 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 received about infection prevention and control (IPC) following an outbreak of Covid-19 that had significant impact on people living and working at the service.

Preventing and controlling infection

• During the outbreak of Covid-19 people were isolating in their rooms in accordance with government guidance. People had recently returned to using the communal areas of the home. We observed people being supported to maintain social distancing in the communal areas. The location of chairs had been considered to ensure people could use these spaces safely and continue to benefit from social contact with each other.

•We were assured the provider was preventing visitors from catching and spreading infections. The service was closed to non-essential visitors and was adhering to guidance from Public Health England (PHE), following an outbreak of Covid-19. Essential visitors completed appropriate checks and were given information about procedures required during their visit to the service. These included wearing appropriate Personal Protective Equipment (PPE) which was provided by the service if required. People who were nearing the end of their life were supported to have visits from family members. This was in accordance with government guidelines and ensured that people received dignity and compassion at the end of their lives. The Responsive section of this report examines this in more detail.

• Relatives told us their concerns about the impact lock down and lack of face to face visits would have had on their loved one's quality of life. Those we spoke to felt that the manager and staff were "trying their best to facilitate contact and visits" whilst managing the challenges caused by the global pandemic. Relatives told us about the Covid-19 visiting arrangements the registered manager had in place prior to the outbreak. This included the provision of a room with a Perspex divider that ensured people could see and speak with their family members. Relatives spoke highly of the team and what they had achieved to ensure people could maintain contact with relatives during the outbreak. This supported people's well-being and helped to mitigate the loss of face to face contact visits.

• One relative told us, "As relatives were unable to visit, the manager ensured we received regular email updates on their well-being. The management put in place stringent hygiene policies to protect residents and, when circumstances meant residents were confined to their rooms, would visit them regularly to ensure they were not lonely." This provided relatives with assurances that people remained well cared for.

• We were assured that the provider was meeting shielding and social distancing rules. The registered manager told us how staff had continued to support people living with dementia, to help them understand the risk that Covid-19 presented and maintain social distancing. This had been a challenge for some people who continued to walk with purpose in their home. Staff knew people well and were able to support them to

manage this as safely as they could.

• We were assured that the provider was admitting people safely to the service. The service was currently closed to admissions and the registered manager detailed the processes that they followed when admitting people, these included ensuring the person had a current negative Covid-19 test result and adhered to a 14-day period of isolation. This ensured the service managed the risk of infection spread and demonstrated adherence to current PHE guidance.

• We were assured that the provider was using PPE effectively and safely. During our inspection we observed staff using PPE in accordance with government guidelines. Staff and the registered manager provided details on how they used PPE when working closely with people living in the service. The service had a good stock of PPE that staff could access when needed.

• We were assured that the provider was accessing testing for people using the service and staff. All people and staff were accessing regular testing for Covid-19. The registered manager was aware of the recommendations for testing people that had previously tested positive for Covid -19. They were also in the process of arranging for people to have their first vaccine dose as soon as possible following recovery from Covid-19.

• We were assured that the provider was promoting safety through the layout and hygiene practices of the premises. The service was clean and we observed enhanced cleaning routines in place. The registered manager told us about changes they had made to the use of different areas within the home. For example, as the sun room was large it was being used by staff for handover, this meant staff were able to communicate safely with each other whilst maintaining social distancing. We also observed the seating in communal areas and dining room had been adjusted to enable people to social distance from each other.

• We were assured that the provider ensured infection outbreaks were effectively prevented or managed. Staff had received training in IPC and demonstrated a good understanding of PPE use. We observed staff using PPE effectively and told us about the training and support they had received.

• One staff member told us," Management at Dovecote are very supportive. Even when our management team members were isolating or poorly, they always make the team feel you can contact them with any queries or concerns you might have". Staff consistently reported on how they felt supported by the management during the outbreak.

• We were assured that the provider's infection prevention and control policy was up to date. The registered manager provided email updates to family and staff, this ensured that the latest information was available.

• The service had experienced an outbreak and the registered manager and staff were in the process of reflecting on this. Any lessons learnt from recent events would be taken forward and used to shape future practice.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

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 have specific concerns about.

The purpose of this inspection was to check a specific concern we had received about support people received at the end of their life. We will assess all of the key question at the next comprehensive inspection of the service.

End of life care and support

- •We were assured that the service had considered how people were supported at the end of their life to have a comfortable, dignified and pain-free death.
- •The service had experienced an outbreak of Covid-19. Some people had died at the service through the outbreak. We looked at the circumstances relating to the passing of one person as a result of concerns we had received. We reviewed information and spoke with a relative and were assured that the service had provided all the support they could to that person as they reached the end of their life. Advanced care plans evidenced peoples wishes and choices they had made about their end of life care. Relatives told us they had been involved with decisions about end of life care. This evidenced the homes individualised approach to care planning.
- A relative told us, "My relative was so lucky to spend [their] final years at Dovecote View. [They] found a new family and was safe, valued and respected. I hope I am lucky enough to find the same when my time comes."
- Care records evidenced how people were supported to maintain independence and measures were in place to minimise risk. For example, people who chose to walk with purpose had been risk assessed and had equipment in place to alert staff so they could respond quickly when required.
- Records evidenced that people had regular involvement from specialist health professionals. This ensured that symptoms including pain were managed effectively. Staff were clear of the process they followed to access urgent and out of hours support from health professionals if needed.
- A staff member spoke of, "staff members who are palliative care champions", these staff have an increased understanding of end of life care. This helped ensured that people's pain and other symptoms were assessed and managed effectively as people neared the end of their lives.
- Relatives told us the registered manager and staff had kept them updated on the condition of their loved one and supported them to visit at the end of their life. This was completed in line with current guidance and as a result ensured that the person and relatives had opportunity to say their goodbyes in a dignified manner.