

Byron Court Care Home Limited

Byron Court Care Home

Inspection report

Gower Street
Bootle
Merseyside
L20 4PY

Tel: 01519220398
Website: www.byroncourt.co.uk

Date of inspection visit:
11 January 2022

Date of publication:
20 January 2022

Ratings

Overall rating for this service	Inspected but not rated
---------------------------------	-------------------------

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

Summary of findings

Overall summary

Byron Court is a residential care home providing personal and nursing care to 40 people aged 65 and over at the time of the inspection. The service is registered to support up to 52 people.

We found the following examples of good practice.

The service had made the decision that until none of the people living in the service were testing negative for coronavirus no new admissions would be undertaken. The service supported people and their relatives to understand the isolation processes and how the service could help to alleviate them feeling lonely, such as calls with friends and loved ones and dedicated support time from staff members.

People at extreme risk and those that were isolating were supported in a manner to suit their needs. Where possible they remained in their own rooms to maintain a familiar environment. Specific staff were allocated to support all their needs, including their meals and cleaning to limit contact with other staff and reduce any risks.

The service had arrangements for booking visitors in at a time that suited people and was spaced out to avoid potential infection transmission with other visitors. Visitors were able to access window visits, garden visits and visits in a specific room that was accessed from outside without the need for visitors to enter the service.

Byron Court is a residential care home providing personal and nursing care to 40 people aged 65 and over at the time of the inspection. The service is registered to support up to 52 people.

We found the following examples of good practice.

The service had made the decision that until none of the people living in the service were testing negative for coronavirus no new admissions would be undertaken. The service supported people and their relatives to understand the isolation processes and how the service could help to alleviate them feeling lonely, such as calls with friends and loved ones and dedicated support time from staff members.

People at extreme risk and those that were isolating were supported in a manner to suit their needs. Where possible they remained in their own rooms to maintain a familiar environment. Specific staff were allocated to support all their needs, including their meals and cleaning to limit contact with other staff and reduce any risks.

The service had arrangements for booking visitors in at a time that suited people and was spaced out to avoid potential infection transmission with other visitors. Visitors were able to access window visits, garden visits and visits in a specific room that was accessed from outside without the need for visitors to enter the service.

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 were assured that this service met good infection prevention and control guidelines as a designated care setting

Inspected but not rated

Byron Court Care Home

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 care homes with outbreaks of COVID-19, we are conducting reviews to ensure that the Infection Prevention and Control (IPC) practice is safe and that services are compliant with IPC measures. This was a targeted inspection looking at the IPC practices the provider has in place. We also asked the provider about any staffing pressures the service was experiencing and whether this was having an impact on the service.

This inspection took place on 11 January 2022 and was announced. We gave the service 24 hours of notice of the inspection.

Is the service safe?

Our findings

Staffing

- The provider told us they had measures in place to mitigate the risks associated with COVID-19 related staff pressures. Staff confirmed that their immunisation status and recent tests were confirmed by the service. As a result of testing the majority staff and service users had been identified before they developed system allowing the service to take prompt action and limit the spread of any potential infection.

How well are people protected by the prevention and control of infection?

- We were assured that the provider was preventing visitors from catching and spreading infections. All visitors must present a COVID pass and a confirmation of a negative test undertaken within 24 hrs on entry to the building. This is checked by staff and recorded when visitors sign in. The service has a policy in place that outlines how it anticipates it will safeguard visitors and assist in the spread of any potential infection.
- We were assured that the provider was meeting shielding and social distancing rules. The provider had rearranged communal areas to provide social distancing and made good use of the various communal areas available.
- We were assured that the provider was admitting people safely to the service. There service had an admittance procedure, this included ensuring that a recent negative result for coronavirus had been recorded before admittance was agreed. At the time of the inspection there were four service users with a positive result in isolation. The service had had five days without any further positive result. They had made the decision to close to any further admittances until all service users and staff were testing negative.
- We were assured that the provider was using PPE effectively and safely. There was enough PPE available for staff and visitors. Throughout the service there was PPE readily available for staff to replace as needed. For those in isolation a trolley was available with PPE
- We were assured that the provider was accessing testing for people using the service and staff. Testing was in place for all staff when they commenced their shift. Testing practice was lateral flow test (LFT) three times a week and a polymerase chain reaction (PCR) weekly. These were logged and monitored to make sure the service could monitor any potential outbreaks of COVID-19.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises. Adjustments had been made to allow visiting in an appropriate manner and adjust public areas such as lounges and dinning to assist with social distancing.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed. Testing identified an outbreak effectively; patients were isolated to prevent infection spread and

staff were supported to remain at home until clear of infection. The service suspended any new admissions until all patients and staff test negative.

- We were assured that the provider's infection prevention and control policy was being updated. The policy needed to reflect the services, bare below the elbows and consider the management of risks for BAME staff.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance. All visitors were checked on entry that they were up to date with vaccinations and had tested negatively within last 24 hours.

From 11 November 2021 registered persons must make sure all care home workers and other professionals visiting the service are fully vaccinated against COVID-19, unless they have an exemption or there is an emergency.

- The service was meeting the requirement to ensure non-exempt staff and visiting professionals were vaccinated against COVID-19. Checks were in place and logs of staff vaccination status including boosters were recorded and monitored.

We have also signposted the provider to resources to develop their approach. This included updating their policy, making sure isolating patients were risk assessed to keep their doors open and obtaining information on admission regarding service users vaccination status.