

# Blue Sunrise Care Limited Compton View Residential Care Home

### **Inspection report**

267 St Michaels Avenue Yeovil Somerset BA21 4NB Date of inspection visit: 26 April 2021

Date of publication: 12 May 2021

Tel: 01935476203

Ratings

## Overall rating for this service

Inspected but not rated

Is the service safe?

**Inspected but not rated** 

### **Overall summary**

Compton View Residential Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided. The home is an adapted building with separate lounge and dining area with conservatory and gardens. The home is over two floors with lift access to the first floor, some rooms on the ground floor have direct access to the garden and patio areas. Compton View provides care for up to a maximum 17 people. At the time of our inspection, 14 people were living at the service.

We found the following examples of good practice.

The provider had not had any COVID-19 outbreaks in the home. Staff told us the registered manager was very good at reminding them about hygiene.

When staff came on shift, they recorded their temperatures, sanitised their hands and put on personal protective equipment, (PPE) before entering the building. Staff entered through the front door but then walked through the building to a room upstairs to change their clothes. We discussed this with the registered manager who said staff could instead use the room they had allocated for COVID-19 testing as this was on the ground floor and had a separate entrance. This was implemented immediately to further reduce the risk of cross infection

Staff had good knowledge of infection prevention control (IPC). All staff had received IPC training, including how to safely put on and take off PPE such as gloves, aprons, and face masks. A staff member said, "We watched the videos and (Registered manager's name) also shows us." We saw several posters around the home with reminders of how to maintain good infection control processes.

The home was clean and tidy. The provider employed a housekeeper for 16 hours a week to provide cleaning duties. Night staff had a cleaning schedule to follow and care staff cleaned at weekends. There was a comprehensive cleaning schedule which included disinfecting touch points several times a day.

We saw staff wearing appropriate PPE. When changing their PPE between rooms staff removed it inside the room and placed it in a yellow bag in the person's room. Staff then put on fresh PPE when they came out of the room. Not all rooms had foot operated bins to dispose of clinical waste. We discussed this with the registered manager who agreed to place foot operated waste bins in each bedroom for staff to remove and dispose of their PPE. This will further reduce the risk cross contamination.

During the recent lockdown the provider had stopped all visitors coming into the home. One staff member told us, "We used video calls and people have their own mobiles, and some people have phones in their rooms." The registered manager described how they kept families informed through social media.

The provider's visitors policy was clear and in line with national guidance. Visitors were required to follow

the service's infection control procedures. Visits were encouraged, the home had set aside a conservatory for visits to take place safely.

The home was split into two floors. The registered manager explained if someone tested positive for COVID-19 they would isolate in their room and staff would be allocated to that person.

There was a contingency plan in place in the event of an emergency which included how to manage a fire during the pandemic. At the time of this inspection every staff member and resident continued to test negative in the home. The registered manager said they had support from Public Health England and the local commissioning teams and had been guided by their advice.

The provider continued to admit people to the home, during the pandemic three people had moved in. The registered manager told us no one would be admitted without a negative test first and some of their belongings would go into isolation for 72 hours prior to the person moving in. Once people came in, they were isolated in their rooms for 14 days. The provider's admissions policy confirmed this was the correct process for the home.

The registered manager ensured regular testing was carried out, weekly for staff and monthly for people living in the home. This was in line with COVID-19 testing guidance. However, whilst people did not refuse to be tested, the registered manager had not recorded consent in line with the Mental Capacity Act. We discussed this with the registered manager who assured us they would review this and ensure all care records are updated.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

#### Is the service safe?

Further information is in the detailed findings below.

**Inspected but not rated** 



# Compton View Residential 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 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 26 April 2021 and was announced.

## Is the service safe?

## Our findings

S5 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.
- 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.

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