

Aspire Healthcare Limited

Meadowfield

Inspection report

61 Durham Road Bensham Gateshead Tyne and Wear NE8 4AP

Tel: 01914770671

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Ratings

Overall rating for this service	Good •
Is the service safe?	Requires Improvement

Summary of findings

Overall summary

We carried out an unannounced comprehensive inspection of this service on 26 August and 21 September 2015. A breach of legal requirements was found at that time. This related to a breach of regulations regarding the safety of the home. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements.

We undertook this focused inspection to check that they had followed their plan and to confirm whether they now met legal requirements. This report only covers our findings in relation to these requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Meadowfield on our website at www.cqc.org.uk.

Meadowfield provides accommodation and personal care for up to five people. Accommodation is provided over three floors in five single bedrooms. Access between the floors is by stairs only. At the time of the inspection there were four people accommodated in the home.

The service had a manager registered with CQC but they were no longer in post and had moved to manage another location operated by this organisation. A newly promoted member of staff was in day to day charge of the service. They told us they had commenced the process of applying to become a registered manager. The change in management had not been notified to CQC. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Since our last inspection, an inspection of the homes electrical installation had been carried out and was found to be safe. Evidence that a water safety survey had been conducted could not be provided to us. Data sheets for hazardous chemicals used in the home were not readily available for staff to reference. Basic first aid items, such as a thermometer and plasters were not stocked. Many dry dressings were out of date; some by several years.

We found the provider had met some of the assurances they had given in their action plan, however two areas identified at our last inspection had not been addressed and an additional concern regarding the availability of basic first aid items was identified. The provider remained in breach of the relevant regulation relating to safe care and treatment.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not consistently safe. We found some action had been taken to improve the safety of the service.

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We could not improve the rating for: 'Is the service safe?' from 'requires improvement' because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires Improvement





Meadowfield

Detailed findings

Background to this inspection

We undertook an unannounced focused inspection of Meadowfield on 27 April 2016. This inspection was done to check that improvements to meet legal requirements planned by the provider had been made after our comprehensive inspection on 26 August and 21 September 2015. We inspected the service against one of the five questions we ask about services: 'Is the service safe?' This was because the service was not meeting a legal requirement at the time of our initial 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.

This inspection was undertaken by one adult social care inspector. During the inspection we spoke with two people who used the service, a visiting social worker, two staff members, including the manager and a visiting quality manager. We looked in people's bedrooms and reviewed a sample of care and training records. These included one person's care plans, their progress notes, risk assessments and review records. We discussed our findings with the manager and quality manager.

Requires Improvement

Is the service safe?

Our findings

At our last inspection in August 2015 a breach of legal requirements was found. The breach related to the safety and safe use of the premises.

At the time of our last inspection we found the home was generally in a good state of repair and decorative order. Damage to roof tiles had led to water damage in one area of the home. This was repaired by the second day of our inspection. Corridor, bathroom and lounge areas were generally free from obvious hazards, although the bathroom doubled up as a laundry. There were some domestic chemical products stored here and hard copies of product data sheets (which provide safety information about hazardous substances) were not available for easy reference, although they were kept on the provider's IT system. Although the bathroom had obscured glass there were no blinds fitted to help preserve people's privacy. The home was free from unpleasant odours. The registered manager showed us the results of audits, safety checks and copies of service records. We requested copies of electricity, gas and water system checks carried out by external contractors. A satisfactory gas safety certificate was available, but copies of water safety and electrical installation surveys were not.

We reviewed the action plan the provider sent to us following our comprehensive inspection. This gave assurances that action was being taken to ensure an electrical safety check would be carried out, on-going safety checks would be planned for and copies of relevant safety reports would be available for inspection. A water system check and the availability of safety information relating to hazardous chemicals were not referred to in the action plan. The provider told us they had arranged for an inspection of the electrical installation and provided us with a copy of the relevant survey report.

Two people who used the service told us they were happy with the condition of their bedrooms. One person said, "My room's alright." Another person explained how the new manager had helped them to re-organise their bedroom. We observed a person had a minor injury. Staff were unable to find any plasters, which were not held in stock at the home. They told the person that plasters had been placed on order.

During this inspection we found some improvements had been made. An inspection of the electrical installation had been carried out by a competent person and a copy of the survey report was retained in the home. The survey found the electrical installation in the home was in a satisfactory condition and no dangers, or potential dangers were found.

We found domestic chemicals (washing powder in an unsecured container) continued to be stored in the bathroom / laundry, allowing for uncontrolled access and risking inappropriate use. We asked to view the hard copies of product data sheets which provided staff with safety information on chemical products, but these were again not available for easy reference. The manager told us they were awaiting a copy of a data sheet manual to be supplied to them by the provider. The washing machine had a broken dispenser tray, fixed with a screw, presenting a risk of injury. There was also no blind fitted to the window which did not promote adequate privacy. We received confirmation that the washing machine and blind had been attended to shortly after the inspection.

We tested the hot water supply to the bath. This was marginally in excess of the safe temperature range of 39 to 43oC; reading 45oC. The manager was not able to confirm if the temperature was controlled by a thermostatic control valve, which would allow hot water to be distributed through the system at a temperature that would limit the formation of legionella bacteria. We examined water temperature records and found all hot water outlets (including showers) to be within the range of 38.2 to 44.4oC, indicating hot water was distributed around the system below 50oC; a temperature at which legionella cannot be effectively controlled. We requested a copy of the legionella survey, however this was not forthcoming.

In addition to looking at items identified at the last inspection, we conducted a tour of the building to see if other safety hazards were present. We saw that wardrobes in people's bedrooms were not affixed to walls, presenting a risk that they could be toppled over. We received confirmation that these had been affixed shortly after the inspection. We also saw two radiators without covers, one directly next to a bed. These were not switched on, so we requested the manager check the temperature of these to assess the risk posed by potentially hot surfaces and if necessary ensure appropriate control measures were put in place. We received confirmation that covers had been fitted to these radiators shortly after the inspection.

Following information we received regarding an incident at home, we examined arrangements for providing basic first aid and monitoring people's health, consistent with a service providing personal care. A staff member told us they were undertaking computer based training which included emergency first aid. First aid training was limited to a computer based course, and test, so no practical or hands on training was provided. We found that basic items to monitor a person's wellbeing or to deal with a minor injury; such as a thermometer to measure a person's temperature and an appropriately stocked first aid kit, were not available. The first aid kit contained items, such as dressings, that were past their expiry dates, some of which expired in 2007. We asked the quality manager if there were de-briefing arrangements, or other systems to critically review adverse incidents. We were told these were discussed informally, but that a formal process was not in place to allow practice to be reviewed and if necessary changed.

We found the assurances the provider had given in the action plan with regard to electrical safety had been met. However, we found they had taken no action to ensure the water system was inspected and assessed for the legionella risk which we had identified in our last inspection report. In addition, we found shortfalls in the availability of basic first aid items and processes to review critical incidents. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment
	The registered person had not ensured risks to health and safety were assessed and mitigated against. Regulation 12(2)(a & b).