

### NA SS Care Limited

# Stanmore Residential Home

### **Inspection report**

2-6 Jersey Avenue Stanmore Middlesex HA7 2JQ

Tel: 02089074636

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#### Ratings

# Overall rating for this service

Requires Improvement



**Requires Improvement** 

# Summary of findings

### Overall summary

We carried out an unannounced comprehensive inspection of this service on 21 April 2016 at which there was a continuation of one breach of legal regulations. This related to people not being protected against the risks associated with unsafe or unsuitable premises. There was no effective process in place to identify and assess the risk to people's health and safety in the home. We served one warning notice because of the continuing breach.

After the comprehensive inspection, the provider sent us an plan to show what they would do to meet legal requirements in relation to the breach. We undertook a focused inspection on the 30 August 2016 to check that they had followed their plan, met the warning notice and to confirm that they now met legal requirements. We inspected the safe domain only at this inspection. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Stanmore Residential Home' on our website at www.cqc.org.uk'.

Stanmore Residential Home is a care home and provides care and support to 27 older people who may be living with dementia. It does not provide nursing care. There were 25 people using the service at the time of our inspection.

There was a registered manager in post at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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

At this inspection of 30 August 2016, we found that the provider had followed their action plan, the warning notice had been complied with and legal requirements had been met.

We found that the provider had ensured there was an environmental risk assessment in place which was being used to identify and address potential health and safety risks to people using the service. Suitable dorguard devices were fitted to the fire doors to prevent the spread of fire in the home and fire evacuation sledges were easily accessible. Fire exits were signed and clear of any obstruction. The garden was cleared of materials which could have caused harm to people if they accessed the garden.

### 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 safe.

There were arrangements in place to identify and address potential health and safety risks to people using the service.

Suitable dorguard devices were fitted to the fire doors to prevent the spread of fire in the home and fire evacuation sledges were easily accessible. Fire exits were labelled and clear of any obstruction.

This meant that the provider was now meeting legal requirements.

We could not improve the rating for this question to 'good from because to do so requires a demonstration of consistent good practice over time.

We will review our rating for effective at the next comprehensive inspection.

#### Requires Improvement





# Stanmore Residential 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 was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook a focused inspection of Stanmore Residential Home on the 30 August 2016. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 21 April 2016 had been made.

We inspected the service against one of the five questions we ask about services: is the service safe. This is because the service was not meeting legal requirements in relation to this question.

The inspection was undertaken by one inspector.

Before our inspection we reviewed the information we held about the home, this included the provider's action plan, which set out the action they would take to meet legal requirements.

We spoke with the registered manager and the provider. We also reviewed records relating to the management of the service.

### **Requires Improvement**

### Is the service safe?

## Our findings

At our inspection on the 10 December 2014, we found people using the service were not protected against the risks associated with unsafe or unsuitable premises because fire doors were not closed and items that may be hazardous to health were not stored safely.

This meant the provider was in breach of regulation 15 of the Health and Social care Act 2008 (Regulated Activities) Regulations 2010 which corresponds to Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following the inspection the provider sent us an action plan setting out the actions they would take to meet the regulation. During our comprehensive inspection on the 21 April 2016, we found the provider had not followed their action plan and some actions had not been implemented to meet the regulation. This meant there was a continuation of the breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. As a result, enforcement action was taken against the provider for failing to meet the regulation. A warning notice was served. The provider was given until the 15 July 2016 to meet the regulation. An action plan was received by the provider outlining the actions they would take to meet the regulation in the given timeframe.

We carried out this focused inspection to check what action had been taken. We found the provider had taken steps to meet the regulation and addressed our concerns in relation to people's health and safety.

There were arrangements in place to identify any potential health and safety risks to people using the service. Monthly environmental safety audits were being conducted to identify any health and safety issues. We looked at two audits for June and July 2016. We found the audits covered a number of areas checked around the home and there was information which showed any hazards identified had been addressed.

Fire equipment was appropriately stored and easily accessible in the home. The evacuation sledges were located on the ground floor and first floor. All fire exits were clear of obstruction and any equipment used by the service such as hoists and medicine trolleys were stored away appropriately.

Fire doors were properly adjusted and Dorguard devices had been fitted to the doors. The devices kept the doors open when required but automatically released the doors when a fire alarm sounds to prevent the spread of fire in the home. This also allowed safe access for people in the home without the risk of injury and there was no loud slamming of the doors which previously had been the cause of discomfort for people using the service.

We found the provider had also addressed the issues we found in relation to the premises. The outlet drainage hole for the downstairs shower was missing its cover and had the potential for a person or care worker to easily place their foot in this and cause potential harm. During this inspection, we found the cover had been replaced. The utility cupboard at the foot of the stairs which was the master area for gas and electricity switches was also safely kept locked.

There were three points of access to the garden from the dining room and lounge which provided easy access. However the third entrance was on the side of the house but had a large drop without handrails. This could place people at risk of falling as there were people who need support with their mobility. During this inspection, we found the door to this step has been locked and closed off to residents as this was now part of the registered manager's office.

In the garden at the back of the house we found metal pipes snapped in half and protruding from the ground for about two metres, near the boundary fence. During this inspection, we observed that the metal pipes had been removed and cleared from the garden which meant people were safe from sustaining any injury.