

Temple Manor Care Limited

Temple Manor Care Home

Inspection report

Temple Hirst
Selby
North Yorkshire
YO8 8QN

Tel: 01757270377

Date of inspection visit:
18 April 2016

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15 June 2016

Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Summary of findings

Overall summary

We carried out an unannounced comprehensive inspection of this service on 2 February 2016. After that inspection we received concerns in relation to fire safety within the service. As a result we undertook a focused inspection to look into those concerns. This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Temple Manor on our website at www.cqc.org.uk

At our last inspection on 2 February 2016 the service was rated requires improvement and was in breach of two regulations of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Regulation 12 Safe care and treatment and Regulation 17 Good governance. We will review the breaches of regulation at our next inspection.

This inspection took place on 18 April 2016 and was unannounced. The service provides residential care for up to 19 older people and people living with dementia.

The service has a registered manager. 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.'

At this inspection we found the service was in breach of Regulation 12 Safe care and treatment. This was in relation to fire safety and the associated risk assessments. Although the service had completed internal fire safety checks and staff had received fire safety training we found the fire risk assessment for the service was out of date and did not include three bedrooms which were available for people to live in. The electrical safety certificate was in date but the provider did not have a process of checking electrical appliances to ensure equipment and appliances were safe. You can see what action we told the provider to take at the back of the full version of the report.

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.

Staff had received fire safety training. Despite this the provider could not show us evidence of regular fire drills. Following the inspection we received a record of a fire drill which had taken place in February 2016.

The electrical safety certificate for the premises was in date however safety tests for individual electrical appliances were overdue.

The fire alarm system and emergency lighting was in working order.

Requires Improvement ●

Temple Manor 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, to look at the overall quality of the service, under the Care Act 2014.

This inspection took place on 18 April 2016 and was unannounced. This inspection was carried out in response to concerns we received in relation to fire safety at the service. We inspected the service against one of the five questions we ask about services: Is the service safe.

This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Temple Manor on our website at www.cqc.org.uk

At the time of our inspection 15 people were living at Temple Manor.

The inspection team was made up of one inspector and the Watch Manager from North Yorkshire Fire and Rescue Service. We spoke with the registered manager and provider. In addition to this we completed a tour of the service and looked at management records associated with fire safety.

Is the service safe?

Our findings

Prior to our inspection we had received anonymous concerns about fire safety at the service. The concerns related to a recent fire at the service and the safety and maintenance of the fire alarm system; a lack of fire safety training for staff and concerns regarding the safety of electrical appliances within the service.

We discussed the concerns with the registered manager and the provider. The registered manager explained there had been a recent small fire in the kitchen. A plastic pan handle had set alight. This fire was discovered and the fire alarm did not sound. They had taken witness statements from the staff members on duty but had not completed any formal risk analysis of the incident. However, they replaced pans to ensure they have metal handles to reduce the risk of any further incidents.

The provider had been responsible for undertaking portable appliance testing (PAT) testing of electrical appliances. PAT is the term used to describe the examination of appliances and equipment to ensure they are safe to use. The law requires all employers maintain portable appliances and ensure their safety. We found that the provider had not put in place a system to make certain their equipment was kept protected and was preserved through regular maintenance as well as inspections and periodic testing. The provider accepted there had been an oversight here and we found the tests had not been completed since 28 August 2014. The provider arranged for all items to be tested, by an external electrician, the following day and sent CQC a report and invoice which showed this had been completed.

The registered manager told us they could not provide evidence of fire drills as the document had been archived. However, they talked through the fire drill procedure and told us these took place every six months. Following the inspection we were provided with a copy of a fire drill which had taken place on 11 February 2016.

The registered manager was unable to find the electrical safety certificate. The electrical safety certificate is undertaken by an accredited electrician and is valid for five years. The registered manager located the certificate and provided us with a copy the following day. The certificate was in date and did not highlight any concern.

However, the fire safety risk assessment for the service was out of date. It had been completed by an external organisation in 2011. Since then three bedrooms which were not in use at the time of the assessment were now available for people to live in. The bedrooms were not included on the floor plan or the fire risk assessment. This meant the emergency services would not be able to see the most up to date information regarding the layout of the building. In addition to this the fire risk assessment named individuals responsible for fire safety within the service and the named people no longer worked at the service. We received updated information following the inspection which showed the risk assessment had been updated.

We looked at the training matrix and could see all staff had received fire safety training. We looked at four staff files and saw each member of staff had completed on line training in relation to fire safety. However,

there was no evidence of training which was specific to the service. This meant staff had been provided with fire safety awareness but required site specific training to ensure they were confident about what to do in the event of a fire or other emergency which may require evacuation.

This was a breach of Regulation 12(2) (a) (b) (d) Safe Care and Treatment of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The fire officer completed an independent report which highlighted areas where improvement was required. They advised the provider they intend to return to the service to confirm the service met their specific requirements under fire safety legislation.

Despite these concerns we could see the fire alarm system was working and emergency lighting had the necessary power supply to it to ensure it would work.

We saw in house fire checks had been completed on a regular basis which included a weekly test of the fire alarm and emergency lighting. We could see evidence some essential fire safety checks had taken place. For example fire extinguishers and fire blankets were checked annually to ensure they were safe to use and would be effective in the event of an emergency.

The service had up to date individual personal emergency evacuation plans for people who used the service. These were kept in a central file and could be provided to the emergency services to ensure they knew the support people would require should they need to be evacuated. This meant people could be assured the emergency services would be given the information they needed to keep people safe.

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	<p>Regulation 12 HSCA RA Regulations 2014 Safe care and treatment</p> <p>The service did not have an up to date fire risk assessment in place, it did not include information about an additional three bedrooms at the service. The individuals named as being responsible for fire safety on the risk assessment no longer worked at the organisation. Tests to ensure individual electrical appliances were in safe working order were out of date. Staff had received fire safety training but this was not specific to the service.</p>