

# Inspire Residential Care Limited

# Morvern Care Centre

### **Inspection report**

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Date of inspection visit: 03 December 2020

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### Ratings

Overall rating for this service	Inadequate •
Is the service safe?	Inspected but not rated
Is the service effective?	Inspected but not rated
Is the service well-led?	Inspected but not rated

# Summary of findings

### Overall summary

#### About the service

Morvern Care Centre is a residential care home providing accommodation and personal care for up to 60 people aged 65 and over. At the time of inspection there were 43 people living there.

The care home comprised of three hotels converted into a residential accommodation on three floors. There were three separate units, two of which had been joined together and supported people living with dementia.

People's experience of using this service and what we found

This inspection identified substantial and widespread failings in respect of fire safety arrangements and in the leadership and governance of the service to prevent, identify or address these shortfalls. This posed serious risk to life.

Training for staff in fire safety and evacuation procedures was inadequate. People were not safe in the event of a fire or a fire alarm sounding at Morvern Care Centre. Staff told us they had received basic fire safety training, however had not participated in fire drills.

The provider's representative was present at the home during our visit and worked positively with the authorities to address our concerns during and after the inspection.

#### Rating at last inspection and update

The last rating for this service was Inadequate (published 24 November 2020).

The overall rating for this service was 'Inadequate'. The service was in 'special measures.' This means we keep the service under review. Special measures and remaining breaches will be followed up at the next rated inspection.

#### Why we inspected

We undertook this targeted inspection to follow up on specific concerns we had received from Lancashire Fire and Rescue Service. The inspection was prompted in response to concerns received about fire safety management, means for detecting and giving warning in the event of a fire and the means of escape. A decision was made for us to inspect and examine those risks.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Morvern Care Home on our website at www.cqc.org.uk.

#### Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to discharge our regulatory enforcement functions required to keep people safe and to hold providers to account where it is necessary for us to do so.

We have identified breaches in relation to safe care and treatment and good governance.

CQC served notice under Section 31 of the Health and Social Care Act 2008 to suspend the provider's registration. This notice of urgent suspension was served because we believed that a person would or may have been exposed to the risk of harm if we did not take this action.

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

We always ask the following five questions of services.

Is the service safe?	Inspected but not rated
At our last inspection we rated this key question Inadequate. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.	
Is the service effective?	Inspected but not rated
At our last inspection we rated this key question Inadequate. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.	
Is the service well-led?	Inspected but not rated
At our last inspection we rated this key question Inadequate. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.	



# Morvern Care Centre

### **Detailed findings**

## Background to this inspection

#### The inspection

This was a targeted inspection to check whether people living at Morvern Care Centre were safe from the risk of fire. A joint visit was undertaken with two Fire Safety inspectors from Lancashire Fire and Rescue Service.

#### Inspection team

This inspection was undertaken by one inspector.

#### Service and service type

Morvern Care Centre is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. The registered manager was not present at the time of our inspection.

#### Notice of inspection

This inspection was announced. This was because we arranged a joint visit with the Lancashire and Fire Rescue Service inspectors, which required the presence of the provider's representative.

#### What we did before inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

We reviewed information we had received about fire safety at the service since the last inspection. We sought feedback from Lancashire Fire and Rescue Service and the local authority. We used all this information to plan our inspection. We requested information from the provider prior to the inspection and this information was used as part of the inspection plan.

#### During the inspection

We spoke with two members of staff and the appointed consultant representing the provider. We reviewed all records relating to the management of fire safety; including policies and procedures. We looked at records relating to staffing levels and the training of staff in relation to fire safety.

We also carried out a visual inspection of the building with the Fire Safety inspectors. This was to ensure Morvern Care Centre complied with fire safety law.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We continued to speak with Lancashire Fire and Rescue service about our findings.

#### Inspected but not rated

### Is the service safe?

# Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as Inadequate. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about. We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to check if people were safe from the risk of fire.

Assessing risk, safety monitoring and management

- There was serious risk to people's lives from fire. This was because the provider's arrangements for fire safety management was inadequate.
- The provider's fire policies and procedures did not fully comply with all relevant legal requirements and best practice guidance.
- The Morvern Care Centre Fire Safety Policy was dated January 2013. The policy was not current and did not reflect existing arrangements at the home for the action to be taken in the event of a fire or the fire alarm sounding.
- The fire risk assessment completed in February 2020 was not effective and had failed to identify and address the level of concerns noted during the inspection.
- Fire alarms could not be heard in all parts of the building. This had not been identified and addressed by the provider's safety checks.
- Evacuation procedures had been inadequately planned and considered. There were no clear instructions available for staff to follow. We were informed by the provider's representative that the method of evacuating in case of emergency was by 'progressive horizontal evacuation.' This is a method of moving people away from the area of danger to a safer place on the same floor. The fire policy, fire risk assessment and personal evacuation plans did not reflect the procedure for progressive horizontal evacuation.
- We walked the evacuation route people would need to follow on an upper floor. The route had not been considered and was not safe. This was because people would be required to exit through two bedrooms and an adjoining door which was locked.
- 18 people whose bedrooms were on the upper floors were dependent on the use of a wheelchair. There was no evacuation equipment, such as evacuation chairs or sledges to safely evacuate people who could not independently mobilise on the stairs.
- The identified evacuation route for one person on the lower floors had not been considered and protected. This was because the egress was not adapted for wheelchair use and was blocked from the outside by patio furniture making it unusable in the event of a fire.
- A visual inspection of the building noted a significant number of the fire doors were ill-fitting or unable to close automatically and not suitably maintained. This would allow the rapid spread of smoke and fire. This had not been identified and addressed by the provider's safety checks.

This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008


(Regulated Activities) Regulations 2014.

#### Inspected but not rated

# Is the service effective?

# Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as Inadequate. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about. We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to check if people were safe from the risk of fire.

Staff support: induction, training, skills and experience

- Training for staff in fire safety and evacuation procedures was inadequate. People were not safe in the event of a fire or a fire alarm sounding at Morvern Care Centre.
- Staff told us they had received basic fire safety training, however had not participated in fire drills.
- 18 people whose bedrooms were on the upper floors were dependent on the use of a wheelchair. There was no evacuation equipment to safely evacuate people who could not independently mobilise on the stairs. The staff we spoke with were not clear on the arrangements in place and told us they had not received training on or participated in fire drills.

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

• At the time of the inspection the provider had increased staffing levels. This was in response to concerns raised by Lancashire Fire and Rescue Service. The provider's representative was also ensuring that agency staff on duty were given information and instruction on the fire safety arrangements. Fire safety training had been arranged for all staff immediately following the inspection visit.

#### Inspected but not rated

### Is the service well-led?

# Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as Inadequate. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about. We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to check if people were safe from the risk of fire.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements.

- This inspection identified substantial and widespread failings in respect of fire safety arrangements and in the governance of the service to prevent, identify or address these shortfalls. This posed serious risk to life.
- The registered provider did not fully understand their legal obligations and regulatory responsibilities. Concerns we identified during the inspection had not been identified by the registered manager or the registered provider.
- Organisational policies and procedures were not up to date with relevant legal requirements and best practice guidance. The Morvern Care Centre Fire Safety Policy was dated January 2013. The policy was not current and did not reflect existing arrangements at the home.
- The audit system was not effective. Audits which had taken place had failed to identify the significant and widespread concerns we found. This included systems in place for the management of fire safety at the home and staff training on the action to be taken in the event of a fire or a fire alarm sounding.

This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

• The provider's representative was present at the home during our visit and worked positively with the authorities to address our concerns during and after the inspection.

### This section is primarily information for the provider

# **Enforcement actions**

The table below shows where regulations were not being met and we have taken enforcement action.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment
	Risks to the health and safety of service users from fire had not been appropriately assessed. The registered provider had not done all that was reasonably practicable to mitigate the risks. The premises and equipment were not safe for their intended use, to manage the risk of fire. Staff had not been provided with appropriate information and instruction to manage the risk of fire safely.
	Regulation 12 (1)(2)(a)(b)(c)(d)(e)

#### The enforcement action we took:

We served an Urgent notice to suspend the provider's registration in respect of a regulated activity

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 17 HSCA RA Regulations 2014 Good governance
	Systems to assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and other who may be at risk from fire.
	Regulation 17 (1)(2)(b)

#### The enforcement action we took:

We served an Urgent notice to suspend the provider's registration in respect of a regulated activity