

St Josephs Rest Home

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Inspection report

16-18 The Drive, Ilford, IG1 3HT
Tel: 02085183004

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Ratings

Overall rating for this service

Good



Is the service safe?

Requires improvement



Overall summary

This inspection took place on 20 May 2015 and was unannounced. At the last inspection on 11 February 2015 we found the service to be breaching regulations as staff were not adhering to fire regulations. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach.

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

St Josephs Rest home is registered to provide accommodation and support for twenty six people who require nursing or personal care, some of whom have dementia.

There is a registered manager in place. 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 had taken sufficient action to keep people, visitors and staff safe. We saw that fire doors were either closed or held by a device that would release and the door would close by itself in the event of a fire.

Summary of findings

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. We found the provider had taken appropriate action to ensure staff adhered to fire regulations. We saw fire doors were either closed or held by a device that would release and the door would close by itself in the event of a fire.

Requires improvement



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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, and to provide a rating for the service under the Care Act 2014.

This inspection was undertaken to check that the provider had made improvements to meet legal requirements after our 11 February 2015 inspection. 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 the safety of people, visitors and staff previously.

This inspection took place on 20 May 2015 and was unannounced. It was undertaken by an inspector.

Before our inspection we reviewed information we held about the service and the provider such as the action plan the provider submitted setting out how they would become compliant with the breach identified at the previous inspection.

During the inspection we observed how staff interacted with the people who used the service. We spoke with two people using the service, the director, the registered manager, the deputy manager and two staff. We looked at records relating to the management of fire safety the service and also had a tour of the premises to check on fire doors. We also looked at staff fire training records.

Is the service safe?

Our findings

At the last inspection we found a breach of the regulation in relation to the safety of the premises. During a tour of the service on 11 February 2015 we noted that a number of bedroom doors were being propped open by different objects and others were not closing fully, which could impact on the safety of people who were living there in the event of a fire. This was discussed with the registered manager and they told us that this would look into it and would ensure staff adhered to the fire safety regulations.

During this visit we found the provider had taken appropriate action to ensure they adhered to fire regulations. We saw fire doors were either closed or held by a device that would release and the door would close by itself in the event of a fire.

The registered manager informed us there was a regular check carried out to ensure there were no breaches in fire safety. Staff had been reminded of their responsibilities during a staff meeting which was held just after our last visit to the service. We saw the minutes of the meeting where it was discussed.

From the records we sampled we noted the provider carried out checks on all aspects of fire equipment including extinguishers, emergency lighting, alarms and detectors. There was a fire risk assessment for the service. The service had a system to ensure all fire equipment was maintained and serviced. We saw that all the fire exits were clear from obstructions.

People we met during our visit commented they felt safe living at the service. Staff were aware of how to keep people safe in the event of a fire and were able to describe to us the actions they would take.

The registered manager informed us that more devices had been ordered to install on all bedroom doors and the work was going to be completed soon. However all people who wanted to have their doors held open, had had the device installed on their doors.

Although our main focus of this inspection was to check on fire safety, we observed staff interacting with people who used the service in a calm and relaxed manner. Staff responded quickly to people's requests and spoke in a respectful manner. One person said, "Oh yes I feel safe here and the staff are very good to me." Another person told us, "The staff are fantastic."