

St Philips Care Limited

Bowburn Care Centre

Inspection report

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Overall summary

We undertook this unannounced focused inspection on the 15 January 2016 in response to a statutory notification submitted by the registered manager informing us about the temporary disruption to the provision of heating and hot water to the service dated 30 December 2015. This report only covers our findings in relation to the notification. You can read the report from our last inspection, by selecting the 'all reports' link for Bowburn Care Centre on our website at www.cqc.org.uk

Bowburn Care Centre provides accommodation and personal care for up to 80 older people. The home is set in its own grounds in a residential area near to public transport routes, shops and local facilities. On the day of our inspection there were 57 people using the service. Accommodation is provided across two levels within four units. Facilities included several lounges, dining rooms and kitchenettes, a hair salon and an enclosed garden area.

The home had a registered manager in place. A registered manager is a person who has registered with 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.

We saw the registered provider had taken measures to ensure people were provided with safe care and treatment during the temporary loss of heating and hot water to the premises.

People who used the service and their relatives were complimentary about the standard of care at Bowburn Care Centre.

There were sufficient numbers of staff on duty in order to meet the needs of people using the service.

Risk assessments were in place for people and staff.

The registered provider had a Business Continuity Plan in place and all the people who used the service had a Personal Emergency Evacuation Plan.

The registered provider had a quality assurance system in place.

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?

We found the service was safe.

The registered provider had procedures in place for managing the maintenance of the premises.

Risk assessments were in place for people and staff.

The registered provider had a Business Continuity Plan in place and all the people who used the service had a Personal Emergency Evacuation Plan.

Is the service effective?

Is the service caring?

Is the service responsive?

Is the service well-led?

We found that the service was well-led.

People using the service, their relatives, visitors and stakeholders were kept informed about the incident and the remedial action taken.

The provider had a robust quality assurance system in place.



Bowburn Care Centre

Detailed findings

Background to this inspection

We carried out this focused inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection 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.

This inspection was undertaken by two adult social care inspectors on 15 January 2016 and was unannounced. We inspected the service against two of the five questions we ask about services: is the service safe and well-led.

Before we visited the home we checked the information we held about this location and the service provider, for

example, inspection history, safeguarding notifications and enquiries raised. We also contacted professionals involved in caring for people who used the service, including commissioners and safeguarding staff.

During our inspection we spoke with two people who used the service and one relative. We also spoke with the registered manager, deputy manager, estates manager, four care staff, two domestics, one laundry staff member and a cook.

We observed how people were being cared for and looked at records relating to the management of the service such as risk assessments, action plans, policies and emergency procedures.

Is the service safe?

Our findings

The people who used the service and a relative we spoke with told us, "It was cold over the weekend but they did the best they could", "The handyman was running around all over the place", "Oh yes, they were safe. No concerns about that" and "It's just one of those things. Staff did a good job". A member of staff told us, "The maintenance man was wonderful. He wouldn't leave until he knew everyone was safe. It was two or three in the morning."

We found that the heating system at Bowburn Care Centre had been serviced in September 2015 and had passed the annual gas landlord certificate inspection with no recommendations or requirements. We discussed the incident with the registered manager, the estates manager and the deputy manager. The estates manager told us that there had been no major problems with the heating system prior to the incident on 29 December 2015. The registered manager described the incident which had resulted in a temporary loss of heating and hot water to the service and the remedial actions taken between 29 December 2015 and 13 January 2016.

The registered manager told us how they had immediately reported the incident to their estates department and notified the local authority and CQC. The estates manager told us that the incident had been compounded by "Unreliable contractors" and acknowledged that a temporary replacement boiler could have been sourced sooner. We found portable electric heating appliances were sourced and emergency contingency plans were put in place to keep people safe, warm and comfortable which included providing people with additional quilts, blankets

and hot drinks. The staff we spoke with told us, "Everyone got a wash and had clean clothes every day, even if they couldn't have a bath" and "The corridors were very warm and people had heaters and extra blankets in their rooms."

We discussed staffing levels with the registered manager and looked at staff rotas. The registered manager told us that the levels of staff provided were based on the dependency needs of residents and that during the incident an additional five members of staff had been brought in to provide additional care and support where necessary. The staff we spoke with told us, "Everyone chipped in. Everyone was safe and well looked after" and "People were very safe. Everyone was well looked after. Extra staff came in. We all pulled together." We observed sufficient numbers of staff on duty.

The service had generic risk assessments in place, which contained detailed information on particular hazards and how to manage risks. Examples of these risk assessments included the lack of heating and hot water and safe access to the boiler room. Room temperature checks had been carried out every two hours and were maintained at a comfortable 21 degrees. The registered manager told us how they had liaised with the local fire safety officer on 11 January 2016 for advice regarding the onsite diesel tank and contacted GP's and the district nursing team to review the impact of the incident on the most vulnerable people. This meant the service had arrangements in place to protect people from harm or unsafe care.

We looked at the provider's Business Continuity Plan and saw all the people who used the service had a Personal Emergency Evacuation Plan in place. This described the emergency evacuation procedure for the home and for each person who used the service.

Is the service effective?

Our findings

Is the service caring?

Our findings

Is the service responsive?

Our findings

Is the service well-led?

Our findings

At the time of our inspection visit, the home had a registered manager in place. A registered manager is a person who has registered with CQC to manage the service. The manager had been registered with CQC since 1 October 2010. The staff we spoke with told us, "The management have been great. [Name], [Name], were always here. It's reassuring" and "They [Management] did the best they could."

We saw that on the 13 January 2016, the registered manager and the deputy manager had informed the people who used the service and their relatives that a meeting would be held on 14 January 2016 to inform people about the incident and the remedial actions taken. The registered manager had provided a progress update about the incident and apologised for the inconvenience caused. Minutes of the meeting were to be posted to all relatives unable to attend. The registered manager told us that people and their relatives were very understanding about the incident. The staff we spoke with told us, "Everyone pulled together" and "Considering what we've been through I don't think we've done too bad."

We saw people who used the service had access to healthcare services and received ongoing healthcare support during the incident. Care records contained evidence of visits from external specialists including GPs, community district nursing and tissue viability nursing. This meant the service ensured people's wider healthcare needs were being met through partnership working.

We looked at what the provider did to check the quality of the service as a result of the incident. The registered manager and estates manager told us that they were in the process of completing a root cause analysis of the incident. The lessons to be learnt identified the need for improved lines of internal and external communication, a review of maintenance/repair contractors, the accessibility/ availability of external boilers and a review of the provision of hot water in the event of a boiler failure including exploring the possibility of providing an electric shower on each unit along with stored hot water with an electric immersion heater.

The estates manager told us that remedial works to the existing heating system would be carried out in a planned and controlled method to ensure there would be no further interruption to supplies and to ensure the needs of residents could be met. The temporary boiler and portable electric heaters would remain on site until the home's boilers were repaired, fully operational and had been completely tested. The estates manager described how there would be a full review of the whole heating and hot water system commissioned to take place from the 18 January 2016. Any recommended actions from the review would be actioned as necessary by the registered provider's estates department. The registered provider's care managing director had also requested a protocol be designed to ensure continuous progress reports would immediately be available to identify factors that may impact on projects such as these.