

St Martin Of Tours Housing Association Limited St Martins of Tours Housing - 158-162 New North Road

Inspection report

158-162 New North Road London N1 7BH

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Ratings	
Overall rating for this service	Good •
Is the service safe?	Good
Is the service well-led?	Good •

Summary of findings

Overall summary

About the service

St Martins of Tours Housing -158-162 New North Road Is a residential care home providing support to people living with enduring mental health difficulties and a history of illegal substance and / or alcohol abuse issues. There were fifteen rooms for people situated across three floors. There were eleven people using the service at the time of this inspection.

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

A person who spoke with us told us that the service was much improved. They had used this service before and since returning they felt it was a very different place to live, they felt much safer and thought their recovery would be greatly helped by this.

Much had improved at the service over the last two years. Oversight and management was thorough and there was transparency in sharing information with people using the service and stakeholders.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was Unrated (Published 04/11/2020) but previously had been rated as Requires Improvement. At this inspection the rating has changed to Good.

Why we inspected

This inspection was prompted by a review of the information we held about this service to verify if improvements had been made. We also looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively. This included checking the provider was meeting COVID-19 vaccination requirements.

The overall rating for the service has changed from Requires Improvement to Good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for St Martins of Tours Housing - 158-162 New North Road on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we nex inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led.	Good



St Martins of Tours Housing - 158-162 New North Road

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This included checking the provider was meeting COVID-19 vaccination requirements. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was carried out by a single inspector.

St Martins of Tours Housing - 158-162 New North Road is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. St Martins of Tours Housing 158-162 New North Road is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR) in May 2021. This is information providers are required to send us annually with key information about their service, what they

do well, and improvements they plan to make.

We also looked at other information that we had received, such as notifications which the provider is required to submit if particular events occur.

During the inspection-

We spoke with one person using the service, the deputy manager, registered manager and director of operations.

We reviewed a range of records. This included four people's risk assessments as well as four people's medicines records as well as other audit and assessment information covering the day to day operation and monitoring of the service.

After the inspection

We continued to seek clarification from the provider to validate evidence found.



Is the service safe?

Our findings

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

At our last inspection we rated this key question Unrated, but previously had been rated as Requires Improvement. At this inspection the rating has changed to Good.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- At our previous inspection we had found that the provider's safeguarding policies and procedures were operating more effectively as concerns that arose about potential harm were more consistently being reported.
- During this inspection, and our review of information that CQC had received prior to this inspection, the safety of people using the service had continued to improve. Incidents, including those that needed to be raised as potential safeguarding concerns were being reported and the level of incidents had continued to decline in both number and severity.

Preventing and controlling

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

The provider was facilitating visits to people living at the home.

Care homes (Vaccinations as Condition of Deployment)

The Government has announced its intention to change the legal requirement for vaccination in care homes, but the service was meeting the current requirement to ensure non-exempt staff and visiting professionals were vaccinated against COVID-19.

Assessing risk, safety monitoring and management

- The service assessed the potential risks that people faced and responded to risks that were identified and that emerged as people's needs changed.
- Risk assessments covered a range of different areas that included general common risks, for example how safe people were if they were at risk in the community from other people, as well as risk assessments tailored to each person's day to day care and support needs. Person centred guidelines were in place for staff to follow. The premises were also checked to ensure they were fire safe and that equipment and facilities were safe to use, records we viewed showed that was the case.

Staffing and recruitment

- We looked at Disclosure and Barring Service (DBS) checks which provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions and the provider was carrying out these checks.
- We spoke with a member of staff who had been recruited a few months prior to this inspection. They told us about their induction and how they had been supported to settle into working at the home and understanding the way the service supports people.

Using medicines safely

- People who used the service received their medicines safely. However, there had been two very recent errors which were the result of staff not following the clear instructions for providing particular medicines. This had been quickly identified by the service, people's safety had been assured and action was taken regarding the staff responsible for the errors.
- At this inspection we viewed four medicines administration records (MARs) and found that these had been completed correctly and reflected the medicines stocked for people in the home. Some people had medicines prescribed as required (PRN). People had appropriate PRN protocols and medicines administered had been recorded on the MARs record.
- The service ensured that medicines was audited and monitored to ensure shortfalls were responded to. As a result of the medicines errors referred to above a daily handover check of medicines had been introduced as a further safety measure.

Learning lessons when things go wrong

- Systems were in place to monitor and review any incidents, near misses or other welfare concerns to ensure that people were safe. Since concerns were raised in mid 2019 much had been done to improved and embed the lesson's that had been learnt.
- People's risk assessments and care plans were updated at regular intervals, or more frequently if there were any concerns arising from an incident or identified changes to people's care and support needs.



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 our last inspection we rated this key question as Unrated, but previously had been rated as Requires Improvement. At this inspection the rating has changed to Good.

This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Joint communal meetings with people using the service took place, although on this occasion we did not look in detail at the minutes of these meetings.
- The members of the management team we spoke with were confident about the way in which engagement with people had improved. They aimed to take people with them to not only make changes but see this as something that everyone was involved with, whether using the service or working here.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong. Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

• There were quality systems in place which monitored care planning, risk assessments, medicines and other day to day areas of operation of the home. The quality monitoring checks had improved markedly and further changes were taking place, a recent example being a care planning and risk assessment database that streamline how this was achieved. We consider that the provider's quality monitoring systems were effectively assessing, monitoring and mitigating these risks.

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

• The registered manager, and more recently recruited deputy manager, were clear about their roles and responsibilities. They demonstrated an understanding of how they should work together to achieve positive outcomes for people using the service as well as everyone working there. They also understood the lines of reporting within the home and provider organisation.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The provider had clear expectations, shared with people using the service and staff, about all people having the right to be treated with dignity and respect and be free from discrimination.
- People's equality and diversity needs were understood by the service and supported. Details of these were reflected in people's support plans with guidance provided for staff to follow to meet those needs. This included the disproportionate risks that the COVID-19 pandemic posed for people of black, Asian or other

ethnic minority communities.

Continuous learning and improving care

- The senior management team members we spoke with told us about how changes made at the service over the last eighteen months to meet the challenges that the service was presented with. These challenges revolved around supported people with often long-term histories of drug and alcohol misuse and improving how people were supported in managing these issues as well as their enduring mental health support needs.
- Checks were carried out daily and weekly in areas such as medicine stocks, care documentation and maintenance of the building. Audits were taking place and included areas such as complaints, incidents, health and safety and staffing arrangements. Following these audits, action had been taken to rectify any deficiencies noted. We were encouraged by the amount and depth of the work that had been undertaken and the success that was being achieved in positively improving the service.

Working in partnership with others

- Staff and management reported concerns in a timely manner, including local authority safeguarding teams and CQC. This had previously been haphazard and inconsistent, however, information we reviewed showed that this had significantly improved.
- Care records showed that the service liaised with community health and social care professionals regularly and the ways in which this occurred were increasingly effective. Much had been done to address previous concerns about how diligently the provider had considered the suitability of the service for potential service users.