

The Frances Taylor Foundation

St Mary's Home

Inspection report

High Street Roehampton London SW15 4HJ

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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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

St Mary's Home is a residential care home consisting of seven living areas or flats, which can support up to 40 people. The service was providing personal care to 35 people at the time of the inspection.

People's experience of using this service and what we found Right Support – Effective risk management plans were now in place. Risk assessments were updated and clear guidelines in place to guide staff as to how to support people.

The numbers and skills of staff matched the needs of people using the service. Staff recruitment and induction training processes promoted safety, including those for agency staff. Staff knew how to take into account people's individual needs, wishes and goals. People continued to be supported by staff who followed systems and processes to prescribe, administer, record and store medicines safely.

Right Care - People received kind and compassionate care from staff who used positive, respectful language which people understood and responded well to. Staff knew people well and interacted positively with them.

Staff helped people to have freedom of choice and control over what they did. People were supported to participate in their chosen social and leisure interests on a regular basis.

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.

Right culture – Governance processes were effective in ensuring records management was consistent to keep people safe, protect people's rights and provide good quality care and support. Important incidents were now being reported to the Care Quality Commission.

The provider sought feedback from people and those important to them and used the feedback to develop the service.

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 Requires Improvement (published 25 July 2022).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

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 Mary's Home

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 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 1 inspector.

Service and service type

St Mary's Home 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 Mary's Home is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

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). 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 used all this information to plan our inspection.

During the inspection

We spoke with 7 people. Some people could not speak with us and tell us of their experiences verbally, so we observed their interactions with staff. We spoke with 3 members of staff including the deputy manager. We also received written feedback from 4 external healthcare professionals via email.

We reviewed a range of records. This included 3 people's care records and 3 medicines records. We looked at 3 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at quality assurance records.



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 requires improvement. The rating for this key question has changed to good.

This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection we found the provider had failed to robustly assess the risks relating to the health safety and welfare of people.

- At this inspection, we found that people were now being protected against the risk of harm from identified risks. For example, we found that appropriate action had been taken to report a recent incident, review care documentation including risk assessments and update guidance for staff.
- Staff were aware of the procedures to follow to keep people safe when faced with identified risks. For example, where a person required careful monitoring when eating, new guidance for staff had been issued and appropriate referrals made for further input from external healthcare professionals.
- The care and support for each person was kept under review. Care documentation seen included prompts for staff to ensure risk assessments were up to date following 1-1 meetings and reviews.

Systems and processes to safeguard people from the risk of abuse

- Safeguarding concerns continued to be appropriately referred to the local authority and internal investigations reviewed any incidents as appropriate.
- Staff received mandatory training around their role and responsibilities in identifying, reporting and escalating instances of suspected abuse.
- A relative told us, "The staff are wonderful, and the quality of care has been always been excellent. We are very happy that our relative is living at St Mary's Home and they are very happy living there."
- External healthcare professionals told us the service reported any incidents or allegations involving their clients promptly and worked well with them to make sure people remained safe. One professional commented there had been "Regular visits from different professionals involved and none of them had raised any concerns about the home."

Staffing and recruitment

- People continued to receive care and support from suitable numbers of staff to keep them safe.
- Records showed there were adequate numbers of staff deployed throughout the day to ensure people's needs were met.
- Staff were safely recruited. This included obtaining their employment history, suitable references and a Disclosure and Barring Service (DBS) check. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make

safer recruitment decisions.

Using medicines safely

- Medicines were managed and administered safely.
- People's MAR were correctly completed and clearly showed that people received their medicines at the times that they needed them.

Preventing and controlling infection

- 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.

The provider had robust systems in place to ensure visitors to the home had taken the necessary precautions to ensure COVID-19 was not bought into the service.

Learning lessons when things go wrong

- The registered manager implemented changes to ensure lessons were learned when things went wrong.
- Summary records were kept of all incident occurrences which recorded a description of the incident and an overview of any actions taken.



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 requires improvement. At this inspection the rating has changed to good.

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

At our last inspection we identified a breach of Regulation 17 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The provider had failed to ensure that governance systems were effective in ensuring records were maintained and up to date. Important events were not always being notified to the Care Quality Commission.

Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 17.

- The service carried out regular audits to drive improvements. Additional quality and safety checks had been introduced following our last inspection.
- The registered manager knew to send statutory notifications to the CQC in line with legislation. Our records showed that regulatory requirements were now being met.
- Risk assessment records were now being updated in a timely manner to accurately reflect the support staff needed to minimise potential risks.

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

- People, their relatives and external healthcare professionals spoke positively about the registered manager and her staff team.
- An external healthcare professional told us, "Staff at St Marys go above and beyond to provide the best care and support for our clients there. I often compare other residential homes to St Marys as I hold them up as a gold standard for learning disability clients with health needs." Another professional commented, "I find the management team very communicative, responsive, open, and transparent."

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

• The registered manager understood the importance of identifying and reflecting when things went wrong, as well as apologising when mistakes were made.

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

• People and staff's views continued to be sought through keyworker meetings, annual questionnaires,

house meetings, supervisions and handovers.

Continuous learning and improving care; Working in partnership with others

- The provider worked alongside other agencies to meet people's presenting needs. This included learning disability teams, local authorities and other healthcare teams to provide continuity of care.
- People, their relatives and staff were consulted on their views and how care could be improved. Records showed that where feedback was received action plans were developed to ensure accountability for improvements in care.