

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	Inspected but not rated
Is the service safe?	Inspected but not rated
Is the service well-led?	Inspected but not rated

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 men living with enduring mental health difficulties and a history of illegal substance and / or alcohol abuse issues. There were eighteen rooms for people situated across three floors, although we were informed by the registered manager that the service was looking to reducing their maximum total occupancy to 15 people in the near future. There were eleven people using the service at the time of this inspection.

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

Rating at last inspection:

The last rating for this service was requires improvement (published 28 November 2019).

We have not awarded a rating to the service on this occasion.

Why we inspected:

We undertook this targeted inspection to check whether previous concerns about responding to people's safety, not least around drug use and anti-social behaviour were being addressed. There had also been concern about management not always reporting to commissioning and regulatory professionals in a timely manner. There were no breaches of regulations reported as a result of the previous comprehensive inspection although due to the concerns we wanted to check if the oversight and performance of the service had improved.

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. We found no evidence during this inspection that people were at risk of harm from these concerns.

Please see the safe section of this full report.

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. If we receive any concerning information we may 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?	Inspected but not rated
At our last inspection we rated this key question requires improvement. 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 requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question,	



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

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check on progress to emerging concerns about responses to drug use, anti-social behaviour and lack of reporting to commissioning agencies and CQC about incidents and emerging concerns.

Inspection team

The inspection team comprised of a single inspector.

Service and service type

St Martins of Tours Housing - 158-162 New North Road is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The home had a manager registered with the Care Quality Commission. A registered manager 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.

Notice of inspection:

We gave the service 24 hours' notice of the inspection visit to ensure suitable arrangements could be made during our visit in relation to COVID-19 safety measures. We also wanted to ensure arrangements were in place to speak with people using the service if they wished to speak with us.

What we did before the inspection:

We reviewed information we had received about the service since the last inspection. This information included feedback from the local authority responsible for commissioning almost all placements with the service and who had, until recently, monitored the service under a provider of concern process. We used this

information to plan our inspection.

During the inspection:

We spoke with 1 person who used the service who had taken up our invitation to speak with us. We also spoke with the registered manager and a team leader.

We reviewed specific records which included five care plans, risk assessments and complaints. We also looked at infection control and COVID 19 pandemic response. Additionally, we looked at safeguarding people from abuse as well as progress on the comprehensive improvement action plan since our previous inspection.

After the inspection:

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

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 requires improvement. We have not given a new rating for this key question, as we have only looked at the part of the key question, we had specific concerns about.

The purpose of this inspection was to check if the risks relating to the use of illegal substances and management of anti-social behaviour had been recognised and responded to.

Assessing risk, safety monitoring and management

- At our previous inspection we had identified that measures to reduce the risks associated with alcohol and illegal substance misuse were not effectively implemented for some people. In addition, there were regular instances of anti-social behaviour.
- We recommended at our previous inspection that the service provider review the risk prevention strategies to assess their effectiveness. We looked at the risk assessments for five people and found that these had undergone a significant amount of development. Risk assessments were thorough and potential risks that people faced whether by their addiction issues or by displayed behaviour were identified.
- People met regularly with a designated member of staff (a key worker). Records of people's key work meetings showed that they were encouraged to attend meetings with the provider's drugs worker and other rehabilitation services as required. The frequency of these individual meetings had increased and there was clear evidence of how issues of addiction were addressed.
- A person using the service told us that in the years that they have lived at the home they had not known things to be as calm and relaxed as they were right now. The person told us about their experience of feeling anxious and afraid of some former house mate's behaviours but now felt at ease with the people they lived with and the staff who supported them.

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 not operating effectively.. Concerns that arose about potential harm were not consistently reported to the authorities that needed to be informed, including CQC.
- This was not the situation now and both during this inspection, and our review of information that CQC had received prior to this inspection, the safety of people using the service had notably improved. Incidents, including those that needed to be raised as potential safeguarding concerns were being reported and the level of incidents was declining.

Preventing and controlling infection

• We were assured that the provider was taking steps to minimise the risk of people visisting the home. This was visiting professionals at the moment and the steps taken were to address catching or spreading infections and the of social distancing protocols. People's family and friends were not visiting at the moment.

- Staff took our temperature on arrival and asked that we wash our hands and use hand sanitiser before proceeding further into the building, which we did.
- There were policies and procedures to minimise and control infection. The premises were clean and free from odour. During our inspection we saw that the communal areas of the home were regularly cleaned.
- Staff followed effective infection control procedures. We confirmed with a local infection control healthcare professional that the service had liaised with them well. Appropriate infection control guidelines had been established that were suitable for a service of this type. People had been provided with advice and were reminded of what steps they could take to minimise personal risk of contracting the virus.
- A person using the service told us about what they were doing personally to minimise risk when they were out in the community and felt safe from infection when at home.
- Where people bought and cooked their own food as part of their plans to achieve independence, they were provided with lockable fridges and cupboards in which to store personal food items. When we looked at some of these during our previous inspection, we found that people had not always stored food safely. However, much had been done to improve cleanliness and hygiene in kitchens and shared areas along with a refurbishment programme that was currently underway.
- We were informed by the registered manager that staff shortages had not been an issue during the initial wave of COVID-19 pandemic.
- We were assured that the provider was making sure infection outbreaks could be effectively prevented or managed.

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 requires improvement. We have not given a new rating for this key question, as we have only looked at the part of the key question, we had specific concerns about.

The purpose of this targeted inspection was to look at the provider's internal and senior management arrangements for oversight and governance of the service.

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

- At our previous inspection the quality monitoring checks had not fully addressed the anti-social behaviour and risks presented to people using the service. There were room checks, community safety meetings and input from the provider's drugs worker. Our judgement at the previous inspection was that these processes were looking only at the consequences that had arisen from the risks rather than the root causes. This had improved since that time.
- After our previous inspection the provider had been subject to a provider concern process initiated by the local authority. This process required the provider to outline and achieve a quality improvement programme.
- We were supplied with the most recent update of the improvement programme, almost all of which had been fully completed. This had meant that the local authority had removed the service from the provider concerns process and lifted the restriction on new placements that had been in place.
- The provider's quality monitoring systems were now effectively assessing, monitoring and mitigating the risks presented to people using the service and others. Further, the provider's systems and engagement with partner agencies were now transparent and information was shared openly.
- The registered manager had been appointed shortly before our previous comprehensive inspection that had taken place in June, July and August 2019. Our conversations with this person demonstrated that they had a sound understanding of the issues that had previously arisen and the need for improvement. They also told us that the organisational senior management changes that had been made by the provider were leading to a significant improvement to the service. This, they said, was most notable in terms of freedom to speak up about their experiences at the home and both people using the service and staff were encouraged and supported in being partners in making positive change.
- The Covid 19 pandemic had been an enormous challenge for everyone living and working at the home. The provider had supported everyone during this period and continued to do so. We noted the staff team had worked very hard to encourage and support people using the service to take responsibility and act reasonably in playing their part to minimise risks to themselves and others during the first wave of the pandemic.

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

characteristics

- Risk assessments for black and minority ethnic clients and staff had been completed and a service wide plan and guidance had been developed to address these considerations during the pandemic.
- People's equality and diversity needs were understood by the service and were supported. The provider and staff team were very familiar with working with people who came from widely diverse race and cultural heritage. The experiences of people with different histories of living with enduring mental health support needs was recognised and acknowledged. Details of these experiences were reflected in people's support plans with guidance provided for staff about recognising and meeting those needs.