

SummerCare Limited

SummerLodge

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

We inspected Summer Lodge on the 13 February 2017.

The service provides accommodation and support for up to six people with learning disabilities. There were five people living at the service at the time of our inspection. Due to their complex needs people found it difficult to communicate with us verbally. However people were able to communicate with sounds and gestures.

At our last inspection the service was rated as Good. At this inspection we found the service remained Good.

The service was safe. Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare. People were cared for safely by staff who had been recruited and employed after appropriate checks had been completed. People's needs were met by sufficient numbers of staff. Medication was dispensed by staff who had received training to do so.

The service was effective. People were cared for and supported by staff who had received training to support people to meet their needs. The registered manager had a good understanding of their responsibilities in relation to the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards. People were supported to eat and drink enough as to ensure they maintained a balanced diet and referrals to other health professionals were made when required.

The service was caring. Staff cared for people in an empathetic and kind manner. Staff had a good understanding of people's preferences of care. Staff always worked hard to promote people's independence through encouraging and supporting people to make informed choices.

The service was responsive. People and their relatives were involved in the planning and review of their care. Care plans were reviewed on a regular basis and also when there was a change in care needs. People were supported to follow their interests and participate in social activities. The registered manager responded to complaints received in a timely manner.

The service was well-led. The service had systems in place to monitor and provide good care and these were reviewed on a regular basis.

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 remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

SummerLodge

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 took place on the 13 February 2017 and was unannounced. The inspection was carried out by one inspector.

Before the inspection, we reviewed previous reports and notifications that are held on the CQC database. Notifications are important events that the service has to let the CQC know about by law. We reviewed the Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed safeguarding alerts and information received from a local authority.

During the inspection we used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

During our inspection we spoke with three people, the registered manager and two care workers. We reviewed two care files, two staff recruitment files and their support records, audits and policies held at the service.

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Is the service safe?

Our findings

At this inspection we found the same level of protection from abuse, harm and risks as at the previous inspection and the rating continues to be good.

Staff knew how to keep people safe and protect them from safeguarding concerns. Staff were trained and able to identify how people may be at risk of harm or abuse and what they could do to protect them. In addition staff were aware that the service had a safeguarding policy to follow and a 'whistle-blowing' policy. One member of staff said, "It is my job to keep people safe from harm and look after them. I know them all very well and I would know if anything was wrong from their behaviour or body language." Another member of staff said, "I know how to report concerns and would go through my manager or head office." The registered manager clearly displayed information for staff to follow if they suspected abuse, including contacting the local council safeguarding team and independent contacts such as 'Ask sal'.

Staff recruited were suitable for the role they were employed for and the provider had a robust process in place. Staff went through a process of having two interviews one held at head office and one held at the service so that people could be involved in meeting potential new carers. This also gave the manager an opportunity to see how potential new staff interacted with people. Files contained records of interviews, appropriate references, full employment histories, and Disclosure and Barring Service (DBS) checks. This check ensured staff were suitable to work with vulnerable people.

Staff had the information they needed to support people safely. Staff undertook risk assessments to keep people safe. These assessments identified how people could be supported to maintain their independence. The assessment covered access to the kitchen and using appliances, road safety, managing money, environmental risks and challenging behaviour. Risk management processes were intended to enable people to continue to enjoy things that they wanted to do rather than being restrictive. Staff demonstrated a good awareness of areas of risk for individuals and told us how people were supported to manage the risks. Staff were trained in first aid and if there was a medical emergency they would call the emergency services. Staff also received training on how to respond to fire alerts at the service.

People were cared for in a safe environment. The registered manager ensured there were regular risk assessments completed of the premises and equipment used and there was an emergency contingency plan in place should there be an event that affected the running of the service. For day to day repairs and refurbishment the registered manager followed the provider's system to request this is done with a rating as to the level of urgency.

The registered manager kept under review the numbers of staff required to support people and adjusted these numbers where necessary. Staff told us that there were enough staff available and we saw that people's needs were attended to promptly. People received care from a consistent staff team. The registered manager did not use any agency at the service and any shortfalls were covered by regular staff.

People received their medication safely and as prescribed. The service had effective systems for the

ordering, booking in, storing and disposing of medicines. Medication administration records were in good order. Medication was stored safely and securely. Senior staff who had received training in medication administration dispensed the medication to people. The registered manager observed staff practice regularly when administering medication to ensure they maintained their standards.

Is the service effective?

Our findings

At this inspection, we found staff had the same level of skill, experience and support to enable them to meet people's needs effectively, as we found at our previous inspection. People continued to have freedom of choice and were supported with their dietary and health needs. The rating continues to be good.

The registered manager told us that the provider monitored staff training to ensure they had the skills to perform their role. Where additional training was required the registered manager had sourced this for staff for example 'stoma care'. Staff told us that they had been supported to achieve nationally recognised qualifications. In addition staff said that they had regular opportunities to reflect on their practice and to discuss the running of the service during staff meetings and supervision sessions.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

Staff knew how to support people in making decisions and how people's ability to make informed decisions can change and fluctuate from time to time. The service took the required action to protect people's rights and ensure people received the care and support they needed. Staff had received training in MCA and DoLS, and had a good understanding of the Act. Appropriate applications had been made to the local authority for DoLS assessments. We saw assessments of people's capacity in care records this told us people's rights were being protected.

People had enough to eat and drink. Staff prepared food for people or assisted them in making their own food. Each week staff discussed with people what foods they would like to have and planned menus. Where appropriate pictures were used to help people express what they wanted. Throughout the day we saw people had access to food and drinks as they wished. Staff told us that people made their own choices about what they wanted to eat so that not everyone had to eat the same meal if they wished to have something different. We observed a lunchtime and saw people deciding what they would like to eat and assisting staff in making the food.

People had access to healthcare professionals as required and we saw this recorded in people's care records. We noted people were supported to attend any hospital appointments as scheduled. People had health action plans in place describing how to keep them healthy and what support they needed. When required people received specialist support and review from mental health professionals and their GP.

Is the service caring?

Our findings

At this inspection people remained happy living at the service, they continued to be very complimentary of the staff and felt cared for. The rating continues to be good.

During our observations we saw staff had positive interactions with people. We saw staff talking to people in a kind and gentle way and people smiling in response to this. Staff knew people well and how best to communicate with them. Some people communicated using sign language that had been adapted for their understanding. Staff knew all the different signs people used and what each adapted sign meant. Staff told us that some people preferred to communicate using single words or noises and that they knew what each of these meant. From records we reviewed we saw there were clear instructions for staff to follow on how to communicate with people and also an explanation for staff of what different noises a person made meant. The atmosphere was relaxed and friendly between staff and people. We saw that people actively sought the company of staff. One member of staff said, "(Person name) likes to spend time with us and we tell them what we are doing, this seems to help them stay relaxed."

Staff knew people well, including their life histories and their preferences for care. Each person was allocated a key worker to help support them on a day to day basis and to ensure all their needs were being met. The registered manager told us that the care plans were regularly reviewed and where appropriate these were discussed with people's relatives, advocates and social workers.

Staff treated people with dignity and respect and supported them in spending their time in the way they chose. Staff encouraged people to be as independent as possible whilst supporting them with their preferences on how they wished to spend their time. One member of staff said, "We encourage people to independent even if it is in small ways like turning on the washing machine or helping to make their bed."

Staff knew people needed privacy and respected this when they wished to spend time on their own, however when assisting with personal care staff said they always made sure bathroom doors were shut and bedroom curtains closed. People were supported and encouraged to maintain relationships with their friends and family, this included supporting trips home and into the community. People's diverse needs were also supported and if people wanted to access religious support this was also arranged for them.

Is the service responsive?

Our findings

At this inspection we found staff were as responsive to people's needs and concerns as they were during the previous inspection. The rating remains good.

People continued to receive care that was individual and personalised to their needs. The registered manager ensured people had a thorough assessment before they agreed to support people. In addition people and their relatives were encouraged to spend time at the service to see if it was suitable and if they would like to live there. Before people finally came to live at the service there was a gradual increase of time spent there. This included spending days and then having overnight stays. This gradual build up gave people and staff the opportunity to get to know each other to ensure their needs could be met and that they would be happy living there. We saw from minutes of resident meetings that staff discussed with people when new people would be attending the service and encouraged them to befriend and welcome the new person.

The service continued to be responsive to people's changing needs. People's care needs were kept under constant review and adjusted as required. For example, the registered manager had successfully sourced a wheelchair for one person who was now finding it difficult to mobilise in the community. When another person had a health need that the staff had not dealt with before the registered manager ensured all the staff received training so that they had the skills to support the person.

People were encouraged to follow their own interests and hobbies. People were supported to access the local community to attend social and educational activities. Some people attended college and day centres to further develop their independence and life skills. People were supported with social activities of their choice, these included attending local clubs and church groups for social activities.

The service had a robust complaints process in place that was accessible and any complaints were dealt with effectively. The complaints procedure was clearly displayed and available in pictorial format.

Is the service well-led?

Our findings

At this inspection we found staff were as well led as at the previous inspection. The rating remains good.

The service had a registered manager. 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.

The registered manager was very visible within the service, spending a large proportion of their time delivering care and support to people. Staff shared the registered manager's vision for the service. One member of staff told us, "We want people to feel happy and loved and that they belong." Another member of staff said, "We want to promote people's independence."

Staff told us that they found the registered manager very supportive of them. Staff were able to describe to us their role within the service and what their responsibilities were. They told us that they had regular staff meetings with the registered manager to discuss the running of the service and any ideas they may have. Staff told us that they used these meetings to discuss the care people received and to share any learning.

People's opinions were sought within the service, for example when new staff were being recruited people were given the opportunity to meet with them and their feedback was taken into account before new staff were employed. We saw the registered manager held regular meetings with people and sought their opinions on activities. In addition the provider sent out questionnaires to gain feedback on the service.

The registered manager had a number of quality monitoring systems in place to continually review and improve the quality of the service provided to people. They carried out regular audits and this information was used as appropriate to continually improve the care people received.