

Community Integrated Care Summerson House

Inspection report

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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: Summerson House is a residential care home that provides support for up to six people who are living with learning and physical disabilities. At the time of this inspection six people were using the service.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

People's experience of using this service: People looked very comfortable and at home in their surroundings. Staff had worked very closely and sensitively with people to support them manage risk and reduce any distress they experienced.

Staff received a wide range of training around managing risk and ensuring people remained safe. Training included, safeguarding, first aid, fire safety and basic food hygiene. Checks were made on the ongoing competency of staff. Over recent months the provider had worked with staff to ensure policies and procedures around the management of people's monies were consistently applied.

Systems and processes were in place and well monitored so the service was safe and run well. The provider had developed a robust risk assessments framework and the service manager was ensuring staff acted appropriately to mitigate any identified risks.

The provider had worked with staff over the last few months to ensure staff effectively reported any safeguarding matters. The provider had thoroughly investigated any concerns, and resolved these matters. All incidents were critically analysed, lessons were learnt and embedded into practice.

The provider had identified shortfalls in the practices at the service and acted to rectify these and ensure the home was well run. Staff told us the service manager had listened to their views about how to make the service better. The provider had asked their senior managers, human resources staff and quality teams to critically review the service. They had taken on board the findings and acted to ensure measure were put in place to resolve any concerns.

Rating at last inspection: Good (Report published on 23 June 2017).

Why we inspected: This was a focused inspection, completed to review the operation of the service following concerns being raised about how the registered manager ran the home.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received we may inspect sooner.

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 ●

The service was well-led.

Details are in our Well-led findings below.

Summerson House

Detailed findings

Background to this inspection

The 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 checked 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.

Inspection team: One adult social care inspector completed this inspection.

Service and service type: Summerson House is a care home. People in care homes receive accommodation and nursing or personal care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. 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. However, they were on extended leave and service managers were in day-to-day control of the operation of the service.

Notice of inspection: This inspection was unannounced and was completed on 8 January 2019.

What we did: We reviewed information we had received about the service to plan the inspection. This included details about incidents the provider must notify us about, such as abuse; and we sought feedback from the local authority and professionals who work with the service.

We assessed the information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection: We met four people who used the service and observed the interaction between them and their staff team. We also spoke with a service manager, a senior care worker and four support workers who were on duty at the time of our inspection.

We reviewed a range of records. This included people's care and medication records, various records related

to recruitment, staff training and supervision and the management of the service.

Is the service safe?

Our findings

Safe – this means people were protected from abuse and avoidable harm.

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes

- The service manager and provider's management team critically reviewed all aspects of the service and determined where improvements were needed. They had acted to ensure the identified improvements were made and checked these were effective.
- The provider had robust procedures in place to ensure future recruitment was safe.

Assessing risk, safety monitoring and management

- Staff understood where people required support to reduce the risk of avoidable harm. Care plans contained explanations of the control measures for staff to follow to keep people safe. The provider had noted these had not always been well maintained and had acted to rectify this issue.
- The environment and equipment was safe and well maintained. Emergency plans were in place to ensure people were supported during an emergency such as, in the event of a fire.

Staffing levels

- Seven staff worked each day and two staff were on duty overnight. The provider had identified that people who used the service needed additional support overnight and were in the process of recruiting staff to provide this cover.
- Recently, there had been a high turnover of staff and at least one agency staff worker was used to cover shifts each day. The provider had acted to resolve the reasons for this flux and the vacancies were being actively filled.

Safeguarding systems and processes

- The provider had effective safeguarding systems in place and all staff spoken with had a good understanding of what to do to make sure people were protected from harm or abuse. They had received appropriate and effective training in this topic area.

Using medicines safely

- Medicines were safely received, stored, administered and destroyed, for example, where people refused to take them or they were no longer required. Where people were prescribed medicines to take 'as and when required' detailed guidance was available for staff to follow.
- Professionals had reviewed people's medicines to ensure 'Stop over medication of people with a learning disability, autism or both with psychotropic medicines' (STOMP) guidance was followed.

Preventing and controlling infection

- Staff had received infection control training and said they had plenty of personal protective equipment (PPE) available to them.

- The night staff completed the cleaning but it was unclear what the schedule of cleaning was or how staff were assured that they had been completed. The service manager addressed this issue immediately and put a system of checks in place.

Learning lessons when things go wrong

- The service manager had critically reviewed all incidents and ensured staff considered how lessons could be learnt. For example, they reviewed how people's monies were managed and put measures in place to make sure staff consistently adhered to their policies and procedures.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

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

Leadership and management

- Following concerns being raised about the management of the service the provider had acted swiftly to review the leadership and put measures in place to improve the operation of the home.
- A wide range of service managers, managers from other services, quality and excellence teams and pharmacists had been asked to critically review the operation of the service. The provider had accepted their finding and acted immediately to develop action plans and address the shortfalls.
- A staff member commented, "The senior managers have been very supportive and helped us to work well as a team."

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- Staff told us they now felt listened to and that senior managers were approachable. Staff understood the provider's expectations of them and the service.
- Staff felt the senior managers had closely listened to their views, took their comments on board and were supporting them to make positive changes to their practices.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- People at all levels understood their roles, responsibilities and their accountability. They were held to account for their performance where required.

Engaging and involving people using the service, the public and staff

- The provider and registered manager positively encouraged feedback and acted on it to continuously improve the service. For example, by looking at how to work with the local community to extend people's access to local resources such as cafés.

Continuous learning and improving care

- The quality assurance system included lots of checks carried out by provider and senior managers. The senior managers had critically reviewed the findings from the various audits and tools to identify where improvements could be made. Following any change to practice they then reviewed these to determine if the alterations were having a positive impact.

Working in partnership with others

- The provider and senior managers had actively sought the views of other healthcare professionals, people

and their relatives, and staff. They had used the feedback to improve the service and identify where organisational changes could be made that would reduce the potential for similar gaps in practice to re-occur.