

SummerCare Limited

# SummerCare Office

## Inspection report

211 Hamlet Court Road  
Westcliff-on-sea  
SS0 7EL

Tel: 01702343062

Website: [www.summercare.org](http://www.summercare.org)

Date of inspection visit:

18 December 2023

20 December 2023

02 January 2024

Date of publication:

25 January 2024

## 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

SummerCare Office is registered to provide personal care to people living in their own home or in supported living settings. The service provides personal care to people with a learning disability and autistic people. At the time of our inspection there were 14 people receiving a regulated activity.

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

The service was able to demonstrate how they were meeting the underpinning principles of Right support, Right care, Right culture. People told us they were happy with the support they received. A relative said, "[Person name] is really happy, they like where they live, and they go out all the time."

### Right Support:

Care and treatment was planned and delivered in a way which 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. There were systems in place to minimise the risk of infection and to learn lessons from accidents and incidents. Medication was dispensed by staff who had received training to do so and assessed as competent.

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 Care:

Care was person-centred and promoted people's dignity, privacy and human rights. The registered manager promoted learning and training with staff to develop their skills and provide good quality care. People were supported to access health professionals to maintain their health and well-being.

### Right Culture:

The ethos, values, attitudes and behaviours of leaders and care staff ensured people using services led confident, inclusive and empowered lives.

Care was focused on supporting people to remain independent. Staff supported people to engage in their local community. Care was personalised to people's needs and staff reviewed and adapted support as people's needs or wishes changed. The registered manager had systems in place to monitor the service and

outcomes for people.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at last inspection

The rating at the last inspection was good (published 4 January 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next 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** ●

The service was well-led.

Details are in our well-led findings below.

# SummerCare Office

## 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.

#### Inspection team

This inspection was carried out by 1 inspector.

#### Service and service type

SummerCare Office is a domiciliary care agency. It can provide personal care to people living in their own houses. The service also provides care and support to people living in 6 supported living settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

#### 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

The inspection was announced. We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 18 December 2023 and ended on 2 January 2024. We visited the location's office on 18 December 2023.

### What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority. 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 visited 2 of the supported living locations. 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.

We spoke with 6 people who used the service about their experience of the care provided and 2 relatives. We spoke with 5 members of staff including the registered manager and care staff.

We viewed a range of records. This included 2 people's care records and multiple medication records. We reviewed 2 staff files in relation to recruitment. A variety of records relating to the management of the service were reviewed.

# 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 good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. The registered manager had raised safeguarding concerns appropriately with the local authority and worked with them to keep people safe.
- The provider had systems in place to safeguard people, including 'whistle blowing' policies. Staff had received training on safeguarding, one member of staff said, "If I had a concern I would report to the manager or hierarchy and keep going higher until addressed."

Assessing risk, safety monitoring and management

- Risk assessments and care plans were person centred and provided guidance to staff on how to safely support people. People were encouraged to live fulfilled lives, and risk assessments were in place to support this.
- Environment checks were in place and any issues were raised with people's landlords to address.
- Fire evacuation practices were in place to help people know what to do should they need to evacuate their home.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act (MCA).

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.
- Capacity assessments were in place and staff supported people to make decisions on their care.
- Where people were supported to manage their money safeguards were put in place to protect people.

Staffing and recruitment

- The registered manager had safe recruitment practices in place. Before staff started work at the services, they had an interview and met people. Feedback was then gained from people and other staff to see how they had interacted and if they demonstrated the values of the provider.

- The registered manager told us they were currently recruiting and were using regular bank and agency staff were needed to maintain consistency for people.
- A relative told us, "[Person name] is really happy living there all the staff are really nice and caring."
- Appropriate checks were in place before staff started worked including providing full work histories, references and a Disclosure and Barring Service (DBS) check. DBS 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

- People received their medicines safely. Staff had been trained in how to administer medicine safely and had their competency to do so checked.
- People had their medicines reviewed by health professionals to support them live healthy lives with the optimum level of medicines needed.
- Medicine records reviewed contained all the information staff needed to safely support people with the level of support they needed.
- Regular audits and checks of medicines were completed to ensure people received their medicines safely.

#### Preventing and controlling infection

- Staff had received training in infection prevention control (IPC) and supported people to minimise the risk of infection.
- Staff supported people to keep their home clean and maintain healthy infection control practices.

#### Learning lessons when things go wrong

- The registered manager had systems in place to learn from accidents/incidents or untoward events. The registered manager had recently updated paperwork for staff to use when recording accidents or incidents.
- Lessons learned were shared with staff and where changes to practices were needed these were implemented.
- Following a recent safeguarding on finance, new systems had been implemented and better monitoring had been put in place to ensure people's finances were kept safe.

# 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 good. The rating for this key question has remained 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

- People were empowered to follow interests and activities they enjoyed. Staff supported people to identify their wishes and goals and supported them to achieve these goals, to promote positive outcomes.
- Staff supported people to have full and active lives. This included supporting people to develop their independence skills. The registered manager told us they assisted people with work placements and told us how much value and enjoyment work placements had brought people.
- Care plans were person centred and individual to people needs. Each person had an identified key worker who worked closely with them to review their care and plan how they wished to be supported.

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

- There was a good leadership structure at the service with the registered manager being supported in their role by senior staff allocated to services.
- The registered manager had systems in place to audit care being provided and to maintain oversight of the services.
- Staff were clear about their roles and had regular meetings, supervision and their competencies checked to do their role. Staff felt supported by the registered manager, one member of staff said, "[Registered manager name] is amazing, they are very supportive."
- The registered manager understood their responsibility under duty of candour to be open and honest and investigate when things go wrong.

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

- There was a good level of engagement with people, relatives and staff. Relatives told us communication was good with the service, one relative said, "We had meetings and sat down and discussed everything."
- People had regular meetings with their key workers to review their care, discuss how they felt and any support they may need. Staff told us they frequently communicated with people's relatives either in person or over the phone.
- People's equality characteristics had been considered and people were supported with their diversity, cultural and religious beliefs.

Continuous learning and improving care; Working in partnership with others

- Staff had regular training and development to enhance the skills they needed to support people. One member of staff said, "Training has been good. I recently did training with a nurse on epilepsy, dental hygiene, blood pressure, oxygen levels, levels of responsiveness, breathing, physical assessment and recognising if somebody becomes unwell."
- The registered manager said they had recently completed training on positive behaviour support and would be rolling this training out to other staff. Staff were supported to completed national recognised training such as Oliver McGowan training on Learning Disability and Autism.
- People were supported to access support from health professionals such as speech and language therapist, occupational therapists, GPs, social workers, advocates, dentists and learning disability specialists.