

Green Light PBS Limited

Bigwig House

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?	Outstanding ☆
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Bigwig house provides care and accommodation for up to three people who have autistic spectrum disorders. At the time of the inspection three people were living at the service. The service is part of the Green Light group who run several similar services throughout Cornwall, for people living on the autistic spectrum.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence. The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion.

Staff enabled people to live as fulfilling live as possible and achieve the best possible outcomes. Staff knew people exceedingly well and worked together as a team. They set high standards for people to achieve and strived to support people to reach their full potential. The care and support people received was exceptionally compassionate and kind.

People were supported to try new experiences while any related risks were identified and action taken to help reduce the risks. Staff were exceptionally skilled at understanding and managing people's complex needs and behaviour. This knowledge, and the strategies put in place, had enabled people to exceed expectations in the skills they had learnt and how their independence and well-being had been enhanced.

People received care and support that was individual to their needs and wishes. Care plans were regularly reviewed and updated and were an accurate reflection of people's needs. Staff actively supported people to maintain links with the local community, their friends and family.

People were supported to pursue their interests, hobbies and gain new skills. Staff were flexible and responded to people's needs and wishes, adjusting activities accordingly, as well as exploring and trying new ideas with people.

People were supported to access healthcare services, staff recognised changes in people's health, and

sought professional advice appropriately. Staff helped people to plan meals and shop as well as preparing and cooking meals. Staff encouraged people to eat a well-balanced diet and make healthy eating choices.

Staff were recruited safely and there were sufficient numbers to ensure people's care and social needs were met. Staff received induction, training and supervision to assist them to carry out their work.

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/ did not support this practice. Any restrictive practices were regularly reviewed to ensure they remained the least restrictive option and were proportionate and necessary.

There was a clearly defined management structure and regular oversight and input from senior management. Staff were positive about the management of the service and told us the registered manager was supportive and approachable.

The Secretary of State has asked the Care Quality Commission (CQC) to conduct a thematic review and to make recommendations about the use of restrictive interventions in settings that provide care for people with or who might have mental health problems, learning disabilities and/or autism. Thematic reviews look in-depth at specific issues concerning quality of care across the health and social care sectors. They expand our understanding of both good and poor practice and of the potential drivers of improvement.

As part of thematic review, we considered whether the service used any restrictive intervention practices (restraint, seclusion and segregation) when supporting people. The service used positive behaviour support principles to support people in the least restrictive way. The service used some restrictive intervention practices as a last resort, in a person-centred way, in line with positive behaviour support principles.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (report published 22 February 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was exceptionally caring.

Details are in our caring findings below.

Outstanding ☆

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led

Details are in well-led findings below.

Good ●

Bigwig 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 (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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Bigwig House 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 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.

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. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We also reviewed information that we held about the service such as notifications. These are events that happen in the service that the provider is required to tell us about. We used all of this information to plan our inspection.

During the inspection

We met and spoke with everyone living at the service. We spoke with three care staff and the registered and deputy managers.

We reviewed people's care and medication records. We looked at staff records in relation to recruitment, training and supervision. We also looked at a variety of records relating to the management of the service and quality monitoring systems.

After the inspection

We looked at staff training data and spoke with another four staff. We also spoke with four relatives and two healthcare professionals to hear their views of the service.

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 Good. At this inspection this key question has now remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective safeguarding systems in place and all staff had a good understanding of what to do to help ensure people were protected from the risk of harm or abuse. Safeguarding processes and concerns were discussed at regular staff meetings.
- Staff were knowledgeable about reporting processes and were confident managers would respond to concerns appropriately. Staff had an application on their phones that provided them with information about how to report any safeguarding concerns outside the organisation if this was needed.
- The service supported people to manage some aspects of their finances and there were appropriate procedures and systems in place to protect these individuals from financial abuse.

Assessing risk, safety monitoring and management

- Risk assessments were carried out to identify when people were at risk and guide staff on the actions to take to mitigate the risk of harm.
- People were supported to try new experiences while any related risks were identified and action taken to help reduce the risks.
- When people experienced periods of distress or anxiety staff knew how to respond effectively. Care plans included information for staff about how to identify when a person was becoming upset. There were clear guidelines around the procedures for staff to follow to support people appropriately and descriptions of any interventions which could be used.
- The environment was well maintained. Equipment and utilities were regularly checked to ensure they were safe to use. Emergency plans were in place outlining the support people would need to evacuate the building in an emergency.

Staffing and recruitment

- There were enough staff to support people's needs. The numbers of staff on duty reflected the needs of the people living there and how they wanted to spend their time.
- The service was fully staffed and agency staff were only occasionally used, to cover for sickness or annual leave. When agency staff were booked they were always staff who had previously worked at the service.
- Where people were assessed as needing specific staffing ratios, for example, when going out in the community, this was always provided.
- Recruitment processes were followed to check staff were suitable for the role. For example, references were followed up and criminal checks completed.

Using medicines safely

- People received their medicines safely and on time. Staff were trained in medicines management and had regular competency checks to ensure ongoing safe practice.
- There were suitable arrangements for ordering, receiving, storing and disposal of medicines.
- Some people were prescribed 'as required' medicines for pain relief or to help them to manage anxiety. Care plans included protocols detailing the circumstances in which these medicines should be used.
- Medicine checks and audits were carried out daily, weekly and monthly so any errors could be quickly identified. Medicine records were filled out appropriately.

Preventing and controlling infection

- The premises were clean and smelled fresh. People were supported to be involved in cleaning tasks and caring for their home.
- People were protected from the risk of the spread of infections because staff had access to aprons and gloves to use when necessary.

Learning lessons when things go wrong

- Accidents and incidents were reported and monitored by the registered manager to identify any trends. The registered manager discussed accidents/incidents with staff as a learning opportunity.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as Requires Improvement. At this inspection this key question has now improved to Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Improvements had been made and the provider had acted on the recommendation made re following the guidance of the Mental Capacity Act (2005). This was in relation to guidance about the "active avoidance of restrictive and punitive approaches to managing behaviour that challenges at all times."

Ensuring consent to care and treatment in line with law and guidance

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 Act 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 MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA.

- Capacity assessments were completed to assess if people were able to make specific decisions independently.
- When people lacked capacity, DoLS applications had been made appropriately. Any restrictive practices were regularly reviewed to ensure they remained the least restrictive option and were proportionate and necessary.
- We found no evidence of inappropriate restrictive practices in relation to taking a punitive approach to managing behaviour that challenged.
 - Best interest meetings were organised when it was necessary for others to make decisions on people's behalf. These involved staff, external healthcare professionals and families.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- There had been no admissions to the service since the previous inspection. However, people's needs had been assessed before they moved into the service, to help ensure their needs were understood and could be met.
- Information about people's health, social and emotional needs was recorded and available for staff.
- Staff received training in Positive Behavioural Support (PBS) to enable them to deliver care in line with best practice.

Staff support: induction, training, skills and experience

- Staff new to the care sector were supported to complete induction training in accordance with current good practice. New staff shadowed experienced staff until they felt confident and their competence was assessed before they started to provide support independently.
- Records showed training was regularly updated to ensure staff had the skills necessary to meet people's support needs. Training methods included face to face training and competency assessments. Staff told us, "Green Light provides quality training whether that is in house or by external trainers."
- Regular supervision sessions were arranged when staff were able to discuss any training needs as well as raising issues around working practices. Staff told us they were well supported by management.
- Relatives told us they found staff were competent and skilled and they had no concerns about the care and support provided.

Supporting people to eat and drink enough to maintain a balanced diet

- Staff assisted people to maintain good nutrition and hydration, encouraging people to eat a well-balanced diet and make healthy eating choices.
- Menus were agreed with the people living at the service. There was a board on the wall in the dining room with pictures of different foods, each colour coded to identify the nutritional value. This helped people to make choices and understand how to plan a balanced meal.
- Weekly supermarket shopping trips took place and people went with staff to be involved in the experience.
- Where people needed specific support around their eating this was provided appropriately. For example, one person could rush when eating their meals and this could lead to raised anxiety. Staff sat and ate with the person to encourage them to moderate their speed. This helped to keep them calm and also enjoy their food.

Supporting people to live healthier lives, access healthcare services and support; staff working with other agencies to provide consistent, effective, timely care

- Staff supported people to see their GP, community nurses, and attend other health appointments regularly.
- A 'hospital passport' provided key information about each person, their communication and health needs, in the event they needed a stay in hospital.
- People had routine and annual health checks and were supported to attend well woman/man checks.

Adapting service, design, decoration to meet people's needs

- The building had been adapted to suit everyone's needs. For example, one person's bedroom was on the ground floor because they had difficulty managing stairs.
- Two rooms, on the lower ground floor, had direct access out into a pleasant garden, that was safe for people's needs. There were chickens in the garden and people collected fresh eggs daily.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as Good. At this inspection this key question has improved to Outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- While we spoke with people living at the service their ability to fully explain what they felt about living there and the staff supporting them was limited. However, we observed when people interacted with staff, their behaviour and body language showed they felt really cared for and that they mattered.
- All three people had lived together at the service for seven years and several staff had worked at the service for the same period. This had created a 'family' atmosphere where people had built caring and trusting relationships with staff and each other. Staff told us they thought of people like they were their own family, while still respecting this was people's home and maintaining appropriate professional boundaries. Commenting, "I love the connection I have with people and they feel like younger brothers to me, rather than it just being a job", "A family atmosphere and a communal home" and "The homely environment is fantastic."
- Relatives were complimentary about staff and the care and support they provided. They told us, "I've never seen him treated with anything but the utmost kindness, respect and professionalism. [Person] is capable of complaining if he was ever treated badly but he's very fond of his carers, they are family to him", "Staff at Bigwig are outstanding" and "We are constantly amazed by the high quality care [Person] receives. For someone so disabled and with such challenging behaviours he leads the fullest life possible. The staff who have looked after [Person] for many years are extremely nice and intelligent people."
- The care and support people received was exceptionally compassionate and kind. For example, one person had lacked the confidence to engage with others and take part in some activities. Staff had patiently built their confidence and social skills with them and other people. This had greatly improved their well-being because they could take part in many physical activities, such as swimming, cycling and kayaking which they had previously not been able to. Their relative said, "Many of these activities have been very difficult for [Person] in the past, but now he is a much more confident young man and is able to enjoy doing so much more."
- Another person could experience extreme anxiety and compulsive behaviour which severely affected their emotional wellbeing and ability to participate in activities and daily living. Staff had gained an exceptionally comprehensive understanding of what would trigger this behaviour and had clear strategies in place to help prevent the behaviour escalating. This had been achieved because there was a long standing, stable, well trained and committed staff team who worked effectively with external professionals. For example, after seeking external professional advice a 'chew buddy' lanyard had been purchased which the person wore to bite on when they felt anxious and this had almost eliminated incidents of self-harming.
- Another example of staff's excellent knowledge of people's needs was for a person who liked to go out and away on holiday and also enjoyed parties and celebrations within the service. However, the anticipation of

these events caused them to become so excited it would trigger behaviour that would prevent from them from enjoying the event and sometimes even taking part at all. Staff knew how to manage this to ensure the person could enjoy the things that were important to them. For example, some staff organised a 'Knights and Princesses' party while other staff took them out for the day. A member of staff had made a cake to look like a stone with a sword inside. We saw pictures of the party, with everyone dressed in costume, and the person pulling the 'sword' from the 'stone'. There had been no major incidents of challenging behaviour for over two years which meant the person's quality of life and wellbeing had been significantly enhanced.

- Staff were clearly passionate about their work and motivated to provide as good a service as possible for people. Commenting, "I really enjoy working at Bigwig, the three people are great to work with, they are always busy and live great lives. It is nice to see their individual progress from when I started working with them" and "The experience of the older team members instilled a lot of confidence in me and helped me to create the rapport and relationships with people, who mean a lot to me. "

Respecting and promoting people's independence

- The values of the service were based on enabling people to live as fulfilling live as possible and achieve the best possible outcomes. Staff knew people exceptionally well and worked together as a team. They set high standards for people to achieve and strived to support people to reach their full potential. Staff said, "We trust each other so have the confidence to try new things. We know how to manage behaviour that challenges and are not afraid of it."

- People living at the service had complex needs and if these needs were not understood there was a risk their behaviour could become challenging. Therefore, promoting people's independence, to enable them to reach their full potential, was finely balanced. If the approach staff used was inappropriate it could have a detrimental effect on the individual's ability to develop and learn new skills. Healthcare professionals said, "Staff have an amazing 'can-do' approach and are not risk-adverse. They achieve the right balance between choice and independence, while understanding how to keep people safe" and "Staff use and understand people's strengths to enhance their independence and well-being."

- An example of staff's positive approach, to promoting people's independence, was where one person had recently learnt to ride a bike. The person's family told us they had been convinced this would not be possible for the person to achieve due to their physical disabilities. However, staff had worked with them over several sessions, initially riding with them on a tandem, until they progressed to a three wheeled bike. Staff told us the person aimed to ride a two wheeled bike very soon and they saw no reason why together this would not be achieved.

- The same person had also achieved a personal goal of climbing Snowdon, which they completed this summer in a good time. Staff were picked to work with them, who too had an interest in hiking, and had supported the person to gain the fitness needed by going on daily hikes. Their family told us, "He was very proud of himself. All these successes are a combination of the staff's perseverance and [Person's] efforts."

Respecting and promoting people's privacy and dignity

- People were supported to maintain and develop relationships with those close to them. Relatives were updated about people's wellbeing and progress by monthly reports and regular phone calls. Staff told us, "All three people have good contact with their families and this is encouraged as we feel it is very important for them."

- Staff supported one person to stay with their family regularly despite there being potential risks to their safety and others. The relative explained, "Staff bring him to us, which he loves, and they support him well ensuring we are safe. This means it is safe for his young nephews and niece to be with him. He adores his family so this is very important."

- Staff were aware and understood how people reacted with each other, which meant they picked up on any potential conflicts and provided people with the privacy and space to prevent situations from

escalating.

- People's right to privacy and confidentiality was respected. Confidential information was kept securely.

Supporting people to express their views and be involved in making decisions about their care

- People were in control of their daily routines and able to make decisions about how their care was delivered. For example, one person's care plan stated, "When [Person] is ready for a shower he will put his dressing gown on and take his towel to the bathroom."
- Everything about the way the service was run and the way staff provided care and support was focused on the individual person and involving them in their care. Where any daily routines had been developed, these were in place to meet people's needs and wishes, rather than to benefit staff.
- Relatives confirmed staff involved them if people needed help and support with decision making. Where needed, staff sought external professional help to support decision making for people such as advocacy.
- Some people living at the service had limited verbal communication and used a type of sign language known as Makaton. Staff had been trained in this communication method. However, one person's willingness to use it could be variable. Staff had worked with a Speech and Language Therapists to use pictures in conjunction with Makaton to aid their ability to communicate.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as Good. At this inspection this key question has now remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Staff had a good understanding of people's individual needs and provided personalised care. A healthcare professional told us, "The service has a positive environment and [Person] was supported in a person-centred way. Staff knew their needs and adapted well to their changing needs"
- Care plans recorded people's needs and preferences. These were reviewed monthly or as people's needs changed.
- People and their relatives were involved in the development and reviewing of their care plans.
- Daily notes detailed what people had done during the day and information about their physical and emotional well-being. There was good communication within the staff team and staff shared information appropriately, about people's needs, at shift handovers.
- The service used an electronic application to record daily records log in 'real time'. This further supported staff to have current and updated information about peoples' needs and how they spent their time.
- A summary of information about people's care needs and any associated risks was available for agency staff to refer to as a quick reference.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were identified during their initial assessment before moving into the service.
- Care plans detailed what support people might need to access and understand information, such as how to phrase sentences or what manner staff should use to ensure people understood. Hospital passports had been developed for each person, to share with hospital staff, to help ensure their communication needs would be known if they needed to go to hospital.
- One person had significant hearing impairment and a specialist hearing system had been installed. Staff ensured the device was always operating effectively to support the person.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to pursue their interests and hobbies. Each person had their own personalised activity plan which included a variety of sensory and physically active options tailored to their individual needs and preferences. Staff were flexible and responded to people's needs and wishes, adjusting activities

accordingly, as well as exploring and trying new ideas with people.

- People took part in a range of individual activities such as drama groups, hiking, swimming, going to the gym, massages, visiting museums and gardening. Staff also supported people to participate in joint outings, because they all enjoyed activities that were physical. All three people had annual passes for a local amusement park where they could share their pleasure in taking part in high energy adrenaline rides. A member of staff had recently taught people to kayak and this had become a new activity for everyone.
- Joint events also took place within the service. There were regular 'discos' in the shared lounge where people could dance to their favourite music with sensory lights operating. Staff arranged birthday parties where family and friends were invited.
- Staff encouraged people to integrate into the local community by attending local events such as local music festivals. People also did volunteer work and paid jobs. One person had paid work during the summer months as a beach cleaner and had a monthly paper round. Another person did volunteer work at a local animal sanctuary and Red Cross shop as well as belonging to a local drama group.
- Staff supported people to go on regular holidays. These included themed musical weekends at Butlins and visits to Disneyland. During the inspection staff booked another music weekend at Butlins, in November 2019, for the people living at the service and people from other Green Light services.
- Relatives told us they were happy with how staff supported people to live as fulfilling lives as possible. Comments from relatives included, "There is a timetable of activities each week with some set things but plenty of flexibility", "Staff go out of their way to find interesting things to do with [Person]", "Sometimes I literally can't believe all the things he's done with staff when I read and see all the photographs in his monthly report" and "[Person] loves music, so if there is a local festival on he will be found dancing away. They take him to castles, or museums as he likes history. He loves Horatio Nelson and has been to the Victory several times."

Improving care quality in response to complaints or concerns

- There was a complaints policy in place which outlined how complaints would be responded to and the time scale.
- People and their families knew how to make complaints and felt confident that these would be listened to and acted upon in an open and transparent way, as an opportunity to improve the service.

End of life care and support

- The service was not providing end of life care to anyone at the time of our inspection.
- The service had policies and procedures in place, in the event that people needed end of life care, to help ensure care would be person-centred and support the person to be comfortable.
- Staff encouraged people to think about and discuss what they would like to happen at this stage of their lives. Not everyone was ready or willing to take part in these conversations. This was respected and periodically re-visited with people in a sensitive manner.

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 Good. At this inspection this key question has now remained the same. 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

- Managers had comprehensive oversight of the service and understood the needs of people they supported. There was a strong emphasis on meeting people's individual needs and all staff demonstrated a thorough understanding of people's differences and individual preferences.
- Staff told us they were a close and supportive team who worked well together with the aim of helping people to live the best possible life. Staff said, "Bigwig has a great team that really care and the three people that live there appear to be very happy" and "All staff are very much person-centred in their approach to people and are always looking to progress with them to achieve their full potential."
- Relatives expressed confidence in the way the service was run and said communication was good. Comments included, "The house is well run and has a happy homely atmosphere", "We are constantly amazed by the high-quality care provided" and "We have been very happy with the level of care and support offered by staff at Bigwig."
- Professionals were also positive about the service. Commenting, "Staff do an amazing amount with people and create a positive and fun atmosphere in the home, while at the same time managing and being aware of the potential risks."

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 their responsibilities under the duty of candour. Relatives were kept informed of any changes in people's needs or incidents that occurred.
- The ethos of the service was to be open, transparent and honest. Staff were encouraged to raise any concerns in confidence through a whistleblowing policy. Staff said they were confident any concerns would be listened to and acted on promptly.

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

- Roles and responsibilities were clearly defined and understood. The registered manager was supported by a deputy manager and key workers had oversight of named individual's care planning. Managers provided effective leadership to the staff team and their individual roles and responsibilities were well understood.
- The provider had a defined organisational management structure and there was regular oversight and input from senior management. An operations manager supported the registered manager.
- Staff were very motivated by and proud of the service. They told us they felt valued and were well

supported. Comments from staff included, "I have been fully supported by the management and team members throughout my time at Bigwig and the open door policy from management has allowed me to talk to them at any time with any advice or support I have needed", "The company is a fantastic company to work for always looking to improve themselves" and "Working at Bigwig has given me the skills and experiences and a whole career that a couple of years ago I couldn't have imagined."

- There was good communication between the management and staff. Important information about changes in people's needs was communicated through effective daily notes, handovers and staff meetings. Managers ensured staff were updated about changes if they were not on shift or unable to attend staff meetings. One worker told us, "I am included in any relevant changes that arise from team meetings, regarding people, as I am not always available to attend the meetings."
- There were robust quality assurance and auditing systems in place designed to drive improvements in the service's performance. Where any issues were identified appropriate action was taken to ensure they were addressed and the service's performance improved.
- The provider had notified CQC of any incidents in line with the regulations. Ratings from the previous inspection were displayed in the service and on the provider's website.

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

- Staff meetings were held regularly and were an opportunity to share ideas about how to develop and improve people's experiences. Staff said they could talk to management at any time, feeling confident any concerns would be acted on promptly.
- People and their relatives were asked for their views of the service through questionnaires and informal conversations with management. An analysis of the results was carried out and an action plan developed to respond to any suggestions made.
- Managers and staff had a good understanding of equality issues and valued and respected people's diversity. Staff requests for reasonable adjustments to their employment conditions had been looked upon favourably by managers.

Continuous learning and improving care

- Managers attended regular organisational management meetings to support shared learning and share information about the organisation.
- Systems to gather and analyse individual people's behaviour and anxiety levels were used effectively by managers. This meant when trends emerged changes could be made, to how support was provided, to help ensure the quality of people's care continuously improved.

Working in partnership with others

- The service worked collaboratively with healthcare professionals and commissioners to ensure people's needs were met.
- Where changes in people's needs or conditions were identified prompt and appropriate referrals for external professional support were made.