

Brighter Living Care Ltd

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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

About the service

Brighter Living Care Limited provides care and support to people living in a 'supported living' setting so that they can live in their own homes as independently as possible. At the time of our inspection the service was supporting two people who received personal care and support in two 'supported living' settings.

The supported living settings included a single occupancy bungalow and a shared house with communal bathing, dining and socialising facilities.

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

People were supported by staff who had the skills and knowledge to meet their needs. Risks to people were thoroughly assessed and people were protected from harm and abuse and the risk of getting an infection.

The registered manager ensured enough staff were deployed to provide safe, personalised care for people. Staff were skilled and had completed appropriate training to meet the needs of the people they supported.

People had trusting relationships with caring, compassionate staff who advocated for them and promoted their dignity and independence.

People were supported to be involved with planning their care and support. Where people were not able to make decisions about their support staff worked with professionals, family members and legally appointed representatives to provide individualised support.

The registered manager maintained a detailed oversight of service delivery. They promoted a positive culture at the service and strove to make continual improvements.

Staff worked collaboratively with professionals from health and social care to ensure people's health and wellbeing needs were met.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. 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 maximise 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 support focused on them having as many opportunities as possible for them to gain new skills and become more independent. Staff understood how to communicate with people effectively to ascertain and respect their wishes. People were protected from abuse and discrimination. People were supported to maintain important relationships, to access their local community and supported to prevent becoming socially isolated.

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.

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

Rating at last inspection

This service was registered with us on 5 December 2019 and this is the first inspection.

Why we inspected

This was a planned inspection based on our approach to inspecting newly registered services.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Brighter Living Care Ltd

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

This service provides care and support to people living in four two '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.

Notice of inspection

We gave the service short notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we held about the service. We sought feedback from the local authority. 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.

During the inspection-

The people who used the service were not able to speak with us, so we spoke with two relatives about people's experience of the support provided. We spoke with the registered manager, care manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We received written feedback from two members of staff.

We reviewed a range of records. This included two people's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection for this newly registered service. This key question has been rated 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 harm or abuse by competent staff who had completed safeguarding training.
- The registered manager understood and acted on their safeguarding responsibilities. They referred concerns appropriately to the local authority safeguarding teams.
- The provider's safeguarding policy contained clear instructions for staff to take if they suspected people were at risk of abuse.

Assessing risk, safety monitoring and management

- Care plans were written from the person's perspective and included comprehensive guidance for staff to support them to protect people from identified risks whilst supporting their freedom.
- Risk assessments were detailed and contained clear guidance for staff to protect people from risks and support positive risk taking to enable people to live independently and enjoy their chosen activities.
- Risk assessments were regularly reviewed to ensure they reflected people's current needs and choices.
- Staff had completed training in positive behavioural support techniques. They had a detailed understanding of events which could trigger stress or anxiety in people and lead to people displaying behaviours which may challenge. Detailed plans and guidance were in place for staff to help manage people's behaviours to keep them safe and help prevent them being triggered by certain events or stimuli.
- Where people had experienced stressful events leading to them displaying behaviours which may challenge, staff had completed reports to about the event to use as learning to prevent recurrences. This included an analysis of contributory factors, behaviours from the person and de-escalation techniques used by staff to help calm the situation and keep the person safe.

Staffing and recruitment

- The registered manager ensured there were enough staff to provide individualised care based on people's needs and preferences. As much as possible the same staff were allocated to support people to ensure continuity of care and the development of trusting relationships. There was a keyworker system in place to provide personalised support to people.
- The registered manager used a thorough recruitment process to employ suitable staff. This included seeking evidence of conduct and completing a Disclosure and Barring Service (DBS) check. A DBS check confirms candidates do not have a criminal conviction that prevents them from working with vulnerable adults.
- Staff files contained all necessary recruitment information, in line with regulatory requirements.

Using medicines safely

- Staff used safe systems to manage people's medicines.
- Staff were trained in medicines administration and their competency was regularly assessed.
- People's medicines administration records (MARs) contained necessary and relevant information and staff audited these regularly. Omissions and errors were identified and investigated. Results of investigations were used as learning points to prevent errors happening again.
- Detailed medicines risk assessments and PRN or 'as required' protocols were included in people's support documents.
- People received regular reviews of their prescribed medicines from relevant healthcare professionals.

Preventing and controlling infection spreading infections.

- People were protected from the risk of getting an infection by staff who had completed training and used the appropriate personal protective equipment (PPE).
- Due to the covid-19 pandemic, further training and preventative measures had been put in place to protect people from being infected with covid-19, including regular testing for staff.

Learning lessons when things go wrong

- The registered manager maintained an up to date record of accidents and incidents. This showed accidents and incidents were fully investigated and lessons learned by staff to safeguard people and to prevent recurrences.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs and preferences were thoroughly assessed and documented by skilled staff to provide individualised care and support.
- The registered manager and staff team used a comprehensive assessment and review system to deliver personalised care in partnership with people and their relatives or appointed representatives.
- If people were not able to express their needs to staff the care manager worked with the person's relatives, advocate and health professionals to gather information to make detailed assessments of people's needs.

Staff support: induction, training, skills and experience

- People were supported by staff who had completed a thorough induction to their role.
- Staff completed a comprehensive induction which included face to face training, e-learning and shadowing of experienced staff. New staff were supported with weekly supervisions for the first six weeks of their employment.
- All staff were given regular supervisions and appraisals.
- Staff completed training specific to the needs of the people they supported. Their competencies were reviewed regularly by senior staff.

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

- Staff supported people to eat a varied, healthy diet including their favourite dishes.
- Staff understood people's cultural food needs and supported them to go to specific food shops to support their cultural, dietary identity.
- Staff had completed food hygiene training to prepare food safely.
- If people had unhealthy food-related behaviours staff provided personalised, sensitive support to help people manage these behaviours.
- Staff completed nutrition and hydration training to support people with their needs.

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

- People were supported to access help from different professionals from health and social care to maintain their health and wellbeing.
- People's care and support documents contained up to date information about their health needs to ensure staff could provide individualised support to people with specific health conditions.
- Staff worked closely with health and social care professionals to advocate for people to help meet their

needs. When people required additional support, staff referred to professionals in a timely manner. People's care records contained referrals to professionals such as specialist dentists. People were also supported by staff to attend healthcare appointments.

- People's care records contained detailed information about their health needs to ensure health professionals were supported to provide individualised care.

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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People's human rights were protected by staff who demonstrated a clear understanding of consent and the MCA.
- Where people did not have the capacity to make certain decisions their support, care plans contained all the relevant legal documentation and records of best interest meetings with professionals and people's appointed representatives.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- Staff demonstrated a caring and respectful attitude to the people they supported. They upheld and promoted their human rights and spoke about them with empathy and compassion
- People's relatives praised staff for their caring natures and ability to provide sensitive, compassionate support.
- Staff completed training in equality, diversity and human rights to ensure people were not discriminated against and received compassionate, sensitive care.
- Staff took time to build supportive, caring relationships with people through spending time with them and their family members.
- People were given personalised support by their allocated key workers who knew them well.

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

- People were involved in planning their care.
- Where people were not able to verbally express themselves, staff found alternative means of understanding their preferences to plan care to meet these preferences. They spoke with advocates, relatives and health care professionals to gain an understanding of people, their needs, aspirations and preferences. They also observed people's body language and behaviours and used pictorial communication aids to support people to express their wishes. Information gathered was included in people's care and support documents to help staff build an understanding of people and meet their needs.
- Staff also spent time getting to know people to understand how they wished to receive support. People's care and support documents contained detailed guidance for staff about how people expressed their needs. This included information about people's behaviours, body language and individual communication methods.
- People's relatives, appointed representatives and staff members completed regular reviews of people's care plans to ensure their needs were met.

Respecting and promoting people's privacy, dignity and independence

- People's independence was valued and promoted by staff.
- People's relatives told us staff always treated them with dignity and respect.
- One person had previously lived in shared accommodation. Staff had observed the person had been unsettled in this group setting. Staff then arranged for the person to live in their own accommodation and they became much more content.
- Staff told us they delivered care which promoted and supported people's independence. People's care

and support documents used respectful and sensitive language to describe people's needs.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. 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

- People received individualised care. Care plans were highly detailed with specific guidance for staff on meeting people's needs and preferences.
- Where people struggled to communicate their needs staff planned care and support in partnership with their family members and legally appointed representatives. A family member told us, "I work very well with them...they always update me...they've been very, very supportive...I'm happy."
- Staff collaborated with people's relatives and appointed representatives when completing reviews of care and support to make any needed changes to ensure continued personalised support.

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 were given support to help understand information regarding their care and support. Policies and documents for the service were available for people in 'easy read formats'.
- Staff had produced a video version of the staff guide to support people who were not able to understand written information.
- Staff used pictures of familiar objects as prompts to help people communicate as well as gestures, body language and Makaton sign language. Makaton is a language programme that uses symbols, signs and speech to enable people to communicate

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's care plans contained detailed information about their support circles and important relationships. Staff supported people to spend time with and visit friends and family members to maintain these relationships. A relative we spoke with told us their loved one visited them regularly.
- Staff supported people to maintain routines and activities which they enjoyed and made them feel secure.
- People were supported by staff to take part in activities they enjoyed such as walking, shopping, bowling and playing board games.

Improving care quality in response to complaints or concerns

- The registered manager had a clear complaints and concerns policy in place. Complaints were

investigated thoroughly and promptly.

- Information about how to complain was available in 'easy read' formats for people.
- A relative we spoke with told us they felt comfortable raising concerns and reassured that these would be dealt with appropriately.

End of life care and support

- Staff had plans in place to support people and work with their families and relevant professionals to help people express their needs and deliver individualised care and support at the end of people's lives.
- People's care plans contained information about where they wished to be at the end of their lives and who they wished to receive care and support from.

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.

This is the first inspection for this newly registered service. This key question has been rated 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

- There was a professional, respectful culture amongst staff at the service. The registered manager and staff team were committed to giving people a high quality of life and promoting their freedom, choice and individuality.
- The senior team had a detailed knowledge of people and their needs and worked to continually improve the service to provide support which empowered people to live as independently as possible.
- The service had a statement of purpose with appropriate aims and objectives to ensure the right care and support. A statement of purpose is a document that lists details about a service, including their goals for people's care and support.

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 and staff team had a clear understanding of their responsibility to uphold the duty of candour if something went wrong.
- After such events, the registered manager followed the provider's agreed policies and issued written apologies, in line with their regulatory responsibilities.

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

- The registered manager was knowledgeable and experienced. They displayed strong leadership and delegated tasks effectively to skilled members of the senior team.
- The registered manager and senior team used a comprehensive system of reviews and audits to ensure quality and safety in the service were maintained. They had a detailed oversight of all aspects of service delivery and of the improvements needed to develop the service.
- Senior staff completed regular quality monitoring visits. Any themes were identified and analysed to make service improvements. Actions arising from quality monitoring and themes analysis were then incorporated in the service's action plan. This detailed improvements needed, staff responsible for actions and timescales for actions to be completed.
- Team leaders completed weekly quality checking to address any issues as they arose.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; continuous learning and improving care

- The registered manager promoted a culture of learning and reflection in the service. They consistently worked with staff to develop practice and make improvements to the service.
- People, their relatives and staff were supported and encouraged to give specific feedback on the service. The registered manager and senior team sent regular quality assurance questionnaires to people, their families and staff to gather views on the support provided.
- Staff maintained good relationships with people's families and appointed representatives to gather information about people's needs to plan individualised care and support.
- The registered manager and senior team held regular staff meetings providing opportunities for collaboration and information sharing amongst the team.

Working in partnership with others

- The registered manager and staff team worked effectively in partnership with professionals from health and social care.
- Staff worked with psychiatrists, mental health specialists, social workers and community nurses to help meet people's health and wellbeing needs.
- When people needed specialist professional care or support, staff promptly referred to the relevant professionals.