

Brightening Lives Ltd

Brightening Lives Ltd

Inspection report

Flat 1
7 Kenilworth Avenue
Harrogate
HG2 8DB

Date of inspection visit:
15 September 2021

Date of publication:
01 November 2021

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

Brightening Lives Ltd is a domiciliary care agency providing personal and nursing care to 19 people at the time of the inspection. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

People were safeguarded from the risk of abuse or neglect. Risks were assessed and managed to minimise the risk of harm.

There were enough staff to meet people's needs and they received support from the registered manager to provide high quality care. Staff received a comprehensive induction and ongoing training and development. We have made a recommendation about recruitment practices and procedures.

Medicines were managed safely. Risks associated with infection prevention and control were managed effectively. Staff monitored people's food and fluid intake and worked with health and social care professionals to ensure people's needs were met.

People were supported to make their own choices and were actively involved in making decisions about their care and support.

Staff treated people with dignity and respect. The provider had developed a culture of personalised care to meet people's needs. Innovative methods were used to meet people's communication needs and when seeking consent.

The service was not supporting anyone with end of life care. The provider had systems and processes in place to respond to complaints and concerns.

The registered manager acted within their duty of candour requirement and legal responsibilities. The registered manager was clear about their role and had a good oversight of risk and events within the service.

Staff regularly engaged with health and social care partners. People benefitted from a service which continuously learnt and developed.

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.

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. People received care how they wanted it with a focus on choice and promoting independence. People were treated with dignity and respect with the care putting the person at the centre of decision making. The staff had the right approach by having a positive attitude, caring behaviours and supported people to lead confident, inclusive and empowered lives.

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

Rating at last inspection

This service was registered with us on 21 October 2019 and this is the first inspection.

Why we inspected

This was a planned inspection as the service has not been inspected since registered with CQC.

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.

Brightening Lives 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 undertaken by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats. 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

We gave the service five days' 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 site visit. It also allowed us to speak with people using the service to discuss their experiences ahead of the site visit.

Inspection activity started on 14 September 2021 and ended on 23 September 2021. We visited the office location on 15 September 2021.

What we did before the inspection

We reviewed information we had received about the service since they registered with CQC. We sought feedback from the local authority and professionals who work with the service. 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

We contacted eight relatives of people who use the service and one person who use the service to discuss their experience of the care received. We used all of this information to plan our inspection. We spoke with the provider, registered manager and administrator. We reviewed a range of records. This included two people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including management oversight of care, accidents and incidents and training records.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at audits and quality assurance records, policies, feedback forms and team meeting notes. We spoke with three members of staff.

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.

Staffing and recruitment

- There were enough staff to meet people's needs.
- The provider had systems in place to ensure potential staff had checks to make sure they were of good character to provide safe care. We found the application form did not ask for a complete employment history and, in one instance, the provider did not have a complete employment history for one staff member. The provider gathered this information following the inspection

We recommend the provider reviews its recruitment process and update their practice accordingly to make sure all mandatory information is requested.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- The provider had systems in place to safeguard people from the risk of abuse or neglect.
- Staff had received training on safeguarding and staff reported they knew what to do if they had a safeguarding concern.
- Relatives reported people felt safe and comfortable when receiving care. One relative told us "We are very pleased with the care. There are never any issues. The staff have a considerable amount of shadowing time before they work on their own."
- The registered manager kept a record of accidents, incidents and safeguarding concerns. These were reviewed on a regular basis to monitor for any patterns, trends or lessons learnt.

Assessing risk, safety monitoring and management

- Risks to people were assessed, monitor and mitigated where possible
- People had comprehensive personalised risk assessments in place. These involved the person in decisions about positive risk taking, choices and preferences. One relative told us "The staff know [person] very well. We are fully involved and all staff fully engage with [person] and they have a good working relationship."
- Brightening Lives Ltd used a digital care system which updates the provider in real time of events and issues to allow a rapid resolution. For example, if a member of staff was late when arriving at someone's house, this would alert the registered manager to ensure alternative support could be arranged to make sure people got the support they needed.
- The provider had comprehensive quality assurance systems in place to monitor changing risks to people.

Using medicines safely

- Medicines were managed safely.
- People had comprehensive and detailed medication care plans and medication administration records

(MAR) were completed. One member of staff told us "I had an excellent induction and lots of continual training. I received [specialist medication training] and the registered manager makes sure I am comfortable with what I'm doing. If I'm not sure, the registered manager will always support me."

- Where there had been a medication error, this had been investigated and remedial action taken to ensure the person is safe.

Preventing and controlling infection.

- We were assured that the provider was meeting shielding and social distancing rules..
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

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 had highly detailed personalised care plans which focused on the persons preferences, wishes and outcomes. Care planning put people at the centre of their care and involved professionals, advocates and relatives, as required and with the persons consent.
- Care was delivered within national guidelines and relevant laws which made sure people were supported to receive high quality care.
- People's care plans were reviewed annually or earlier if there had been a change in the support the person needed.

Staff support: induction, training, skills and experience

- Staff had a comprehensive detailed induction and continued training experience.
- Some people needed specialist support with medical devices or specialist systems for their nutritional needs. Staff had completed relevant training and had regular competency checks to ensure they had the skills to complete the task safely. The provider also invited people, relatives and health and social care professionals to join staff training to promote discussion and understanding of key subject topics.
- Staff received effective and sufficient support. They received regular formal supervision and the registered manager was also available for ad-hoc support should staff need this. One member of staff told us "The registered manager is fantastic. I get regular supervision and if I'm not sure on something, the registered manager always has time to give me support. If I cannot get hold of the registered manager, they always ring me back."

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

- There were systems in place to make sure people had enough to eat and drink.
- People who required support with eating and drinking had their food and fluid intake recorded within daily notes.
- Staff worked closely with health professionals where people were at risk of weight loss. This ensured people received the right support to maintain a healthy weight.

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

- Staff worked with health and social care professionals to make sure people received high quality care.
- People's care plans included input from health and social care professionals to make sure the right care was being provided. For example, some people had epilepsy and the epilepsy nurse had been involved in the creation of the persons care plan and risk assessment. This made sure people received the right care

with specialist input.

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 were supported to have maximum choice over their decisions.
- People were fully involved in decision making about their lives. Where people were unable to make their own decisions and important people, such as relatives or advocates, were fully involved in making decisions on the persons behalf. One relative told us "We were completely involved in the creation of the care plan. It stays in our home with all the important detail in it."
- The service used innovation in seeking consent. For people who could not give written consent, a video recording was used. This made sure people remained in control of their care decisions.

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

- People were treated with respect and dignity.
- A relative told us "All the staff are very kind and caring. [Person] has an enjoyable time with them and always laughs with the carers. The registered manager is actively involved, and we really feel listened to."
- The provider strove to be a fully inclusive organisation where policies and procedures were partly in an easy read format. People were supported to set, meet and exceed goals to push boundaries to promote equality and inclusion.

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

- People were fully involved about decision making in relation to their care.
- People were at the centre of the care and their views, wishes and preferences were recorded in care planning. Staff also worked flexibly around people's lives and activities which enabled people to live full and active lives.

Respecting and promoting people's privacy, dignity and independence

- People were supported to maintain their privacy and dignity by staff.
- People's care plans included the importance of maintaining dignity and how the person wishes to have their privacy maintained. One relative told us "The staff always talk to [person] about what they're doing. We have the same team of staff, which is important."
- People's set their own goals about how they would like to live independently. Support was tailored to make sure these goals could be achieved to promote a person's quality of life.

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's support was truly personalised to their care needs with a strong focus on people making their own decisions and maintaining control.
- Staff had a strong focus to promote people's wishes, preferences and desired outcomes.

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.

- Information was available in various formats to allow it to be accessible to people.
- Staff knew people's communication styles exceptionally well to promote inclusivity.

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 live full and active lives to reduce social isolation.
- One person gave consent to share a video of how they set and achieved their goal to complete a particular activity. Through the support of Brightening Lives Ltd, they achieved this. The registered manager told us "It was very important for [person] to meet this goal. We worked with [person] to do this and now they can do it independently."

Improving care quality in response to complaints or concerns

- The service had systems in place to appropriately respond to complaints or concerns.
- People and their relatives knew how to raise a complaint and they were confident this would be addressed.

End of life care and support

- The service did not support anyone with end of life care at the time of inspection.

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

- People benefitted from a culture which was person centred, empowering and inclusive. One member of staff told us "The support we provide is dynamic and innovative. This is a big help to people."
- The registered manager promoted a culture of the person being at the centre of their care and decision making.

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 acted within their duty of candour.
- The registered manager worked with people, their relatives and health and social care professionals to ensure the right care was provided.

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

- The registered manager had a strong overview of the risk and quality performance. One relative told us "The registered manager is definitely on the ball. Things always get resolved quickly. The registered manager will even work shifts when needed too. They are very good."
- The registered manager had a clear understanding of their role and responsibilities. Staff felt supported and engaged with the registered manager's ambitions which provided better outcomes for people.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People and staff were actively involved in the development and improvement of the service.
- The registered manager sought feedback from people and staff for their views. This was analysed and used to inform decisions about any changes needed. One staff member told us "This is the best care company I have worked for. They're brilliant. 10 out of 10."
- Staff work with other organisations and health and social care professionals to ensure people received high quality care.

Continuous learning and improving care

- The provider had systems and processes in place to continuously learn and improve care.
- The provider shared learning with the staff team to drive improvement.

