

Flexible Support Options Limited

Flexible Support Options Limited (Brilan)

Inspection report

c/o Balmoral Court
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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Flexible Support Options Limited (Brilan) is a residential service providing personal care for up to 4 people with a learning disability or mental health needs. At the time of the inspection there were 4 people living at the service. The service is located on the lower ground floor of a care home operated by a different care provider.

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

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.

Right Support

People were supported to have maximum possible choice, control and independence. Staff supported people to make decisions following best practice in decision-making. Staff communicated with people in ways that met their needs. Staff focused on people's strengths and promoted what they could do, so people had a fulfilling and meaningful everyday life. Staff supported people to achieve their aspirations and goals. People were supported safely with medicines. Infection prevention and control practices reflected current guidance. Risk assessments were in place, and it was very evident staff had ensured they fully understood the needs of people. The provider had reviewed the environment and put in place a refurbishment plan, which would lead to the complete redecorating of the home, including installation of a new kitchen and windows. Some of this work had commenced.

Right Care

People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to people's individual needs. Staff understood how to protect people from poor care and abuse. Staff had training on how to recognise and report abuse and they knew how to apply it. The service had enough appropriately skilled staff to meet people's needs and keep them safe. The service worked well with other agencies to do so. People's care, treatment and support plans reflected their range of needs and this promoted their wellbeing and enjoyment of life.

Right culture

People were supported by staff who understood best practice in relation to the wide range of strengths, impairments or sensitivities people with a learning disability and/or autistic people may have. This meant people received compassionate and empowering care that was tailored to their needs. Staff placed people's wishes, needs and rights at the heart of everything they did. Staff were aware of and were working to best practice guidance for supporting people with a learning disability and/or autistic people.

Recently the provider had worked collaboratively with the owner who operated the care home above them to review potential impacts this might have on this service, in terms of both the structural integrity of the building and how to support the other owner when continuing the operation of their care home if mechanical failures occurred such as a lift breaking down. Any potential impacts were discussed with people and they agreed actions such as hot lock food trolleys being wheeled down the corridor whilst repairs were made could be allowed.

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

Rating at last inspection and update

The last rating for this service was good (published 15 August 2018).

Why we inspected

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

This report only covers our findings in relation to the key questions safe and well-led. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Flexible Support Options Limited (Brilan) on our website at www.cqc.org.uk.

The five questions we ask about services and what we found

We always ask the following five questions of services.

<p>Is the service safe?</p> <p>The service was safe</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p>Good ●</p>

Flexible Support Options Limited (Brilan)

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 an inspector and an expert by experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Flexible Support Options Limited (Brilan) is a 'care home'. People in care homes receive accommodation and personal care as single package dependent on their registration with us. Flexible Support Options Limited (Brilan) is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

The inspection was unannounced.

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. This information helps support our inspections. We used all this information to plan our inspection and took this into account when we inspected the service and made the judgements in this report.

During the inspection

We met with 4 people who used the service and contacted 3 relatives. We spoke with the registered manager and 3 support workers. We also emailed the full staff complement and 6 external healthcare professionals to ask their views about the service and the majority responded.

We reviewed a range of records. This included 2 people's care records, medicine records and staff files. We looked at a variety of records relating to the management of the service, including audits.

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. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Staff understood when the person required support to reduce the risk of avoidable harm, and risk assessments were in place. The risk assessments were detailed, and on the whole staff ensured they effectively planned for potential risks. We discussed enhancements which could be made, which the registered manager immediately implemented.
- Temporarily kitchen staff from the care home above the service were accessing the corridor to gain access to a second lift as the one by the kitchen was broken. The people who used the service were consulted and agreed to this measure. Appropriate risk assessments had been put in place.
- The provider had safeguarding systems in place. Staff had training and a good understanding of what to do to make sure people were protected from harm or abuse.
- People confirmed they felt safe using the service. One person said, "I can't fault them and this is a great place to live." A relative told us, "The staff are excellent, and go over and above what (I think) is expected of them. I am always contacted if there are any concerns. I feel [Person's name] is happy, settled and safe at Brilan."
- The registered manager critically reviewed the operation of the service and actively made changes as and when these were needed.

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). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA.
- The staff had a good understanding of the Mental Health Act 1983 (amended 2007) and how this applied to their practices when working with people.

Staffing and recruitment

- The provider operated safe recruitment systems to ensure suitable staff were employed.
- There were enough staff to safely care for people. Staff found they could meet people's need throughout

the night and day as well as being able to spend meaningful time with individuals. Staff members told us, "I absolutely love working for the company this is honestly the happiest I've been in a job," and "No issues at all, if there was I would most definitely find it easy to speak to management."

Using medicines safely; Preventing and controlling infection

- People's medicines were managed in a safe manner. Staff were trained in medicines management and were assessed as competent to administer people's medicines.
- Regular checks were carried out of people's medicines to ensure records were accurate.
- Staff were given clear guidance on when to administer medicines.
- Effective systems were in place to mitigate the risk of people and staff catching or spreading infections.

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 requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff are clear about their roles, and understand 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; Working in partnership with others

- The provider and registered manager regularly reviewed the systems and processes in the service to determine if improvements were needed and where enhancements could be made. This had led to a decision to make significant upgrades to the environment such as the full refurbishment of the kitchen, new windows being fitted and redecoration.
- Reports had been sent to alert the CQC and local authorities when incidents occurred. The registered manager closely reviewed all incidents and ensured all relevant parties were involved in this process.
- Staff were passionate about providing good care outcomes and took ownership of their practice. They understood their roles, responsibilities and their accountability.
- The service had good links with the local community and worked in partnership with other agencies to improve people's opportunities and wellbeing. One external healthcare professional said, "I find the staff know people very well and have greatly assisted them to make improvements to their quality of life."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 positive, person-centred culture. The registered manager and staff put people's needs and wishes at the heart of everything they did. One relative said, "I'm very happy with the service and I've never had any problems."
- People told us the registered manager was approachable and acted swiftly to address any issues. They ensured people and their families were involved in discussions about their care and support needs. People told us they were confident staff had the skills they needed to provide them with the right care.