

Better Lives (Northants) Limited

# Better Lives (Northants) LTD

## Inspection report

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Date of inspection visit:  
11 July 2023  
14 July 2023  
18 July 2023

Date of publication:  
09 August 2023

## 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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### About the service

Better Lives (Northants) LTD provides care and support for people with a learning disability or autistic people. The service provides care and support to people living in their own homes and to people living in a 'supported living' setting; the people receiving support at the time of inspection lived in their own homes in the community and a four bedroom 'supported living' house. 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. At the time of our inspection, the service was supporting 8 people with personal care.

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

The service demonstrated how they were meeting the underpinning principles of Right support, right care, right culture.

#### Right Support:

Staff were aware of and followed best practice and the principles of Right Support. People received person centred support and their needs were met. Staff focused on people's strengths and promoted what they could do, so people had a fulfilling and meaningful life. Staff supported people to play an active role in maintaining their own health and wellbeing. People were supported with their medicines in a way that promoted their independence. People were enabled to access all the health and social care services they needed. The 'supported living' service people received was provided in accommodation, which was similar to the other houses in the area. People were supported to keep their home clean and well maintained. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

#### Right Care:

People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to their individual needs and promoted equality and diversity in their support for people. The service had enough appropriately skilled staff to meet people's needs and keep them safe. Staff understood people's communication needs and supported their communication appropriately. Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it. People could take part in activities and pursue interests that were tailored to them. The service gave

people opportunities to try new activities that enhanced and enriched their lives. Staff and people worked together to assess risks people might face. Where appropriate, staff encouraged and enabled people to take positive risks.

#### Right Culture:

People received good quality care and support because trained staff could meet their needs and wishes. People were empowered because of the ethos, values, attitudes and behaviours of the management and staff. Staff knew and understood people well and were responsive, supporting their aspirations to live a quality life of their choosing. Staff placed people's wishes, needs and rights at the heart of everything they did. Staff evaluated the quality of support provided to people, involving the person, their families and other professionals as appropriate. The service enabled people and those important to them to work with staff to develop the service. Staff valued and acted upon people's views.

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

#### Rating at last inspection

The last rating for this service was good (published 25 December 2018).

#### Why we inspected

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

#### Follow up

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

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service 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.

# Better Lives (Northants) 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 Health and Social Care Act 2008.

#### Inspection team

This inspection was carried out by 1 Inspector.

#### Service and service type

This service provides care and support to people living in their own homes and a 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

#### Registered Manager

This 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

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

Inspection activity started on 11 July 2023 and ended on 18 July 2023. We visited the location's office on 18 July 2023.

### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

### During the inspection

We spoke with 2 people who used the service and 3 people's relatives about their experience of the care provided. We spoke with 6 members of staff including 3 support workers, 1 senior support worker, the registered manager and a director. We spoke with a health care professional who works with people who are supported by the service. We reviewed a range of records. This included 3 people's care records and a variety of medicines records. We looked at 3 staff files in relation to recruitment. A variety of records relating to the management of the service, including audits were reviewed.

# Is the service safe?

## Our findings

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

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. There were policies covering adult safeguarding, which were accessible to all staff.
- Staff had received up to date safeguarding training and understood the procedures they needed to follow to make sure people were safe.
- People and their relatives told us they were safe. One person said, "The staff are all good to me, they help me out, they're all good people."

Assessing risk, safety monitoring and management

- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well.
- Personalised risk assessments considered how risks related to people's support needs. For example, financial risk assessments were in place and balanced people's wish to develop their independence while mitigating the risk of financial abuse. Records reflected people's wishes and views and their involvement in assessments.
- Personalised evacuation plans were in place to support staff and people to evacuate their home safely in the case of an emergency. Environmental risk assessments were in place and up to date.

Staffing and recruitment

- The service had enough staff, including one-to-one support for people to take part in internal and external activities how and when they wanted. The numbers and skills of staff matched the needs of people using the service.
- Staff, people and relatives informed us staffing levels were adequate. One person's relative said "The staffing is consistent and [person's name] always knows who will be supporting them." Another relative said, "We have regular staff and [person's name] enjoys them coming, they're always on time and we've had no missed visits."
- Recruitment checks, including criminal records checks had been carried out to ensure only suitable staff were employed.

Using medicines safely

- There were systems in place to ensure proper and safe use of medicines. People were enabled to be as independent as possible with their medicines and appropriate assessments were in place to support this.
- Where staff administered people's medicines, medicine administration records (MAR) were completed and regularly audited.

- Staff had received training to administer medicines safely. They underwent competency assessments to make sure they had the correct skills to support people with medicines.

#### Preventing and controlling infection

- Staff had completed training in infection prevention.
- Effective infection, prevention and control measures were used to keep people safe, and staff supported people to follow them. For example, people were supported to maintain a clean, hygienic home environment.
- The provider had an up-to-date infection prevention and control policy in place to help keep people safe.

#### Learning lessons when things go wrong

- Records showed that staff knew how to record and respond to incidents and accidents.
- Accidents and incidents were reviewed by the registered manager, and action taken to address any identified concerns.



# 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 our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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

- Staff completed a comprehensive assessment of each person's physical and mental health before providing a service to people. This ensured there were sufficiently trained staff to provide the care and support required.
- Care plans reflected a good understanding of people's needs, including relevant assessments of people's communication support and sensory needs.

Staff support: induction, training, skills and experience

- Staff received an induction which included training and time spent shadowing an experienced staff member.
- Staff received suitable training for their roles. Mandatory training was refreshed regularly and included equality and diversity, learning disabilities awareness and dementia awareness training.
- Additional training was provided to enhance staff understanding and skills in areas such as diabetes, epilepsy and autism and positive behaviour support.
- Staff attended regular supervision and told us they felt supported in their roles. One member of staff said, "I have supervision every 3 months, I'm allocated a supervisor, I get feedback and receive a copy of the supervision."

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

- People received support to eat and drink enough to maintain a balanced diet.
- People were supported with menu planning, food shopping and meal preparation in a way which ensured their decisions and preferences were followed. One person said, "I shop and choose what I want, I if can cook it myself I do, if not the staff help me." Another person's relative told us, "[Person's name] goes shopping and gets what they want, staff support [person's name] to plan healthy meals."
- Information was recorded in care plans as to what support people required in relation to eating and drinking and whether people had any specific requirements.

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

- Records showed and people told us that people's physical and mental health had improved since receiving support from the service. One person had received support to stop smoking and improve their diet. They told us this had significantly improved their life.
- People had health passports which were used by health and social care professionals to support them in

the way they needed. A health passport allows individuals to record details about their disability, health condition or learning disability and is shared with the professionals involved in their care.

- People were supported to attend regular health, dental and optician checks and access support from health professionals such as specialist nurses.

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 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 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

- People were supported to make decisions about their care in line with the Mental Capacity Act 2005.
- Care staff had received training in MCA and understood the importance of seeking consent from people and people were supported in the least restrictive way possible.
- The registered manager considered people's ability to make decisions as part of their initial assessment. They were aware of the need to complete a mental capacity assessment if it was unclear whether the person had capacity to consent to care. At the time of inspection all the people using the service were able to provide consent to their care.

# 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 our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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 well and their equality and diversity was respected.
- Staff saw people as their equal and created a warm and inclusive atmosphere. People and their relatives told us staff were kind and caring. One person said, "The staff are all good to me, they help me out." Another person's relative said, "[Person's name] enjoys staff's company and the time they spend with them 1:1 playing games or colouring, they choose what they want to do."
- Care plans detailed people's preferences as to how people liked their care to be delivered and provided information about people's social, cultural and religious needs.

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

- People were encouraged to be involved as partners in their care, and staff provided the support they needed to make decisions for themselves, or to participate in decision making. One person told us they were able to decide for themselves what they wanted to do and when and staff always respected this.
- Where people required support to make decisions, family members told us staff communicated well with them and they were involved in decision making.
- Records showed care plans were regularly updated and were completed alongside people and their families, following their wishes and preferences.

Respecting and promoting people's privacy, dignity and independence

- We saw staff spoke with people in an appropriate way. Support plans described how people should be supported so that their privacy and dignity were upheld, and staff respected people's need for space and privacy.
- Privacy and confidentiality were also maintained in the way information was handled; care records were stored securely.
- People were supported to be as independent as possible. People's level of independence had improved since being supported by the service. One person's relative said, "[Person's name] has grown incredibly in their independence. Staff have been supporting them to manage their money, they have a spending book, and the staff are educating them on how spending works. Now when they're shopping, they stop and look at the price of items before choosing what to buy."

# Is the service responsive?

## Our findings

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

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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; 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

- Assessments had been completed prior to people receiving support to ensure the service could meet people's needs. People's choices, likes and dislikes were reflected in their support plans.
- People received their support from dedicated teams of staff who knew them well and helped them achieve their goals. For example, one person told us they're life had improved significantly since being supported by the service, they said, "I've been better since being here, I do things I didn't do before, like cooking, the staff encourage me."
- Staff spoke knowledgeably about tailoring the level of support to individual's needs and people were in control of how they lived their life.
- People were supported to participate in numerous activities of their choosing. One person's relative told us, "[Person's name] goes out a lot, they're always doing something, their life has improved since being supported by Better Lives."
- Support plans were regularly reviewed with people. This helped to monitor whether they were up to date and reflected people's current needs so that any necessary changes could be identified and acted on at an early stage. Any changes to people's care were updated in their care records to ensure care workers had up to date information.

### Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Staff ensured people had access to information in formats they could understand. Documentation was available in easy read formats, for example information on how to make a complaint.
- People had individual communication assessments that detailed preferred methods of communication.
- Staff had good awareness and understanding of individual communication needs.

### Improving care quality in response to complaints or concerns

- People, and those important to them, could raise concerns and complaints easily and staff supported them to do so.
- The service treated all concerns and complaints seriously, investigated them and learned lessons from the

results.

- The provider had received no complaints since 2021 and all the people we spoke with told us they were happy with the service they received and had no complaints. One person told us, "There is nothing I would change, I have no complaints, I can't fault them." Another person's relative said, "We have no complaints, but would know how to complain if we needed to and would feel comfortable making a complaint."

#### End of life care and support

- The service did not have anyone receiving end of life care at the time of the inspection. However, an end-of-life policy was in place and people had been supported to make plans for the end of their life if they wished to do so.

# Is the service well-led?

## Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was a positive and open culture in the service. It provided people with holistic support, where they were empowered, and their well-being was the central focus for staff.
- People and their relatives told us the registered manager knew people well and was available to them. One person said, "We know [registered manager], she comes to see us and if there are any issues, she tells us what's going on." Another person's relative said, "The manager is very approachable, we know her well, it's a very well-run company."
- Staff were proud of working for the service and of the quality of care provided. They spoke about providing a good quality of life for people and staff working well together as a team. They described how they worked together to improve people's life experiences through the support they provided. One member of staff said, "This is the best company I've worked for; the culture and the way people are all treated with dignity, it's a lovely place to work."

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 service was open and honest when things went wrong. The provider was aware of their responsibility to apply the duty of candour where needed.
- Staff knew how to 'whistle-blow' and knew how to raise concerns with the local authority and the Care Quality Commission (CQC) if they felt they were not being listened to or their concerns acted upon.
- People and relatives spoke positively about the openness of the registered manager and staff.

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

- The registered manager had the skills, knowledge and experience to perform their role and a clear understanding of people's needs.
- Staff understood their roles and responsibilities towards the people they supported and felt supported in their role. One member of staff told us, "We are able to give feedback, the door is always open, it is a very friendly and welcoming company, we can share anything, and issues are dealt with immediately."
- The provider and registered manager regularly worked with staff to provide people's support. They also carried out audits of the service to maintain oversight of the safety and quality of the service and drive improvement.

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

- Regular meetings and surveys took place for people, relatives and staff to give their views on the quality of the service being provided. People told us their views were listened to and action taken in response to the feedback they provided.
- There was an open and inclusive approach to the running of the service. Regular staff meetings took place. We looked at a sample of staff minutes and saw they covered numerous topics relevant to the service.
- People and their relatives provided examples of actions the provider had taken to support people to be more independent and achieve their goals. For example, supporting one person to attend a specialist health clinic to improve their health and wellbeing.

Working in partnership with others

- The provider worked closely with commissioners and health and social care professionals involved in people's support to ensure people received appropriate care.
- Staff worked well with other organisations and had good relationships with other care providers such as local health care professionals. They collaborated with them to achieve good outcomes for people. A specialist nurse who worked with people supported by the service told us, "They are on the ball with everything and maintain good contact with the [specialist care] team."