

Bright Futures Care Limited Bright Futures Care Ltd

Inspection report

Bridgewell House 82 Ackers Road, Stockton Heath Warrington Cheshire WA4 2BP Date of inspection visit: 11 May 2021 14 May 2021

Date of publication: 01 June 2021

Tel: 01925470996

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

Bright Futures Care Ltd is a residential care home that accommodates up to eight people living with learning disabilities or autistic spectrum disorder. The service is made up of two self-contained houses next door to each other. At the time of our inspection there were five people living in one house and three people living in the other.

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

We were assured that infection prevention and control (IPC) measures were appropriately followed. There was a good supply of personal protective equipment (PPE) and cleaning products and they were used effectively to minimise the spread of infection. The environment was clean and hygienic.

Risk was managed in a way that enabled people to take positive risks as part of an independent lifestyle. People were protected from the risk of abuse and harm and staff understood their responsibilities for keeping people safe. Family members told us they trusted staff and were confident their relative was kept safe. Medicines were kept safe and given to people at the right time. There was a process in place for recording, reporting and learning from accidents and incidents.

The registered manager promoted a culture which was person-centred and inclusive. Staff and family members described the registered manager as supportive and approachable. There was good partnership working with other professionals. There was an effective system in place for checking and improving the quality and safety of the service.

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.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. The service is in the local community with good access to amenities. People were actively involved in the local community. People have their own private facilities as well as the use of some communal spaces. Managers and staff empowered people to make choices and decisions about their lives.

Right support:

- Model of care and setting maximises people's choice, control and independence Right care:
- Care is person-centred and promotes people's dignity, privacy and human rights Right culture:
- Ethos, values, attitudes and behaviours of leaders and care staff ensure people using services lead

confident, inclusive and empowered lives.

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 (published 10 May 2018).

Why we inspected

The inspection was prompted in part due to concerns received about people's safety and the management of the service. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. We found no evidence during this inspection that people were at risk of harm from the concerns.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection. The overall rating for the service has remained the same. This is based on the findings at this inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Bright Futures Care Ltd 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.

Is the service safe?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good
Is the service well-led? The service was well-led.	Good ●



Bright Futures 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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team This inspection was carried out by an inspector and an inspection manager.

Service and service type

Bright Futures Care Ltd is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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 registered manager. 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.

Inspection activity started on 11 May 2021 and ended on 14 May 2021. We visited the service on 11 May 2021.

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service

and made the judgements in this report.

We reviewed information we had received about the service since the last inspection and sought feedback from the local authority commissioning and safeguarding teams.

During the inspection

We spoke with one person who used the service about their experience of the care provided and we spent time in communal areas observing the support people received. We spoke with eight staff members including care staff and the registered manager. We looked at care records for four people and a selection of medication records. We looked at recruitment records for three staff employed since the last inspection and a variety of records relating to the management of the service, including audits.

After the inspection

Due to the impact of the COVID-19 pandemic we limited the time we spent on site, and were unable to speak with family members, due to visiting restrictions. Therefore, we requested records and documentation to be sent to us and reviewed these following the inspection visit. We contacted three family members by telephone about their experiences of the care provided.

We continued to seek clarification from the provider to validate evidence found.

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 remained the same. This meant people were safe and protected from avoidable harm.

Learning lessons when things go wrong

• At the last inspection we made a recommendation regarding the analysis of accidents and incidents. This was because an analysis of accidents/incidents had not been carried out to establish trends and patterns. Improvements had been made.

• There was a system in place to establish trends and patterns and learn lessons when things went wrong.

Assessing risk, safety monitoring and management

- Risks people faced were assessed and plans were in place to keep people safe from avoidable harm.
- People were supported to take positive risks enabling them to experience maximum independence, choice and control over their lives.
- Safety checks were carried out at regular intervals on the environment, systems and equipment used.

Preventing and controlling infection

- We were assured that safe procedures were followed for preventing the spread of infections.
- There was a good stock of personal protective equipment (PPE) cleaning products and equipment. Staff used and disposed of PPE safely.
- There were cleaning schedules in place and records showed they were followed. All parts of the service were visibly clean and hygienic.

Staffing and recruitment

- Safe recruitment and selection processes were followed. A series of pre-employment checks were carried out on applicants to check their suitability before they were offered a job.
- People were supported by the right amount of suitably skilled and qualified staff. Staffing levels were based around people's needs and lifestyles. People received additional support where this was required to meet their needs and keep them safe.
- People received care and support from staff who were well supported, trained, skilled and experienced. Family members told us they had a lot of confidence in the ability of staff. Their comments included, "They [staff] have a real good understanding of [relative]" and "The staff have helped [relative] develop in so many ways."

Using medicines safely

- Medicines were safely managed. They were safely stored and administered to people at the right times.
- Medicines management policies and procedures and other best practice guidance was available to staff. Staff with responsibilities for the management of medicines were trained in this area and underwent regular

checks of their practice.

• Medication administration records (MARs) detailed people's prescribed medicines and instructions for use and staff completed them correctly. There were detailed protocols in place for medicines prescribed to be given 'as required' (PRN).

Systems and processes to safeguard people from the risk of abuse

- Staff completed safeguarding training and had access to information and guidance about recognising and reporting abuse.
- Staff knew the different types of abuse and the signs which may indicate abuse and they were confident about reporting any safeguarding concerns they may have.
- Family members told us they trusted staff and were confident that their relative was kept safe. Their comments included; "I have complete trust in them all [staff] I have no doubt [relative] is safe" and "No concerns at all about [relative] safety."

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 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.

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

- •The registered manager had a clear understanding about their role, responsibilities and regulatory requirements.
- There was a clear management structure across the service which everyone understood. The registered manager had overall responsibility for the day to day running of the service and senior staff had defined responsibilities for line managing areas of the service.
- Staff told us they enjoyed their job and felt well supported. Family members and staff described the registered manager as approachable and supportive.

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

- There was a positive culture of engaging people, staff, family members and others. The culture was open and transparent and supported equality and inclusion.
- People, family members and staff were empowered to voice their views, opinions and experiences about the service. They were given opportunities to comment on the quality of the service and put forward any ideas for improvement.
- Family members told us the registered manager and staff communicated well with them throughout the COVID-19 pandemic.

Continuous learning and improving care; 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

- There were effective systems to monitor and improve the quality and safety of the service. We saw examples were quality checks and audits had brought about improvements to the service.
- Meetings with staff were regular and used to assess their performance, learning and development needs and opportunities to progress.
- The registered manager was open and transparent when things went wrong. They were aware of their responsibilities under the duty of candour.
- The last rated inspection was displayed at the service and on the providers website.

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

• The registered manager promoted a positive culture which was person centred, inclusive and focused on

good outcomes for people.

- People were central to the planning and delivery of their care and support and were appropriate relevant others were involved.
- The registered manager and staff empowered people to make choices and decisions about their lives.

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

• Links had been developed within the community and people were supported to get involved which had a positive impact on their lives.

• Family members and staff told us they felt involved, valued, respected and listened to.