

Bright Futures Care Limited

Riverside Point

Inspection report

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Outstanding 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Good 

Summary of findings

Overall summary

The inspection took place on 12 April 2017 and was unannounced.

This was the first inspection of the service since it was registered with The Care Quality Commission (CQC) in 2015.

Riverside Point is a residential home owned and managed by Bright Futures Care, which provides support for young people and adults with autism and learning difficulties. The accommodation comprises of four linked three story terraced properties each providing spacious living accommodation for two people. It is located in an area which offers privacy, but people also have easy access to local amenities in the community, such as shops, parks and libraries.

Bright Futures as an organisation provides various services to people with a learning disability including educational and residential services. The aim of the service is to provide people with a positive opportunity to learn and develop the skills necessary to become more independent whilst receiving care and support in a safe environment

Each person has their own bedroom with en-suite facilities and they are encouraged to decorate and develop their room as they wish. Riverside Point has secure gardens to provide sensory stimulation for individual residents.

At the time of the inspection eight people were living in the home.

The service has a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People lived in a safe and comfortable environment. They were able to take risks and were supported to make decisions which reflected their preferences and individual needs. The staff worked in an extremely person centred way, by responding to the person's individual communication needs to make sure the care and support they were provided with was right for each person. This included the way in which they responded to risks, making sure people felt safe and had the support they needed in any given situation. This meant that each person had a bespoke service which was developed with them and changed to reflect the changes taking place in their lives, confidence and abilities. This was confirmed by the relatives and professionals we spoke with, who felt the person centred approach was a particularly positive feature of the service.

People who used the service and their relatives spoke of the outstanding care delivery. They told us the provider and staff of the service went above and beyond to ensure they received a person centred service.

Staff maintained people's privacy and dignity ensuring any care or discussions about people's care were carried out in private. We saw interactions both verbal and non-verbal between staff and people who used the service were caring and respectful with staff showing patience, kindness and compassion. We observed staff knew and understood the people they cared for and ensured people were provided with choices in all aspects of daily life by way of discussion.

Each person had a plan of social, leisure and educational activities which were tailor made for them and considered how they wanted to live their lives as well as their emotional and health needs. The staff worked very closely with a team of healthcare consultants to make sure support was planned in an appropriate and individualised way. This meant that all the decisions about people's care and support were well thought out and included the perspectives of different professionals. They had regular and comprehensive discussions to review each person's support plans to make sure they always considered their holistic needs. They monitored how people reacted and felt about each situation they were exposed to so that care could be adjusted to ensure it met the person's need. People were involved in planning their own care and making decisions. For people who could not express how they felt verbally, the staff made sure they had opportunities to express themselves in the way they could and that this was understood and acted upon. We saw 'base sheets' were used as a way of feedback about people's perception of what had gone right and what had gone wrong with their day.

The registered manager involved families and other agencies to ensure people received the support they needed to express their views and make decisions that were in their best interests.

Staff were recruited through a rigorous procedure. As part of the recruitment process the provider used value based recruitment techniques, a clearly defined culture statement and staff competency assessments. Staffing provision was responsive to people's changing needs and preferences which enabled people to lead fulfilled lives.

Staff were provided with opportunities to develop their skills and career. Individual staff abilities and interests were valued and incorporated into the way the service worked. All of the staff were able to contribute their ideas at all levels of the organisation from planning individual people's care to being part of developing new ways of working and procedures. The staff gave extremely positive feedback about working for the provider and felt empowered and appreciated in their role.

Training records were up to date and staff received regular supervisions and appraisals.

People who used the service, family members and external agencies were most complimentary about the standard of support provided. The registered manager involved families and other agencies to ensure people received the support they needed to express their views and make decisions that were in their best interests. Relatives and professionals were very positive about the service people received. Comments from relatives included "exceptional", "amazing" "it's a godsend" and "outstanding care provider". Health and social care professionals without exception were high in their praise of the service. Comments included "they were a breath of fresh air, definitely need more like them", " They are creative to ensure they are able to meet young people's needs in a way that works with the individual. In respect of my involvement I have always found the staff to be helpful, approachable, dedicated and committed to helping wherever they can" and "Could not ask for a better service. Total commitment to person centred care".

The registered manager and staff had an excellent understanding of managing risks and supported people that had previously challenged services to reach their full potential.

An outstanding characteristic for the service was the time spent developing ways to accommodate the changing needs of the people who used the service, using innovative and flexible ways to support people to move forward. The registered provider was seen to constantly adapt and strive to ensure people who used the service were able to achieve their full potential. We saw that over a period of time people had been supported to progress and their support plans and environment adapted and developed to promote their independence. This included people moving to their own property, attending college and gaining employment.

People were at the heart of the service, which was organised to suit their individual needs and aspirations.

We saw people had assessments of their needs and care was planned and delivered in a person-centred way. The service had creative ways of ensuring people led fulfilling lives and they were supported to make choices and have control of their lives. Care plans had been developed to provide guidance for staff to support in the positive management of behaviours challenged the service and others. This was based on least restrictive best practice guidance to support people's safety. The guidance supported staff to provide a consistent approach to situations that may be presented, which protected people's dignity and rights.

.People participated in a range of personal development programmes. Individual programmes were designed to provide both familiar and new experiences for people and the opportunity to develop new skills. The creation of a Youth Inclusion Worker post to work with people who used the service in sourcing community activities at their request has been most successful.

People's nutritional needs were well met and they had access to a range of professionals in the community for advice, treatment and support. Staff monitored people's health and wellbeing and responded quickly to any concerns.

People received their medicines as prescribed by their GP. Medicines were managed safely to ensure people received them in accordance with their health needs and the prescriber's instructions.

The service had a complaints policy; details of which were provided to all the people who used the service and their relatives. People told us they had no reason to complain but if they did 'they knew what to do'.

The systems for monitoring and improving the service were an intrinsic part of the way the service worked. The staff continually monitored individual care, feedback from people using the service and information about them was used to reflect on and improve practice. Records were well thought out, clear and organised. The way in which records were used was seen by all the staff as an important part of quality assurance. Whilst the records were extremely detailed, time spent creating and updating these did not detract from the care provided to each person.

The culture of the service was open, transparent and progressive. All the staff were committed to continuous improvement of the service, individual care and looking at the provider as a whole. People using the service, their representatives and the staff felt valued and important representatives of the organisation. The staff regularly consulted relatives and external professionals to ask for their opinions.

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.

Staff could identify the different signs of abuse and knew the correct procedures to follow should they suspect someone was being abused. Staff had undertaken training in safeguarding adults. Risk assessments were carried out and plans were in place to minimise people experiencing harm.

The home had sufficient numbers of suitably skilled and competent staff to keep people safe. Staff were subject to safety checks before they began working in the service.

Medicines were appropriately stored and disposed of. People received their medicines when they needed them. Staff had received training in how to administer medicines safely.

Is the service effective?

Outstanding ☆

The service was outstanding in ensuring people received effective support.

People received creative and person centred care and support that was based on their needs and wishes. Staff were well trained and motivated and understood how to protect people's rights and enable them to make decisions for themselves.

Staff were knowledgeable about the requirements of the Mental Capacity Act 2005 (MCA). People's freedom was not unlawfully restricted as the provider had good checks in place to assess and monitor people's capacity to make decisions. The provider had effective arrangements in place to ensure people's liberty was not restricted without authorisation from the local authority.

People were supported to attend appointments, see their GP or other health care professionals. Their dietary needs were met and healthy eating was encouraged.

Is the service caring?

Outstanding ☆

The service was very caring.

Without exception, people and relatives praised the staff for their caring and professional approach.

Staff were kind, compassionate and treated people with dignity and respect.

The service had a culture that promoted inclusion and independence. People and relatives told us they felt valued by the staff and management.

Healthcare professionals, feedback reviews from relatives and people told us the service provided excellent care.

Is the service responsive?

Outstanding 

The service was very responsive to people's needs.

People achieved positive outcomes. The service had the ability to respond promptly to people's changing needs. People received care tailored to their individual needs.

People were consistently supported to achieve their goals and aspirations. Relatives and healthcare professionals told us the service provided an outstanding platform to support people with their learning and development.

People were fully supported by staff to engage in activities to stimulate and promote their overall wellbeing. The staff recognised and responded to people's social and recreational needs by enabling people to engage in various activities and meetings organised by the service.

People's views and opinions were sought and listened to. Feedback from people receiving support and their representatives was used to improve the service.

Is the service well-led?

Good 

The service was well-led.

The culture of the service was positive, person centred, inclusive and forward thinking. The feedback we received from a range of professionals, families and staff was this was an excellent, enabling and inspiring service.

The management were described as amazing by staff, families and other agencies and professionals. Best practice guidelines were followed and the service was innovative and creative in its approach. Feedback was regularly sought from families and all

comments or suggestions were promptly acted upon. Staff said they felt the person centred approach from management included the staff as well as people who used the service.

The management team of Bright Futures were proactive in challenging decisions made by external organisations when there was a possible negative impact on people they supported.

Health and social care professionals told us that the service was unique, well managed and a highly desirable placement to enhance people's lives and enable them to move on to more independent living.

Riverside Point

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection was announced and took place on 12 April 2017.

The inspection was undertaken by one adult social care inspector.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. As part of our inspection planning we reviewed this information and other information that we held about the home including statutory notifications received from the provider. These statutory notifications include important events and occurrences which the provider is required to send to us by law. We also contacted ten care and health commissioners and social care professionals who were involved with the service to seek their feedback.

We spoke with seven people who used the service and five of their relatives to gain their perception of the staff and services provided. We also spoke with five staff members, the registered manager, the site manager, an integrated practitioner and the quality assurance manager. As some of the people who used the service had limited verbal communication skills we used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care and support to help us understand the experiences of people who could not talk with us.

We pathway tracked three people using the service. This is when we follow a person's experience through the service and get their views on the care they received. This allows us to capture information about a sample of people receiving care or treatment. We looked at staff duty rosters, two staff recruitment records, feedback questionnaires from relatives and observed peoples interactions with staff. We also looked at people's medication records, staff training files, and a selection of records used to monitor the service quality which included health and safety, maintenance and meeting minutes and audits.

We undertook a tour of the premises and with their permission looked at three people's bedrooms.

Is the service safe?

Our findings

People told us they felt very safe living at Riverside Point. One relative told us about some past experiences with other care providers and said they had experienced many problems until they discovered Riverside Point, which they said was an outstanding service. Comments from relatives included "Staff ensure care is provided in a safe and person centred way. They are an outstanding service (name) safety and wellbeing is paramount to the staff and they ensure we are informed of everything that happens" and "Staff are absolutely wonderful. They carry out full risk assessments to make sure everything is safe both inside the home and everything involving (name) care and general activity" and "I could not find any fault with this service, its safe and effective. In fact it's the best provider around".

Systems were in place to identify risks to protect people from harm. Each person's care plan had a number of risk assessments completed which were specific to their needs and also to the environment of the service. The assessments outlined the benefits of the activity, the associated hazards and what measures could be taken to reduce or eliminate the risk. Staff described how they monitored and reviewed the risks people faced. One member of staff said "All the staff are fully aware of each person's needs and how they can manage risk. We review each person daily as sometimes they can be unpredictable. We have all received training in risk management and fully understand what is needed. We go through their care plans and review them and update them when necessary".

The service specialised in supporting people who may have previously challenged services and they benefitted from a bespoke personalised service offered at Riverside Point. Staff managed people's behaviour through positive risk taking and engagement, working closely with families to manage transition between services and giving people a sense of worth by promoting their rights. For example before one person was referred to Riverside Point they had lived in a setting in which they had demonstrated aggressive behaviour to staff and they had become more and more socially isolated. Staff respected their choices, their right to privacy and enabled them to take their own decisions about how they wanted to live their life. The person had become more independent, their behaviour had changed and they were more confident in the community. We found they were leading a full and active life; they only needed one staff's support at present whereas before they had two to one support. They enjoyed a wide range of activities in the community, they had made new friends and started to re-establish some old friendships and were being assisted by staff to move into independent living. A health and social care professional told us that they could not believe the progress that had been made in this person in such a short time and this had certainly changed their life around much for the better.

We noted the risk management plans included detailed information on how staff could support people in a way that minimised the risks. For example, we saw there was a detailed procedure on how to support a person to have an overnight stay at their family home. This included guidance on contingency plans if the stayover did not go as planned. The registered manager said, "We have a duty of care to manage risk when this is necessary. However, we have to balance risk management with people's choices to take risks."

A member of staff explained that some people they supported had autism and could feel anxious and

unsafe if their daily routine was disrupted, or the plan for the day was not followed. This could lead to them displaying behaviour which had a negative impact on them. Staff were fully aware of this and consistently followed the robust plans in place to minimise the risk of this happening. They had insight into how people showed that they were feeling anxious and unsafe and could recognise when this was happening. The care plans fully detailed what could trigger this behaviour, what to do if the behaviour occurred, how to react when the behaviour first emerged and then advice on what to do subsequently. All staff had been trained in Team Teach which deals with communication, awareness, assessment, listening, looking and making safe skills. We saw that one person living in the home needed to be addressed in a certain way and if this did not happen it would badly disrupt their routine. Staff showed awareness of this and with the person's permission ensured that people were aware of this before engaging in conversation.

Detailed policies were in place in relation to abuse and whistleblowing procedures. Records showed the staff had received training in safeguarding children and adults and this was regularly updated, to keep them up to date with any changes in legislation and good practice guidelines. This helped to ensure staff were confident to follow local and national safeguarding procedures, so that people in their care were always protected.

All the staff we spoke with had a good understanding of the correct reporting procedure. The staff we spoke with said this had helped them to develop their underpinning knowledge of abuse. Staff were able to tell us about the provider's whistleblowing policy and how to use it and they were confident any reports of abuse would be acted upon appropriately. Staff were aware of their responsibilities; they were able to describe to us the different types of abuse and what might indicate abuse was taking place. The registered manager was very clear about processes and when to report concerns to the local authority, police and CQC.

Most people had one to one staff support during the day, agreed through risk assessments via the commissioners of the service. We saw these were reviewed regularly and if there were incidents, the registered manager would review if additional staff were needed. We saw risk assessments detailed how best to spot people's 'triggers' as well as identify how best to de-escalate or manage any behaviour. External health and social care professionals told us they helped to review these plans alongside the staff and people using the service. They told us regular reviews, telephone conversations and general discussions ensured that staff had been following the agreed plans, and this ensured a consistent approach. The registered manager told us part of their role was to ensure staff learnt from any incidents and these were discussed before making changes to care plans.

Comments from health and social care professionals were most positive about the staff and services provided. Comments included "Cannot believe how good this service is. Wish there were more like them. They respect the people who live there, enable and empower them to have a safe and happy life" and "Staff are well trained and are matched to each person who uses the service to ensure they are skilled and knowledgeable to deal with specific needs, I have no worries at all about this service it is excellent". The manager told us that value based recruitment techniques assisted them to select people who had the right qualities and characteristics to meet the individual needs of the people who lived at Riverside Point.

We saw records were kept of incidents and accidents. These had been reviewed in order to identify ways of reducing the likelihood of them happening again.

We spoke with the registered manager of the service and they told us that Bright Futures had a very good staff retention record with all staff having high levels of experience and years of service within the organisation. He told us that staff had been carefully selected and matched to the people who lived at Riverside Point to ensure wherever possible long term stability and success.

As part of the recruitment process the provider used value based recruitment techniques, a clearly defined culture statement and staff competency assessments. Staff records we looked at showed the provider had robust recruitment processes in place thorough pre-employment checks. These included checking each employee's identity, employment history, qualifications and experience. They also obtained references from previous employers and completed Disclosure and Barring Service (DBS) checks. DBS helps employers make safer recruitment decisions and prevents unsuitable people from being employed.

We saw that staffing levels balanced the need for safety whilst acknowledging people's rights to their personal space. Staff were provided in appropriate numbers to meet the assessed needs of each individual throughout the daytime hours of 07.45am until 10.00pm with four sleep in staff covering the night hours.

The registered manager told us that thorough planning took place in respect to allocating staff to work in Riverside Point. This was to ensure there were sufficient staff with the right skills, experience and understanding of people to meet their needs. Staff confirmed there was flexibility in the staffing levels, and adjustments made, so staff could work individually with people when needed, or provide additional help when people were ill or taking part in social events.

People were being supported to take their medicines and we saw this had been managed safely by trained staff. People we spoke with had no concerns with how their medicines were being given to them.

The medicine administration records (MAR) we looked at had been completed correctly with no unexplained gaps. This showed that people were being given their medicines as prescribed by their GPs. Staff spoken with were very clear about all aspects of medication management. Staff told us they counted and checked the medicine administration records at every handover and if any discrepancy was found this would be reported and investigated by the registered manager without delay. We saw there had been no medication errors noted within the last twelve months.

Arrangements were in place to assess wider risk and respond to emergencies. The registered manager operated an out of hours on-call facility which people and staff could ring for any support and guidance needed. Risks associated with the safety of the environment and equipment were identified and managed appropriately. Regular fire alarm checks had been recorded, and staff knew what action to take in the event of a fire. Each person had a personal evacuation plan in place should they need to leave their residence in an emergency. Health and safety checks had been undertaken to ensure safe management of utilities, food hygiene, hazardous substances, staff safety and welfare. There was a business continuity plan. This instructed staff on what to do in the event of the service not being able to function normally, such as a loss of power or evacuation of the property. Staff had access to information about who to call and what action to take in an emergency.

Is the service effective?

Our findings

People told us they had 'got better' since living at Riverside Point. Comments included "I love being here. I have got my space and my toys and things and it is really good. I love the staff as they are kind to me and they are my friends. I am much better now and can go out on my own", "It's lovely and I can do things now that I could not do before. I have got better and am happy. Love my room, love the staff, they make me better" and "The staff know all about me and what makes me happy and what makes me sad. They know what I like to be called, what I like to eat and the things that make me happy. It's so good here you know".

Relatives without exception were high in their praise of the effectiveness of the service. Comments included "(Name) had very complex needs and I was in despair about the future. This was before we were introduced to Bright Futures. I am so amazed at the progress (name) has made. It totally exceeded all my expectations. (Name) is now able to do so many things and is very happy and contented. The staff are amazing; they are so skilled and committed to providing personalised care which is effective, progressive, developmental and aspirational. I thank them for giving (name) their life back", "I have never seen teamwork work so well. All staff are dedicated and totally committed to assist the young people to develop and grow. I would say the service is brilliant, innovative, and supportive to both the young people and their families. How thankful I am with everything they do" and "(Name) is more content than I have ever seen. (Name) is much healthier and happier than ever before, thanks to the staff at Riverside Point".

Health and social care professionals told us they were more than happy with the effectiveness of the service. Comments included "The staff ensure that all health care needs are monitored and reviewed and they enjoy most effective communication with our healthcare team", "Unique service in which the team dynamic balance is superb" and "The transformation of the young man in Riverside Point was amazing and continues to progress. I believe this transformation would not have happened in other placements and again praise the dedication of the staff there and their commitment, working through any challenges as they arise ensuring they work with the individual not make the individual fit what is needed."

People's relatives told us that the service worked creatively to find ways for the people who lived at Riverside Point to settle. They said the layout, décor and furnishings focused upon creativity to ensure feelings of home and identify. One person told us that the service director had visited their home prior to their relative being placed at Riverside Point and had photographed their bedroom and colour scheme to ensure this could be replicated when the person moved into the home. They said this worked so well and there was no sign of anxiety or disruption when they went to live at Riverside Point.

The registered manager told us that they had found the utilisation of colours, high quality furnishings and personalised wall decoration created a safe and effective environment to minimise the effect of heightened anxiety and challenging behaviour.

Records showed staff received appropriate training. They had undergone an induction which included the standards set out in the Care Certificate. The Care Certificate replaced the Common Induction Standards and National Minimum Training Standards in April 2015. The Care Certificate is an identified set of standards

that health and social care workers adhere to in their daily working life. Training included for example, moving and handling, infection control, food hygiene, medicines management, safeguarding of adults at risk and the Mental Capacity Act 2005 (MCA 2005). The organisation had recently developed their own E learning resource which allowed the staff team to access further training of their choice. Staff told us they had guidance and support when they needed it. They were confident in the management and were happy with the level of support and supervision they received. They told us that the registered manager and site manager were nurturing and always available to discuss any issues such as their own further training needs. One staff member told us they had accessed extra training related to behaviour management and had developed innovative ways of managing behaviour which challenged. Examples given included the use of toy therapy, touch therapy and time out sessions.

Each person using the service was supported by a small team in which staff were matched to the person they supported through identified skills, experience and personality. Wherever possible people were included to recruit staff to provide their care. Thorough induction processes were in place and new staff were supported through positive mentoring and fortnightly supervision during the first six months of employment.

Records showed staff took part in frequent supervision sessions, team meetings and reviews with people. One member of staff said: "If I ever need any help there is always someone there to ask".

We saw people's mental capacity had been assessed and taken into consideration when planning their care needs.

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 refuse care and treatment when this is in their best interests and legally authorised under MCA. The authorisation procedures for this in care homes are called Deprivation of Liberty Safeguards (DoLS). 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 were being met."

Six people were subject to DoLS authorisations at the time of our inspection. The organisation employed an integrated practitioner who was qualified in both social work and mental health nursing. We met with her and she advised that part of her responsibility was to submit DoLS applications to the local authority. Discussions evidenced she knew when an application should be made and how to submit one.

Capacity assessments and consent documentation was completed with people or their relatives during the initial assessment and on-going care reviews. Staff spoke confidently about how they involved the people they supported to make decisions. For example offering a limited number of choices to not overwhelm the person or visually showing people choices of what they would like to wear. Staff gained people's consent before carrying out any care support tasks such as obtaining consent before medication was administered.

People were supported to maintain a healthy diet. People's care plans were individualised to record the support they required with mealtimes, and where necessary additional advice and guidance was obtained from appropriate professionals. People that required support and monitoring were assisted discreetly and with understanding. People were empowered to learn about different cultures and foods, and to understand how to eat a balanced diet. Through monthly monitoring of the young adults' weight the staff

team found that one person who used the service was increasingly putting weight on. Staff notified the registered manager prior to contacting the Integrated Practitioner and Learning disability nursing team. After initial periods of monitoring the issue was escalating with the person's weight continuing to increase so best interests meetings were held and decisions made that it was in (name) best interests that adaptations in his diet and lifestyle were required to ensure his positive health. Meetings were held to identify least restrictive ways to achieve this amongst all of the professionals involved in his care. Team discussions were held to ensure consistent and positive messages were being communicated to him as any fluctuations would cause his agitation and subsequent challenging behaviours to rise. We saw details of (Names) dietary intake and his portion control. Records showed he now had a smaller sized plate (one of which had been sent up to college with him). Secondly regular walks were incorporated into (Names) day. Comments included (Name) isn't big on exercise however will manage a walk. Each lunch time (Names) support staff will take him for a local walk and I believe (staff member who everyone reports is great with (Name)) is happy to attend on these walks should he be able.

The registered manager and staff were committed to promoting people's health and wellbeing. Each person had a personalised health action plan which staff supported people to follow. This set out their specific health needs and provided guidance for staff about how to monitor and improve people's health. The registered manager actively supported staff to make sure people experienced good healthcare and led meaningful lives. They ensured that specific activities were done by staff who had an interest in those activities and were a good companion for the person they supported. For example, if a person was going to exercise classes the staff member supporting them also liked exercise and so they were able to enjoy the activity together.

People were encouraged and supported to lead healthy and active lives regardless of their physical abilities. The staff team organised by the registered manager were constantly assessing people's needs through observing and communicating with people. Staff discussed what would benefit people's health in regular meetings and reviews. We saw that the service had effective engagement meetings with Warrington Community Learning Disability Team. They told us that this collaborative work ensured that people who lived in the home accessed community services such as GPs, Dieticians, Opticians, Dentists and other specialist healthcare providers. We saw that implementation of the 'Let's Check Health and Wellbeing' file had enhanced the recording of health checks and feedback from all healthcare professionals and was used as a live document in conjunction with the person's personal care file and would involve staff supporting the individual to make and attend all health appointments.

Staff told us that they had robust systems in place to maintain successful relationships with internal and external people who used the service by ensuring they were provided with all relevant information and support in a timely and professional manner. These relationships included the people supported by the service, their families and advocates, colleagues, commissioners, regulators and other stakeholders.

Is the service caring?

Our findings

Comments from people who used the service and their relatives about the staff and services provided included "I love them all, they are my friends", "They are special people", "They are like my family". All the people we spoke with responded 'yes' when we asked them if staff were caring towards them. They were able to tell us names of the staff who supported them which indicated long standing relationships with staff. Relatives told us they felt the staff and the service they offered to their loved ones was excellent and very caring. Their comments included "This place is an absolute godsend to us. We have never seen such love and care provided in all the years (name) has been looked after. When we found this place it seemed we had won the pools" and "Such caring, lovely committed people who only want what is best for the people who live here and their families. We are invited to 'get togethers' when we feel like one big happy family, even the owner attends and makes us all feel so relaxed".

Staff displayed an empowering and empathetic attitude to support people and their personal development. Staff had detailed knowledge of the people they cared for. They understood when it was appropriate to offer additional support and guidance, and when people needed to assess and resolve situations for themselves with little support or gentle guidance. The attitude and motivation of staff to see people flourish was evident throughout the whole team and they genuinely put people at the heart of everything they did. This strong commitment to providing people with person centred care and support was evident in every aspect of care provided by the staff, and it was evident from care records that this attitude and the efforts staff went to was maintained at all times. A relative said: "Staff work in a way that assists people to know people's strengths and weaknesses and enable them to make their own decisions".

Staff showed genuine interest and concern in people's lives and their health and wellbeing. People valued their relationships with the staff team and often referred to the service as 'my home'. People were relaxed and confident around staff and expressed the fondness they had for each other. Staff chatted and joked with people in a friendly and informal way. Staff were highly motivated to provide the best care each person required and this was clearly visible throughout the service. Staff frequently went above and beyond the required expectations. For example staff regularly stayed on duty beyond their shift times to provide support for people as they needed it. A member of staff said: "We do feel part of a family and are not clock watchers. We try to ensure that people who live here are fully supported and know that we are around for them. Staff work together as a team, we all get on and make sure there is always a happy family atmosphere".

Staff told us about a person who spent a long time away from their family. The relationships had been on occasions tense and emotionally difficult for the person because they did not see their family as often as they would have liked. With staff support they progressed and were now seeing their family on a regular basis with occasional overnight stays without having staff in attendance. The family told us how very much they appreciated this support. They said that the registered manager had given them his mobile number and told them to call him at any time if they experienced any problems with the overnight stay. They said "We could not get over this immensely caring approach".

We saw that the service had recently employed a youth inclusion worker to support people with their

wishes, hopes and community integration. We saw that this had impacted very favourably upon the people who lived at the home who had been assisted to discuss equality and diversity, obtain information about areas of concern for them and gain knowledge to enhance their life choices. We saw that one person had been able to make new friends through social media sources with the assistance of the youth inclusion worker. This person said they felt very happy that they were able to speak with more people and have a much wider social circle.

Staff told us that Bright Futures believed that everyone deserved respect. They said that respect was about feeling valued for who you are, for what you achieve and for your ambitions. They said "Respect values the differences that make people individual and does not accept discrimination or offensive behaviour. Respect helps people feel safe, so aggressive behaviour and offensive language is not acceptable. Respect means people feel confident that information about their lives is understood to be personal and ensures it is treated with care and respect. Respect requires people to help each other to maintain personal dignity". We saw that part of the role of the integrated practitioner was to assist people through mediation and advocacy to be active citizens whose rights were upheld and whose individuality was valued.

Staff we spoke with were able to explain how they both supported people's needs while also helping to manage risks their behaviour might pose. They said the registered manager, integrated practitioner and youth inclusion worker set the tone by the way they approached care plans and activities, always looking for new opportunities for people using positive risk taking to achieve higher levels of choice and independence. For example involving people in all decisions where they had the capacity to do so, looking at work and occupational opportunities and developing their personal interests. One young person told us that they had been able to use public transport on their own and stay over with friends. They said that this made them feel 'like everyone else'. Staff said "The inclusion, the teamwork, and the fact we give people a feeling that they belong helps us to achieve opportunities to maximize people's lives. We have been able to secure employment for people and enable people to join clubs, meet new friends and generally enjoy life. We assist people to regain social skills and spend time with their family within the family home". One relative told us "The care and support provided works like a rehabilitation scheme. The staff are so caring and help people to achieve their goal. Marvellous people".

We saw that the service used creative methods to obtain the views of people with limited communication skills. Staff used what they termed a base sheet which they completed with each person using the service on a daily basis on 'what you have enjoyed today' and 'what could be better tomorrow'. This sheet was completed in written or pictorial format and identified what went right and what could be improved upon. Staff told us this worked well and enabled all the people who used the service to express their views.

We found that where possible the service supported people to be actively involved in making decisions about their care and support. Information was provided to help people understand the support available to them and this information was also provided in an accessible format. Staff had accessed alternative communication methods to enable people to be involved in decision making. Examples of this included supporting a person to understand and consent to a proposed tenancy agreement by use of an easy read format.

Professionals we spoke with told us they felt the staff and people using the service had a mutual understanding and effective relationship. This meant many issues were generally managed locally without having to refer for external advice and support.

A social care professional told us, "In respect of Bright Futures and Riverside Point I have fantastic experiences and have always said to colleagues there should be more providers like this. The providers

have been creative to ensure they are able to meet young people's needs in a way that works with the individual. In respect of my involvement I have always found the staff to be helpful, approachable, dedicated and committed to helping wherever they can".

Staff talked with kindness and compassion about people. We saw their interactions with people and it was apparent that they were fond of people and supported them through happiness and sadness, achievements and failure with great interest and dedication. For example a person had very little social interaction exhibiting frequent aggression. We saw that the relationship between staff and this person was one of trust and mutual rapport and we were told that after a period of staff working with this person and the local authority the person was supported to successfully find employment and socialise with friends. There was an immediate positive effect with the person feeling more relaxed and in control of their life. This person's social worker told us that staff had greatly assisted this person to move on with their life and make friends and they provided such good care and support to enable them to move on with their life.

We saw that staff respected people's confidentiality. Records were kept securely and completed by staff privately so that others would not see them. We saw from recordings that staff kept detailed notes which were person centred and positive.

People were supported by staff in the community to help them manage risks around behaviour. Staff told us how this did not limit people's independence and freedom in the community, and that people had consented to these levels of staffing. Staff told us how this was provided discreetly by way of observation, staff being on hand but not actually walking with the person and other discreet supportive actions.

Is the service responsive?

Our findings

People told us that the service was very responsive to people's needs. They said needs were assessed daily to make sure any changing needs were identified and met. Comments included "We cannot thank the staff enough for the way (name) has progressed since being here" and "Staff have made sure that improvements in (name) behaviour had been identified and celebrated and future plans modified. The improvement in (name) is amazing".

Health and social care professionals told us the service was very responsive. Comments included "The staff had the best knowledge of the young man in placement and were also able to help social workers to monitor and review his care in respect of gathering information if required and speaking remotely which allowed things to happen as they arose rather than waiting for specific visits".

We saw staff of the service had established a very good working relationship with people they supported. Observations of staff in the company of the people they supported evidenced that they worked in partnership showing each other respect. They discussed all aspects of daily life and planned ahead for the future ensuring that people's choices and individuality were addressed.

We saw that Bright Futures had developed a care and support system which was truly person centred. All staff had received training to develop plans which promoted person centred support. People told us that these plans were jointly developed with the individual or their family. Staff said the plans were fully personalised documents covering background, health, communication, needs, choices and aspirations. Records gave clear guidance to staff on how best to support people. For example a person's daily routine was broken down and clearly described so staff were able to support people to complete their routine in the way that they wanted. Staff felt the care plans were informative and provided clear guidance in how to support people.

Plans we looked at included information about people's life history, interests, individual support needs and details such as food preferences and what was important to the person. People's care plans and risk assessments included specific plans for their health conditions, such as autism, behaviours that challenged and how to support them if they became unwell. We saw that each plan was personalised and captured the needs of the individual. We also saw that the plans were written in a style that would enable a staff member reading it to have a good idea of what help and assistance someone needed at a particular time.

The registered manager told us that staff encouraged people who lived at Riverside point to be very much involved in the care planning and decision making process. We saw that one plan had been fully completed by an individual who used the service with support from the Integrated Practitioner.

Records showed people's changing needs were promptly identified and kept under review. For example, one document showed strategies relating to specific behaviours had been assessed regularly during a period of increased anxiety.

Staff were sensitive towards people's emotional needs and they used creative methods to enhance people's social interaction. For example, one person who moved to Riverside Point was anxious about making friends and was at risk of isolation. The person was frightened and on occasions displayed behaviours that may have challenged others. Over a short period of time staff worked with the person with great patience and built up a positive and trusting relationship with them. They suggested attending a work based placement and engaging in more social activity and a member of staff said: "(Name) has moved on now and is doing really well, he was really worried at first but has achieved so much and made new friends". Staff told us "The matching of staff is crucial so individuals are supported by people that they like, people that they can develop positive relationships with and with whom they enjoy shared interests and activities". We saw records to show that staff followed the young people when they transitioned from Bright Futures children's services. The registered manager told us that staff were recruited and selected to meet people's specific needs and as a consequence once the positive relationships had been developed staff remained with the young person as their key worker.

Systems were in place to ensure people's care plans were reviewed on a regular basis. Daily records were also reviewed at the end of each shift and we saw that they held detailed information about the care and support provided.

The service arranged family support meetings where participation was encouraged from a range of professions to include mental health services, social workers, family practitioners and educational representatives. Care and support plans were in place to support individuals with learning and employment aspirations.

Staff told us that their role was also to promote a warm and positive approach to the friends and families of the people who used the service and to involve families and significant others in the planning of individual support, where this is in accordance with the individual's preferences or best interests. Staff said they ensured that the people they supported were enabled to become as independent as possible and to grow in confidence, competence and personal effectiveness. They told us they did this through the provision of practical assistance, support, teaching, advice, role modelling, encouragement and positive feedback.

Relatives and staff told us, and records showed that the diverse activity programmes people were following depended on their abilities and interest. Every person's daily living was planned around their preference. Records showed that one person who had been socially isolated had, with intensive support from staff, formed a new circle of friends and was able to travel to meet them and occasionally enjoy overnight stays.

We found another example where the person centred approach was used and staff demonstrated it had a positive impact on a person's life. Relatives told us that (Name) had settled so well at Riverside Point and with a lot of input from staff was now able to have time alone unsupervised for the first time in his life. We saw that detailed information was on file about relaxation techniques for one person which included how toy therapy was used and what music made them calm. Staff were fully aware of all aspects of all people's needs wishes and choices and showed a genuine passion in making people's daily life interesting and fun.

Staff told us that the service successfully supported people to live active lives and to make a positive difference for people which had not been possible before they started using the service. People were encouraged to be motivated and inspired by their achievements. People were supported to learn and were enabled to develop computer skills, undertake employment, work as volunteers and take part in many other social activities. We saw that people had been empowered to celebrate family occasions, family holidays and other celebrations in ways that mattered to them, for instance supporting individuals to take an active role in arranging their own birthday party or making cakes for a loved one. Other activities included visits to

the cinema, going out for tea, social clubs, shopping trips, days out and short break holidays. We saw that a 'Friends Night out rota' had been organised by staff and people who used the service. We saw a copy of the quarterly rota which identified proposed social activities. These included a bingo night, a film night, drink in the pub, curry night, outdoor walk, trampoline, and a disco night. People using the service told us that these activities had been arranged by speaking with each other and making decisions about what they all liked to do. They said that disco nights were especially good.

The service specialised in supporting people who may have previously challenged services and they benefitted from a bespoke personalised service offered at Riverside Point. Staff managed people's behaviour through positive risk taking and engagement, working closely with families to manage transition between services and giving people a sense of worth by promoting their rights. For example before one person was referred to Riverside Point they had lived in a setting in which they had demonstrated aggressive behaviour to staff and they had become more and more socially isolated. Staff respected their choices, their right to privacy and enabled them to take their own decisions about how they wanted to live their life. The person had become more independent, their behaviour had changed and they were more confident in the community. We found they were leading a full and active life; they only needed one staff's support at present whereas before they had two to one support. They enjoyed a wide range of activities in the community, they had made new friends and started to re-establish some old friendships and were being assisted by staff to move into independent living. A health and social care professional told us that they could not believe the progress that had been made in this person in such a short time and this had certainly changed their life around much for the better.

Staff supported people to overcome barriers such as their complicated disabilities and medical conditions so they could become valued and respected members of their community. One relative told us since being at Riverside Point their family member's quality of life had significantly improved. They said "I cannot believe the changes to [Name] life; it has been enhanced so much with the way the staff respond to [Name] needs and wishes. [Name] has built upon his skills and is treated so well and all his wishes are met". Another relative said that the staff considered them just as much as the person who used the service. They said "We have been through such a lot and never thought we would find a suitable place for (Name). We cannot express enough our delight in the success story since (name) has been able to live here. The staff are wonderful; they really care about us as well as [Name]. You would not believe how good they are. We are included in everything. As a service it is second to none and we can tell you we have seen a lot of services before we found Riverside Point. You could not get a better place and as people you could not get anyone who cares more about the people than the staff. (Name) has improved so much since being here. We feel that the word re-enablement should be used rather than a care home. They provide excellent care but more than that (Name) is so much better now and is getting her life back".

The team also organised social care reviews with social workers, to ensure that the care delivered was agreed and met the expectations of the people and the social work team. A social care professional told us, "Staff are exceptional in sharing information. They keep both me and (Names) family informed about all significant events and hold regular meetings and reviews".

The service had a fully documented and published complaints procedure with a pictorial version available in the service user guide. We saw a complaints log was used to document any complaints which would be investigated and responded to within the guidelines set and in accordance with the duty of candour information about any incidents that may have caused harm were shared with individuals, relatives and carers. People told us that they had not had any reason to complain but if they did 'they knew what to do'.

Is the service well-led?

Our findings

Comments from people who used the service and their relatives were highly complementary about the staff and service delivery. Comments included "I am delighted that we were able to access this service. They are amazing people who assist (name) to live a fulfilled life. The service management is top class everyone knows what they are doing and why they are doing it.", "We would never have believed that there were places like this. We have struggled in the past to find an appropriate place for (name). Once (name) went to Riverside Point, we have never looked back. Such great management and sense of purpose. We don't know what we would have done without them".

Under the direction of the registered manager staff supported people to overcome significant barriers and achieved positive outcomes in their lives. We saw that a 'do something positive' plan was in place for a person who used the service and was at risk of becoming socially isolated. The plan involved the person achieving something positive each day such as going for lunch, attending college, meeting friends. Their parents told us that they could not believe the difference this had made to the person life. They said they were so proud of their achievements they could not thank Bright Futures enough.

The approach and ethos of the service was clearly communicated to everyone involved with the service by the registered manager.

Staff were most complimentary about the leadership and the way they felt motivated and supported by the managers. Staff told us that the service was very well managed and everyone knew what their role was. Comments included "It's a pleasure to work here. The service could not be better, I feel valued, empowered and very much part of a team", "I think Bright Futures is a great place to work. We are trained and motivated to provide excellent person centred care to enhance the life skills of the people who live here. Staff really work well together, the management is great. There is nothing they ask us to do that they would not do themselves" and "The people I work with at all levels make the environment professional, friendly, motivational and fun. Staff are treated with respect and feel valued" and "The management team provide excellent support, the training is second to none, my colleagues are committed to the provision of person centred care, I feel so lucky to be working here, it's a wonderful well managed service". One person said. "Wonderful management style, works very well, everyone is motivated and happy. The general atmosphere is of trust and respect".

Records showed the service had a track record of actively seeking and acting on the views of others through various creative methods which included group meetings, regular reviews, social events and family consultation documents. We noted that all feedback was addressed and acted upon where necessary. We saw that all outcomes were recorded and cascaded to people who used the service and their families and any other professional who was involved with the service. A health and social care professional told us "The service works with us and the person and their family to monitor review and plan ahead for the people who we place here. Staff work tirelessly in enabling the person to improve and move on to be more independent. Particular focus is placed upon the professional views of staff to engage in the process of continual improvement. The culture of dedication and commitment is second to none".

Records showed that the organisation was in the process of identifying members of staff who would act as 'I care' Ambassadors. The registered manager said this partnership was about professionals coming together to promote social care as a positive choice for employment, to improve the image of the service and to help the right people join the social care workforce

The service had an open and transparent culture, with clear values and vision for the future. The management team believed that 'hands on' management, inspirational and inclusive leadership were critical to the unique direction of each individual's life. Records showed that management worked side by side with all staff members and encouraged communication and feedback.

The provider used their quality monitoring systems to continually improve and develop the service. We saw examples of improvements and changes that had been made as a result of feedback. Examples included changes made to the medication system in response to feedback from pharmacists and a traffic light behaviour programme implemented via discussions and feedback with health and social care professionals. This was used with most positive effect to assist a person to monitor and review their behaviour. The service had recently introduced an integrated practitioner and a youth inclusion worker to assess contribution of better supporting personalised, integrated support especially for people with more complex and individualised needs.

Systems had been designed to record information accurately and in varying formats for people who request information to include local authorities, health professionals, families and commissioning authorities.

The manager understood their legal obligations including the conditions of their registration. They had appropriately notified us of any significant incidents and proactively kept in contact with local commissioners. There was a strong emphasis on continually striving to improve the service for people.

Senior staff carried out regular audits of all aspects of the service to review the effectiveness of the support people received. The provider made sure actions were followed through, and issues identified in one audit were followed up in the next audit to ensure the service had made the necessary improvements.

The registered manager strongly encouraged a positive approach to risk taking and acknowledged that this sometimes led to mistakes; however they promoted a strong 'no blame culture' whereby they discussed what went wrong, what they had to do differently and the way forward.

Relatives, staff and professionals all spoke highly of the registered manager and the ethos of the service. Relatives described the positive differences the service had made to their family members quality of life. One relative told us "I can never thank them enough for providing me and (name) with peace of mind. This place is just amazing. They are skilled, professional, caring and reliable. It has taken me a long time to access this service but I am so grateful to everyone".

Health and social care professionals told us that the management team of Bright Futures were proactive in challenging decisions made by external organisations when there was a possible negative impact on people they supported.

Social care professionals were also high in their praise of the service. Comments included "The service is well led I am very pleased with the service that Bright Futures deliver to the service users, their staff team is consistent, they have risk assessments and care plans which are kept updated. They [staff/management] will contact professionals if and when they have concerns", "Very professional and reliable service. Staff pass on need to know information as and when required and keep us up to date with the support plan" and

"They provide an excellent service, we never have any complaints".

Throughout the inspection we evidenced the 'can do' attitude of staff, the strong value based attitude of the management team, how they constantly looked to improve services, led through example, how best practice was implemented and followed throughout the service.