

Brightside Homecare Ltd

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Inspection report

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Tel: 07460022206

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18 November 2021

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Brightside Homecare Limited is a domiciliary care agency providing personal care and support to people in their own homes. At the time of the inspection, 30 people were using the service.

Not everyone who used the service received personal care. The Care Quality Commission (CQC) only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

People received a good quality service and felt safe with care staff.

People received person-centred support from staff who knew them well. There were enough staff to provide a consistent and reliable service. People and their relatives spoke positively about staff and managers and their overall experience of the care provided.

People had comprehensive care plans and risk assessments with information about their needs and preferences, so staff knew how to support them. Staff were responsive to changes in people's needs and adapted their support accordingly. People received support to access social and leisure opportunities of their choice.

Medicines were safely administered by trained staff.

Recruitment and selection procedures ensured suitable staff were employed.

Where it was part of people's care package, staff prepared meals and drinks to support them in maintaining a good diet.

There was a very strong focus on staff support and wellbeing, which helped promote a positive, person-centred culture and motivated the staff team. Staff told us they had positive working relationships with the managers and felt this helped them to fulfil their roles.

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.

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

Rating at last inspection

This service was registered with us on 26 November 2019 and this is the first inspection.

Why we inspected

This was a planned inspection based on the date the provider registered with the CQC.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Brightside Homecare Limited

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

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

The service had two managers registered with the CQC. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 15 November 2021 and ended on 26 November 2021. We visited the office location on 18 November 2021.

What we did before the inspection

We used information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they

plan to make. This information helps support our inspections. We sought feedback from the local authority and professionals who work with the service. We used all of this information to plan our inspection.

During the inspection

We spoke with three people who used the service and three relatives about their experience of the care provided. We spoke with six members of staff including the provider, registered manager, one care coordinator and three care staff.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with three professionals who work with the service.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe and spoke highly of care staff and managers.
- Systems and processes were in place to report, record and review safeguarding concerns.
- Staff understood their responsibility to report concerns and felt confident managers would take appropriate actions.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People had individual personalised risk assessments to guide staff on how to safely support them.
- Staff supported people to take positive risks, enabling people's independence and choice.
- Managers monitored concerns, accidents and incidents regularly. Where lessons could be learnt, the registered manager took action to reduce risks to people and shared information with staff and other health care professionals to prevent similar incidents.

Staffing and recruitment

- The provider employed enough skilled staff to meet people's care and support needs.
- Staff were recruited safely and introduced to people before providing care and support to them.
- Staff completed a programme of induction before supporting people independently.

Using medicines safely

- Medicines were managed safely. Systems and processes were in place to ensure people received their prescribed medicines at the right times.
- Staff received training and refresher training on administering medicines.
- Staff competency was assessed, although this was not always recorded. We spoke with the registered managers about this and they addressed this following the inspection.

Preventing and controlling infection

- People confirmed staff attended visits wearing appropriate personal protective equipment (PPE).
- Staff were part of a testing regime, however, records to evidence this were not kept. We discussed this with the registered managers who took immediate action to address this.
- The provider ensured good levels of PPE was available for staff.
- Staff received training on donning and doffing PPE correctly.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's care and support needs were assessed prior to receiving care and support in their own home. This allowed staff to support people positively from the first interaction.
- Staff understood people's care and support needs alongside their preferences.
- The registered managers understood and followed best practice guidance, which was embedded within policies and practices throughout the service.
- People received personalised care and felt listened to by care staff.

Staff support: induction, training, skills and experience

- All staff complete a programme of induction and were introduced to people before they supported them.
- Staff were matched to people where possible taking into consideration, for example, their religious or cultural preferences.
- Staff were supported by the provider to achieve a recognised national qualification to enhance their skills and knowledge.

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

- Information about people's dietary requirements, needs and preferences were recorded in their care plans. One person told us, "[staff name] knows my meal time routines and how I like my tea and toast."
- Staff supported one person who was at risk of malnutrition. Staff clearly recorded the support given including support to choose higher calorie meals to maintain a healthy weight.
- Staff provided appropriate support with eating and drinking, encouraging independence where possible.

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

- The provider made referrals to external health care professionals including speech and language therapists, occupational therapists and district nursing teams when required.
- Risks associated with people's health was recorded and well managed by staff who reported changes quickly to ensure timely interventions took place.
- Staff supported people to access healthcare services and support. One person told us how their care staff supported them to arrange delivery of their medicines when they were struggling with their usual pharmacy.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- The provider ensured care and support was provided in line with the principles of the MCA, ensuring consent was gained prior to receiving care and support.
- One health professional told us, "I feel (provider) have a good understanding of relevant legislation such as The Care Act and Mental Capacity Act and how these interact in practice", when describing how the provider had worked with a person with particularly complex care and support needs.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People praised the care staff and spoke positively about the service they received . One relative told us, "I can relax when [relative's name] is with carers, knowing they take them out to places they'll enjoy."
- Staff understood what was important to the people they supported.
- Equality and diversity was recognised throughout people's individual care and support plans.
- Managers and staff received thank you cards and letters from people who used the service and their relatives.

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

- People were included in decisions about their care and support. This was reflected in people's care plans and daily records. One relative told us, "The managers came and sat with me and my relative to understand the finer details about what support my relative needed from them before the carers even started coming in."
- The provider actively sought feedback from people about their care and support needs, making changes to how care was delivered if required.

Respecting and promoting people's privacy, dignity and independence

- Staff understood how to promote people's privacy, dignity and independence when providing care and support. One person told us how staff respected their wishes by making sure their care records were not left visible for visitors to see or read about the care and support given to them.
- People were encouraged to set goals as part of their care planning, including driving, going swimming and attending local church groups. We saw how care staff supported people to achieve their individual goals and the impact this had on their overall health and wellbeing.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Staff were responsive to people's changing needs. Care plans were updated in a timely manner when people's needs or preferences changed.
- People were consulted regularly about their care. One person told us, "They ask if I'm happy with my care all the time, I know I can make changes if I want to."
- Relatives were included in developing people's care plans to help make sure the support staff provided met their needs.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The provider ensured documentation was available in an accessible format where required.
- Care plans detailed people's specific communication needs and guidance for care staff to follow to ensure effective communication.

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

- Staff understood the importance of supporting people to maintain relationships and continue as active members of their communities.
- One person was supported by care staff to attend prayer groups and worked at the local hub which is part of the Church. Another person was encouraged by staff to complete their physiotherapy to regain the ability to drive again and reduce social isolation.

Improving care quality in response to complaints or concerns

- People felt confident any concerns or complaints would be acted on quickly.
 - The provider had a clear complaints process. People were able to raise concerns in a way which suited them.
- Managers responded to complaints or concerns quickly and acted to resolve complaints or concerns satisfactorily.

End of life care and support

- Staff were trained in end of life care and support.

- Future planning was included in people's care plans, where necessary. Information was clear and guided staff on how to deliver compassionate and pain-free support to people nearing the end of their life.

Is the service well-led?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered managers were passionate about providing a good quality service. Staff understood and demonstrated these values throughout their visits to people.
- There was regular monitoring and oversight of the service provided. Audits were carried out regularly and covered areas such as training, quality assurance, staff supervision, medication and policies and procedures.
- Records including care plans were audited in addition to staff spot checks to monitor the quality of care visits.
- The registered managers were aware and compliant with their responsibility under the duty of candour. Statutory notifications were submitted to the CQC as required.

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

- The registered managers had strong values of person-centred care, empowerment and quality support. These values were passed to the management team and the staff team as a whole. They told us, "Our philosophy is to keep people at home, we want to make a difference to people and go above and beyond."
- The service delivered person centred care, which produced positive outcomes for people, increased their life skills, confidence, independence and wellbeing.
- The registered managers were keen for staff to have access to a wide range of training and opportunities to develop their careers in social care.

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

- Health professionals spoke positively about the service and how they worked with people to achieve goals and good outcomes. One health professional told us, "They are thought of highly within the Adult Social Care Team I work within, due to their record of engaging with difficult cases and positive results."
- People and their relatives were regularly consulted for feedback about their experience of the service. Any suggestions were acted on in a timely manner.
- Staff were encouraged to make suggestions on how to improve the service. One member of staff came up with an idea to improve communication between staff. The registered managers acted on this and staff confirmed communication had improved.

