

Light Bulb Bespoke Care, Family Support & Consulting Services Ltd

LightBulb Bespoke Care

Inspection report

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Bedford
MK40 2TE

Tel: 07837870921

Date of inspection visit:

20 October 2022

25 October 2022

Date of publication:

03 November 2022

Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
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Is the service effective?	Good ●
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Is the service well-led?	Good ●
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Summary of findings

Overall summary

About the service

LightBulb Bespoke Care is a domiciliary care service providing personal care to people living in their own homes in the community. The service provides support to older and younger adults who may be living with a physical disability, mental health needs, a sensory impairment or dementia.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of our inspection there were 14 people receiving personal care at the service.

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

People and relatives were happy with the support given by the staff team. One person told us, "I am very happy with how things are going. The staff are all wonderful."

People felt safe being supported by the staff team. The registered manager had assessed risks to people and put measures in place to mitigate risks as far as possible. There were enough staff to support people safely. People told us there had been no missed care visits and staff arrived on time for their care visits. Staff supported people safely with their medicines and followed good infection and prevention control (IPC) measures when supporting people. Systems were in place to learn lessons if things went wrong.

Staff had training to support people effectively and the management team checked their competency to perform their job roles. People's needs were assessed before they started using the service. Staff supported people to eat and drink if this support was needed. Staff supported people to see health professionals and followed professional advice to help support good outcomes for people. 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.

The registered manager and care co-ordinator were passionate about the service. People were positive about how the service had improved since the registered manager started in their job role. Systems were in place to audit and monitor the quality of the service. Actions were taken if improvements were identified. People, relatives and the staff team were engaged with and encouraged to feed back about the service. The staff team worked with other professionals to help support good outcomes for people. There had been significant improvements at the service since the registered manager started working there.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 21 December 2021)

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

At our last inspection we recommended the provider review systems in place to safely recruit staff, support people in line with the Mental Capacity Act and collect feedback from people and the staff team about the service. At this inspection we found the provider had made improvements in these areas.

Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection.

We carried out an announced unannounced comprehensive inspection of this service on 06 October 2021. Breaches of legal requirements around safe care and treatment, staffing and good governance were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve and updated us on their progress on a monthly basis.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe, Effective and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Light Bulb Bespoke Care on our website at www.cqc.org.uk.

Follow up

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

LightBulb Bespoke Care

Detailed findings

Background to this inspection

The inspection

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

Inspection team

This inspection was completed 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.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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

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 that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 19 October 2022 and ended on 21 October 2022. We visited the location's office on 20 October 2022.

What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider

information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with five people who used the service and three relatives about their experience of the care provided. We spoke with seven members of staff including care workers, care co-ordinators and the registered manager.

We reviewed a range of records. This included three people's care records and numerous medication records. We looked at two 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 reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

Is the service safe?

Our findings

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

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

Assessing risk, safety monitoring and management; Using medicines safely

At our last inspection staff competency and training in medicines was not being checked by the provider and potential risks to people were not being thoroughly assessed. This put people at risk of harm. This was a breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Risks to people had been assessed in areas of their support such as walking unaided, personal care and eating and drinking. Risk assessments were detailed and guided staff to mitigate risks as far as possible. One person said, "I need support with [personal care task] and the staff know exactly what to do to help me. They always do things in the right order which I like as well."
- Staff told us risk assessments were much easier to follow and understand since the registered manager and care co-ordinator had reviewed them. One relative said, "[Staff] are very knowledgeable about [family member's] needs and are so confident. They can usually tell something isn't right just by looking."
- People were supported safely with medicines. Staff had training and regular competency assessments completed by the registered manager or senior care workers to help ensure they administered medicines safely. One person said, "[Staff] are very good at medicines and make sure I always have a glass of water to take them with."
- The care coordinator and senior care workers had systems in place to help ensure medicines were administered safely. These included regular audits, stock checks and reviews of medicines records.

Systems and processes to safeguard people from the risk of abuse

- People felt safe using the service. One person told us, "I feel very safe. Staff know exactly what they are doing with all of my [personal care tasks] and there are always two staff when I use [piece of equipment.]" A relative said, "[Staff] know [family member] so well and take action to keep them safe if things change."
- Staff had a good understanding of safeguarding and knew how to report concerns to external bodies such as the local authority safeguarding team or CQC.

Staffing and recruitment

At our last inspection we recommended the provider review staff recruitment files to ensure that full employment histories were recorded for staff. The provider had made improvements.

- The provider had improved recruitment practices to make them more thorough and help ensure staff were suitable to work at the service. This included full employment histories and other checks in line with legal requirements.
- People told us there were enough staff and staff were always on time for care visits. One person said, "Since I have been with [service] I have not had one missed visit. Even if a staff member can't make it the office staff always sort someone else to come out." A relative said, "[Staff] always arrive on time and have stayed longer if [family member] need any extra support which is excellent."
- People were supported by a consistent staff team. One person told us, "I see the same staff all the time. It is nice as we can have conversations now, we know each other." A relative said, "Having only a few different staff has been great for [family member] as they know the staff well now and brighten up when staff visit."
- The registered manager had systems in place to monitor people's care visit times and durations. Staff told us they had time to meet people's support needs but also to spend quality time with them having conversations. Staff also had time to travel between people's care visits and arrive on time.

Preventing and controlling infection

- Staff were trained in infection control and how to use Personal Protective Equipment (PPE) effectively. One person said, "[Staff] wear masks and gloves all the time. They are very good with all of that."
- People were supported to clean and keep their homes free from infection, if this was part of their support package. One person told us, "[Staff] are so helpful and always mop the floor or iron for me."

Learning lessons when things go wrong

- The registered manager had systems in place to learn lessons when things went wrong. Accidents and incidents were analysed, and any learning was shared with the staff team.

Is the service effective?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

At our last inspection the provider was not supporting staff to be effective in their job roles. This was a breach of regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- Staff had the right training to perform their job roles effectively. The registered manager had sourced training for staff so they could support people with specific health need such as living with dementia or epilepsy. One person said, "[Staff] definitely know what they are doing. They use [equipment] properly." A relative told us, "I am there when the staff have their training, so I know it is good quality."
- The registered manager and care co-ordinator checked staff member's competency. This helped them ensure training had been effective and they were competent in their job roles.
- New staff had an induction at the service which involved meeting people they would be supporting and shadowing experienced staff members. One person said, "If there is a new staff member the regular staff always come in and show them around. It gives me a chance to let them know how I like things."

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

- People's needs were assessed when they began using the service. Assessments focused on people's likes, dislikes and preferences as well as their support needs. One relative said, "[Care co-ordinator] came out and did a thorough assessment for [family member.] It looked at all aspects of daily living and what was important to them."
- The care co-ordinator spoke about how one person had changing needs meaning their care plans and risk assessments needed changing regularly. This was done promptly and in detail, so staff had sufficient guidance to safely support the person. The changes made to these had enabled this person to have positive outcomes and regain their independence in some areas.

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

- People were supported safely with eating and drinking if this was needed. Staff had training in supporting people with specific dietary needs. One relative said, "[Staff] follow the menu so it is always food that [family member] likes. Staff sit with them and make sure they eat slowly so they do not choke."

- Where necessary systems were in place to record food and fluid intake for people. Staff said they would refer people to a dietitian if this support was needed.

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

- Staff knew how to raise concerns with external professionals to support people to stay healthy. One person said, "[Staff] noticed my [health condition] was not getting better when they supported me. They suggested I get in contact with [health professional] and they helped me take steps to get better. I never would have known if it was not for staff pointing this out to me."
- The care co-ordinator and registered manager spoke with us about the work they had done with an occupational therapist to support a person. This had enabled the person to stay in their own home. One relative told us, "[Staff] have always been so responsive and contacted [health professional] for my family member if they have needed extra support."
- Staff supported people to stay healthy in various ways such as encouraging regular fluids or appointments with other professionals. One person said, "[Staff] always make sure I have a drink with me when they leave the care visit."

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

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

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA , whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

At our last inspection we recommended the provider review capacity assessments and best interest decisions to help ensure that people have been given the full opportunity to make their own decisions about their care and support. The provider had made improvements.

- The registered manager had reviewed capacity assessments to help ensure people had been supported to make their own decisions. Where people did not have capacity, decisions had been made in consultation with other professionals, in people's best interests.
- Staff had training in the MCA and had a good understanding what this meant when supporting people. One person said, "The staff are very polite and always listen to what I have to say if I choose to have something done differently."

Is the service well-led?

Our findings

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

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

Managers and staff 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

At our last inspection governance systems were not in place or were not effective in identifying improvements that could be made at the service. Known areas for improvement were not being addressed. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The registered manager, care coordinator and senior carer had effective systems in place to monitor the quality of the service. Audits completed by the management team identified if any actions needed to be taken to improve the service. These actions were allocated and completed in a prompt manner.
- The management and staff team had a good understanding of their job roles. One person said, "The staff know what they are doing. Very reassuring they know the job so well." Another person told us, "I talk to [registered manager] often and they are so knowledgeable and helpful."
- The registered manager was open and honest with people when things went wrong. One person said, "[Registered manager] always rings and apologises if anything goes wrong."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

At our last inspection we recommended the provider review the systems currently in place to support people, relatives and staff to feed back about the service. The provider has made improvements.

- People and their relatives felt engaged with the service and able to feed back. One person said, "[Registered manager] and [staff] are always asking me how things are going or if I want anything done differently." A relative told us, "It is very easy to speak to [management team] and I talk with them a few times a week about [family member's] support."
- The staff team felt they were able to feedback about their job roles and felt listened to by the management team. Staff attended regular meetings and supervisions to discuss what was happening at the service.

- The care co-ordinator and senior care worker put measures in place to help make sure people were communicated with in ways they understood. For example, using photos or pictures to explain what staff would be doing when supporting them. One relative said, "[Care co-ordinator] has done lots of work to make sure [family member] can understand what is happening. This has made it much easier for them to see what is going to happen next."

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

- People and relatives gave very positive feedback about the service. People's comments included, "[Staff] are my reason to live. They are lifesavers and without them I could not stay in my house. There is nothing they cannot do." and, "[Staff] are all very nice and always come in with smiles on their faces, come rain or shine."
- Staff knew people well as individuals and spoke passionately about the support they gave them. People had been supported to achieve good outcomes such as staying in their own homes or regaining independent living skills thanks to the support of the staff team.
- People, relatives and the staff team were empowered to be a part of their support and make decision about what this looked like. One relative said, "[Staff] know person so well now and are proactive to get on top of any issues before they cause any problems."
- People and relatives were complimentary about the management team. One person said, "I think the service is very well led. [Registered manager] has made a big difference."

Continuous learning and improving care

- The registered manager and care co-ordinator were committed to continually improving the service. The work they had done meant the service had significantly improved since our last inspection.
- The registered manager told us they planned to implement further improvements in areas such as the monitoring of care visit times. They were aware improvements took time to fully embed at the service and were conscious of not supporting too many people too quickly to make sure this could happen.
- Staff spoke about how well supported they felt since the registered manager started working at the service. They felt the service had greatly improved and people had benefitted from this.

Working in partnership with others

- The registered manager and staff team linked and worked with health professionals to support good outcomes for people. One professional said, "I think the service has gone from strength to strength in recent months."
- The registered manager has worked with CQC and the local authority to identify actions and improve the service.