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# Tailormade Healthcare Head Office

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

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

### About the service

Tailormade Healthcare Head Office is a domiciliary care agency registered to provide personal care and support to people in their own homes. The service is registered to provide support to older and younger people, people with a learning disability or autistic spectrum disorder, people with dementia, people with mental health needs, and people with a physical disability and/or sensory impairment. When we inspected there were 8 people using the service.

At the time of the inspection the service provided a regulated activity to people with a learning disability and/or autistic persons. We assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a service for this population group.

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

#### Right Support:

Staff supported people to remain independent in their own homes and involved them in decisions about their care and support. A person said the provider and staff 'are good and they listen to me'. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

#### Right Care:

People had regular staff who were knew them well and were knowledgeable about their needs. Staff followed personalised care plans written in conjunction with people and their relatives to ensure the care was how they wanted it. A relative said, "It's very rare to have such receptive managers and carers who respond to [family member's] needs in such a caring manner." Staff treated people with kindness and respected their privacy and human rights.

#### Right Culture:

The service was small and bespoke. It had a positive culture that was person-centred, open, inclusive, and empowering. The provider knew, valued, and supported all the people using it, their relatives, and staff. The service was well-managed, and people and relatives said they would recommend it for many reasons including 'because they do everything they say they will do' and 'because of their compassion and attention to detail'. The provider carried out quality checks and made improvements where necessary.

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

#### Rating at last inspection

The last rating for this service was good (report published 2 February 2018).

#### Why we inspected

We received concerns in relation to staffing and people's care. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. 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 not changed from good. We found no evidence during this inspection that people were at risk of harm from this concerns.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Tailormade Healthcare Head Office on our website at [www.cqc.org.uk](http://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 well-led?**

**Good** ●

The service was well-led

Details are in our Well-Led findings below.

# Tailormade Healthcare Head Office

## **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

The inspection was carried out by an inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

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

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations. At the time of our inspection there was a registered manager in post who was also the provider.

#### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we wanted to be sure there would be people available to speak with us.

#### What we did before the inspection

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 1 person using the service and 6 relatives about their experience of the care provided. We also spoke with the provider and 4 care workers.

We reviewed a range of records including 3 people's care and medication records. We looked at 3 staff files in relation to recruitment, training, and staff supervision. We also reviewed records relating to the management of the service, including policies and procedures.

# Is the service safe?

## Our findings

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

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

Systems and processes to safeguard people from the risk from abuse

- A person and relatives said people felt safe using the service. Relatives said this was for several reasons including people having regular care workers they knew, appearing happy when their care workers were present, and care workers doing things the way people wanted them done. A relative told us, "The carer treats [person] like family, is very transparent, arrives when they say they will, and does all the tasks expected of them and more."
- Staff were trained in safeguarding and knew what to do if they had concerns about the welfare of any of the people using the service. A staff member said, "We have training and talk about it [safeguarding] in supervision and meetings. [Provider] is really on the ball and would act immediately if we reported something to them."

Assessing risk, safety monitoring and management

- Staff knew where people were at risk and what to do to minimise this. For example, a staff member regularly checked a person's skin for signs of deterioration. They told us, "I would call the district nurse if there was any redness." This reflected what was in the person's care plan.
- People's needs were assessed, and care plans and risk assessments written to address these. If people needed specialist support the service referred them to relevant professionals. For example, one person at risk of choking was referred to the speech and language therapy (SALT) team. Staff then followed SALT advice when supporting the person to eat and drink.
- Staff were trained in moving and handling and did this safely to reduce the risk of accidents. Two staff were provided for this task if required. A relative said, "Two carers do arrive together and hoist my [family member] carefully and safely."
- Care plans and risk assessments were reviewed regularly to ensure staff had up-to-date information on how to support people safely. Risk assessments covered people's personal care needs as well as other areas including the environment, fire safety, and food preparation.

Staffing and recruitment

- A person and relatives made many positive comments about the staff team. They said the service provided regular staff, the right number of staff depending on support needs, and staff who were well-trained, punctual and reliable. A relative said, "The carers are very professional in their jobs and very friendly which [family member] responds to well."
- Staff were recruited specifically for each person to help ensure they received a personalised, quality service. A relative said, "We have been matched very well with carers for [family member] who has dementia." Staff received further specialist training where necessary, to meet people's particular needs.
- Staff were safely recruited and had the right documentation in place to show they were fit to work with

people using care and support services. This included references, proof of identity, and Disclosure and Barring Service (DBS) checks which provide details about convictions and cautions held on the Police National Computer.

#### Using medicines safely

- Staff supported some people with their medicines. Relatives said they did this safely. A relative told us, "The staff give [person] tablets morning and evening, make sure [person] has taken them, and then record it."
- People had medicines care plans setting out when and how they should be supported with their medicines. People, or their relatives where applicable, signed consent forms to show they agreed with staff input in this area.
- Staff were trained in medicines administration and knowledgeable about people's medicines. For example, a staff member told us how a person's medicines were given to them in a certain way to make them easier to take.
- Staff members checked people's medicines regularly to make sure they were not running out. Medicines records were audited weekly to ensure medicines had been administered as prescribed.

#### Preventing and controlling infection

- Staff were trained in infection prevention and control. Personal protective equipment (PPE) such as gloves, aprons and masks were provided for them.
- People care plans stressed the importance of staff using PPE when they supported people. For example, one care plan stated, "[Staff] must ensure they have PPE on before they wake [person]." Care plans reminded staff to change PPE when undertaking different tasks.
- The provider had up-to-date policies and procedures in place to support effective infection prevention and control and followed current government guidance.

#### Learning lessons when things go wrong

- Staff recorded accidents and incidents and reported them to the provider. The provider analysed these, and lessons learnt were shared with staff to reduce the risk of reoccurrence.
- Following incidents relating to a person's distressed behaviours, the provider and staff worked with the LA crisis team and other professionals to design an improved support strategy. This included British Institute of Learning Disabilities (BILD) training for staff, the use of positive behaviour Positive Behaviour Support (PBS) methods, and a communication passport to ensure the person's communication needs were met.

# Is the service well-led?

## Our findings

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

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

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

- The service was well-led. A person and relatives were extremely satisfied with how the service was run and made numerous positive comments about it including: 'very good', 'an excellent service', and 'very professional and they do everything by the book'.
- Staff were knowledgeable about the people they supported. They knew their preferences, routines, cultural needs, and interests. They understood how best to communicate with them and how to involve them in decisions about their care and support.
- The provider oversaw all aspects of the service and knew people, relatives, and staff well. Their vision for the service was for it to remain small, provide quality care, and to value the people using it, relatives, and the staff. Staff retention was good and all the staff we spoke with praised the provider as a caring and supportive employer.

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 provider had systems in place to ensure compliance with the duty of candour. The duty of candour is a set of specific legal requirements that providers of services must follow when things go wrong with care and treatment.
- A person and relatives knew who the provider was and how to contact them. A relative said, "They are very approachable. I had contact recently and they messaged me on [messaging app]. They listen to me." If people raised concerns, these were addressed and resolved with records kept demonstrating this.

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

- The provider completed statutory notifications regarding incidents such as safeguarding concerns to CQC and other agencies. This meant external oversight and monitoring was maintained.
- Systems were in place to monitor the service. For example, the provider used a compliance spreadsheet to ensure staff had been safely recruited, inducted, and trained. Care plans were regularly reviewed and updated as necessary. The provider shared information on a secure messaging application to ensure staff were aware of any changes to people's care needs.
- Senior staff carried out 'spot checks' on care staff to ensure they were providing good quality care. Relatives said the service contacted them in advance to let them know this was happening and gain permission.

- Staff understood their roles and responsibilities, were motivated, and had confidence in the provider. They had regular supervisions and received constructive feedback about their performance. A staff member said, "We can speak out, we can say anything, and we are listened to. [Provider] always wants to know if we have ideas to improve service. We feel part of this agency."

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

- A person and relatives shared their views on the service by completing surveys and talking with the provider and staff. A relative said, "Staff leave a form for us to complete when they come to do a care plan review." Results of previous surveys showed a high level of satisfaction with the service.
- People and relatives said communication with the provider and staff was good and if they left a message someone always got back to them. A relative said, "This company is very accommodating when we have needed to change visiting times etc."
- All the staff we spoke with spoke highly of the provider. A staff member said, "[Provider] is the best boss I have ever had. [Provider] is proactive, listens to what you say, and resolves problems. All the other staff feel the same about [provider] as I do."

Continuous learning and improving care/ Working in partnership with others

- The provider shared policies, procedures, knowledge, and guidance with staff through meetings, supervisions, handovers, and communications. Staff were encouraged to learn and develop their skills through training and practice.
- The provider and staff worked in close partnership with health and social care professionals to achieve good outcomes for people. If people needed specialist support, they were referred to the right agencies. The provider attended multidisciplinary meetings as necessary to help ensure people received joined-up care and support.