

Bespoke Care and Training Limited

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Inspection report

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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

Bespoke Care and Training Limited is a domiciliary care service providing care to people living in their own homes in Ashbourne, Derbyshire and surrounding areas. At the time of our inspection, 44 people were using the service. 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 the inspection 39 people were receiving personal care support.

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

Staff were trained on how to protect people from abuse and knew the procedure to follow to report concerns. People's representatives said staff were caring and friendly. Systems and processes were in place to support people's safety. People's needs were assessed and monitored on an ongoing basis.

People were supported by trained staff to take their medicines. People were supported to access health care professionals when needed to support their well-being.

Recruitment processes were safe.

Staff worked within the provider's policy and procedure for infection prevention and control and followed current government guidance related to COVID-19.

Quality monitoring was undertaken on an ongoing basis by the provider to drive improvement. The view of people and their relatives were sought including involvement in decisions relating to their care.

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

This service was registered with us on 3 December 2019 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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 caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Bespoke Care and Training Ltd

Detailed findings

Background to this inspection

The inspection

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

Inspection team

The inspection was undertaken by one inspector.

Service and service type

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

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 3 working days' notice of the inspection. This was because we needed to be sure that a member of the management team would be in the office to support the inspection. Inspection activity started on 15 November 2022 and ended on 18 November 2022. We visited the office location on 15 November 2022.

What we did before the inspection

We did not ask the provider to send us a Provider Information Return prior to this inspection. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. However, we offered the registered manager the opportunity to share information they felt relevant with us at this inspection.

The inspection was informed by other information we had received from and about the service. This included feedback from the local authority and notifications from the provider. A notification is information about important events, which the provider is required to send us by law. We used information gathered as part of monitoring activity that took place in October 2022 to help plan the inspection and inform our judgements. We used all this information to plan our inspection.

During the inspection

We received feedback from 8 relatives about their views of the service. We looked at 4 people's care records to check that the care they received matched the information in their records. We reviewed 4 staff files to see how staff were recruited and looked at training records. We looked at the systems the provider had in place to ensure the quality of the service was continuously monitored and reviewed to drive improvement. We also received feedback from staff that worked at the service and the registered manager.

After the inspection

We asked the registered manager to email copies of audits they undertook so that we could see how the provider monitored the service to drive improvements. We also reviewed some of the provider's policies. All these documents were sent this to us within the required timeframe.

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 of 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

- Systems were in place to protect people from abuse.
- People's representatives told us their relatives felt safe with the staff. One said, "My parents feel happy and secure with the care they receive." Another told us, "My partner won't have any other agency. They feel safe and comfortable with the staff that support them."
- Care staff told us they received training in safeguarding and were knowledgeable on how to identify the signs of abuse and how to report concerns to the management team. Staff were also able to explain what whistleblowing meant. Whistleblowing policies protect staff from being treated unfairly by their employer if they have raised genuine concerns about a person's care.

Assessing risk, safety monitoring and management

- People's health and care needs were assessed and they received support that met their needs. Care plans were in place to guide staff and they were regularly reviewed. Risk assessments were completed to help ensure care was provided in a way that reduced risks to the person and staff.
- People were assured of safe support, as staff had access to their care records via an App that was available on their phones. Information was accessible to visiting professionals and people's loved ones as needed through a shared access system. This ensured professionals, who also used the App, such as the emergency services could access information as needed in an emergency.
- People's representatives confirmed they were happy with the support provided to their loved ones. One person told us, "My relative didn't want care despite needing it. They now consider the staff their friends. The staff update us with any issues."

Staffing and recruitment

- There were enough staff to meet people's needs. The provider told us they had contingency plans in place to ensure the continuity of people's care should care staff not be able to work due to sickness or leave. These included assessing the level of support each person needed from the staff team, to ensure those people with no family support would be prioritised in an emergency situation such as inclement weather conditions.
- Pre-employment checks were completed before staff worked with people. These included reference checks and criminal records checks. These checks helped the provider make informed decisions as to the suitability of staff.
- People's relatives confirmed they received care from a regular team of staff. One person said, "We get the same staff, unless someone is on holiday." Another person said, "All of the staff we have are lovely, we have got to know them all really well."

Using medicines safely

- Where staff helped people with their medicines, people confirmed this was managed well and safely by staff who had received training in this area.
- Staff recorded when medicines were administered, or when appropriate, if medicines were not required or refused on the electronic medicines administration record (EMAR) charts.
- Audits of medicines management enabled the registered manager to identify any errors, investigate and take action as needed. This helped reduce the risk of recurrence. We saw there had not been any medicines errors in recent months. The registered manager told us they believed this was due to the new electronic recording system in place, that reduced the opportunity for errors.

Preventing and controlling infection

- Staff had been trained in infection prevention and control. They had been provided with regular updates on COVID-19 management and how to work safely, including the use of personal protective equipment (PPE).
- People told us that staff followed guidelines to reduce the risk from infection transmission and wore PPE when providing care.
- Staff confirmed they had supplies of PPE and had a supply of lateral flow tests. These were used if staff or a person using the service had any symptoms of COVID-19. This meant the risks from infection transmission was reduced.
- The provider had COVID-19 risk assessments and contingency plans to help ensure they continued to deliver a safe service during the pandemic.

Learning lessons when things go wrong

- The registered manager discussed with us how learning from past incidents enabled staff to develop their skills and confidence in all areas of care. We saw that ongoing monitoring and audits were in place.
- A system was in place to track when staff arrived and left calls. This supported the registered manager to monitor this and take action as needed if there were any delays in care calls.

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 were supported by staff that understood the support they needed, as assessments were completed regarding people's health and care needs. These were kept under review and updated as needed.
- Staff confirmed they read care plans and risk assessments before providing care to new people so they could understand how to meet their needs. On-going access to these records was provided to staff on the App on their phones. This helped staff to provide effective and consistent care.

Staff support: induction, training, skills and experience

- People were supported by trained staff that were able to meet their needs effectively. Staff confirmed they received the training they needed to meet people's needs. Training and development were provided to the staff through the provider's own training department and we saw a training programme was in place. This included specialist training to meet people's specific needs.
- New staff completed an induction and worked with experienced staff to understand and gain knowledge about the job role.
- Staff told us they were supported to develop their knowledge and skills and felt very supported by the management team. Staff confirmed they should contact the management team for support and guidance at any time, including out of hours and that they received regular communication on any updates or changes.
- People's relatives told us they felt staff were competent. One relative said, "They are absolutely fantastic, we are so lucky to have found them."

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

- Where people were supported by staff, they confirmed they were supported to eat well and information about the support that they needed was included within their care plan.
- Care staff had been trained in relevant areas to help them provide nutritional care to people. This included training on food hygiene. The provider also worked with the local hospital to provide some specialist training such as specialist feeding techniques.

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

- Staff worked with health care professionals when needed to ensure people's well-being was managed. One member of staff told us, "At one visit a person had had a fall and sustained a skin tear. I called the on call to request a district nurse referral."

- People's representatives told us staff helped them access healthcare services and support when needed. One relative told us, "The staff update us with any issues and stay with my relative longer if needed. One carer stayed with my relative over an hour recently when they fell and cut their head. She applied pressure and provided reassurance until help arrived."

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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 registered manager told us that everyone using the service at the time of the inspection had the capacity to make their own decisions. We saw that a capacity assessment template was available to enable the registered manager to assess a person's capacity if this was needed.
- Staff had received training in the MCA and understood the principles of the act. One member of staff told us, "I ask permission before giving care and respect the person's answer. I then record outcomes in the communication notes. Any concerns I would report to the manager."
- People's representatives told us the staff checked that their relatives consented to their care and treatment before providing it. One said, "The staff always ask before they do anything."

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; Respecting and promoting people's privacy, dignity and independence

- Staff had received training in areas relating to equality and diversity to help reduce the risk of discrimination.
- People's representatives told us staff were respectful to their loved ones. One said, "The staff are so friendly and helpful. My relative is so comfortable with the staff." Another relative told us, "The staff are supportive of each other but most of all show genuine care, empathy and support for my [family member]."
- People confirmed that staff supported them to maintain their dignity and independence. One person's representative told us, "The team are more than just a care team, they are more like a big family. They are always cheerful and very professional and really raise my relative's spirits." A member of staff told us, "To ensure a person's dignity, I step out the bathroom whilst they use the toilet. If they have a phone call, I give distance so I can't hear. I don't rush people; I go at their speed."

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

- Information was provided in the service user guide for people about the service and how to contact the management team.
- People were involved in making decisions about their care. People's representatives confirmed this. One said, "My relative is fully involved and the manager is always checking they are happy with everything."
- Staff understood the importance of enabling people's choices in their care. One member of staff told us, "I let the person take the lead. I'm there to assist and encourage. I listen to people rather than advise them."

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

- People had choice and control about their care decisions. One person's representative said, "The staff work with my relative. They (staff) talk to them (relative) all the time and check they are happy with the care." Another said, "My relative wouldn't have any other company now. The staff at Bespoke are very respectful and do things the way my relative prefers."
- People were supported by a regular staff team that enabled them to get to know the person. This supported staff's ability to provide personalised care to people.
- Care plans reflected people's choices and decisions. People's lives, their interests and what was important to them had been discussed and recorded to help care staff understand the person they cared for.
- One relative told us, "The registered manager is very knowledgeable and always tries her very best to give help and advice and get the best care plan for my relative."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication methods were recorded, and assessments were in place where needed to ensure staff could effectively communicate with the person.

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

- People's representatives confirmed they and their loved ones liked the staff who supported them. One told us, "Lovely staff I give them top marks, they are friendly, helpful and we have no issues at all." Another said, "Many staff are local which also helps as it gives a sense of community and also, they are familiar with the area so can chat about local shops and cafes."
- Everyone we spoke with told us the staff were very friendly and caring. Staff demonstrated a very caring attitude and were very respectful about the people they supported. One person told us they felt 'privileged' to work with people. All staff told us they enjoyed spending time with the people they cared for and enjoyed talking with them.

Improving care quality in response to complaints or concerns

- People and relatives told us they knew how to make a complaint if needed. Information on the provider's complaints process was provided to people in the service user guide. People told us they were confident any concerns they had would be addressed by the registered manager.
- The provider kept records of any complaints and how they were investigated and resolved. The registered manager shared positive feedback about the service with staff so they could see what people had appreciated about the service.

End of life care and support

- People's preferences and wishes for support upon reaching the end of their lives was detailed in some people's care plans. The registered manager confirmed that some people did not want to discuss their end of life plans and confirmed this was an area that would be revisited at a later date with them.
- People received the right support as 'Do not attempt cardiopulmonary resuscitation' (DNACPR) orders and ReSPECT forms detailing recommendations about emergency treatment were in place. Any electronic documents were accessible to paramedics and other medical professionals by contacting the registered manager or out of hours number. This meant staff were able to promptly provide these to healthcare professionals in the event of a person's health deteriorating or a medical emergency.
- Staff had received end of life care training and had a good understanding of how to support people.

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

- Quality assurance systems and processes were in place and enabled the registered manager to monitor the safety and quality of the service. Audits were undertaken to enable the registered manager to identify areas for improvement.
- The registered manager shared updates and information with staff through staff meetings, supervisions, handovers and communications. Staff also had opportunities to discuss their roles, development and any support they may need.
- Staff were clear about their roles and responsibilities and told us they felt valued and supported. One member of staff said, "Bespoke care and training is a wonderful company to be a part of. I spent many years unfulfilled in a job until I came to Bespoke. Now I wouldn't do anything else."
- Relatives confirmed the care provided was person centred. One said, "The staff have had massive impact on improving my relative's quality of life and I feel lucky to have this team caring for them."

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

- Surveys to collate feedback from people, relatives and staff were undertaken and we saw any actions identified were addressed.
- People and their relatives told us that communication with the registered manager was good One relative said, "The manager is brilliant, always checking we are happy with everything."
- The provider was aware of, and there were systems in place to ensure compliance with 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.

Continuous learning and improving care; Working in partnership with others

- Staff were empowered by the management team to develop their skills and abilities to improve people's experience of receiving care. Staff confirmed they received training that supported them in providing quality care to the people they supported.
- The registered manager worked closely with commissioners and Derbyshire local authority to ensure the service developed and people remained safe.

