

ATF Bespoke Support Ltd

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Inspection report

39 Doals Gate
Bacup
OL13 8JN

Tel: 07903231627

Date of inspection visit:
26 May 2021
27 May 2021

Date of publication:
08 June 2021

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

ATF Bespoke Support Ltd is a domiciliary care service providing care and support to younger adults with learning and/or physical disabilities, including those on the autistic spectrum. People using the service are supported in their family homes, in 'supported living' settings or in their own homes.

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. At the time of the inspection, there were four people receiving a regulatory activity.

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

People told us they were happy with the service they received, and they felt safe; good relationships had developed between staff and people using the service. Safeguarding adults' procedures were in place and staff understood how to protect people from abuse. Recruitment processes were safe. There were enough numbers of staff deployed to meet people's needs in a punctual, consistent and flexible way and to ensure their safety. People received their medicines when they needed them from staff who had been trained and had their competency checked. People were enabled to retain their independence and receive support with minimum risk to themselves or others.

People were given choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. People's care and support needs were continually assessed to ensure their needs were being met. Arrangements were in place to ensure staff received ongoing training, supervision and support. People were supported at mealtimes in line with their care plan and staff worked in partnership with healthcare professionals, when needed.

Management and staff had developed friendly, trusting, caring and respectful relationships with people using the service and their families. Staff knew about people's routines and preferences; this made sure people's care was tailored to their specific needs. People had been consulted about their care needs and had been involved in the care planning process; their decisions were respected. People had access to a range of activities, if this was in line with their care plan. People were aware of how they could raise any complaints, concerns and compliments and had access to a complaint's procedure.

The quality of the service was monitored and any noted shortfalls were addressed. We discussed how the quality monitoring systems could be improved to ensure they were more effective. Staff told us they were supported by the registered manager, and they enjoyed working for the service. People's views and opinions of the service were sought and acted on. Everyone spoken with, told us the service was well-managed.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for

granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was able to demonstrate how they were meeting the underpinning principles of right support, right care, right culture. People's care was person-centred and focused on choice, control and independence. People were supported to lead confident, inclusive and empowered lives.

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 10 September 2019; this is the first inspection.

Why we inspected

This was a planned inspection as the service was not yet rated.

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?

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.

ATF Bespoke Support 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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

This service is a domiciliary care agency providing personal care and support to people living in their own homes. This service also provides care and support to people living in 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service had a manager registered with the CQC; the registered manager was also the owner. This means that they are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was announced.

We gave a short period notice of the inspection. This was because it is a small service and we needed to be sure the registered manager would be in the office to support the inspection.

Inspection activity started on 26 May 2021 and ended on 27 May 2021. We visited the office location on 26 May 2021.

What we did before the inspection

We reviewed the information we received about the service since they were registered with us. We reviewed

information from statutory notifications sent to us by the service about incidents and events that had occurred at the service. A notification is information about important events, which the service is required to send us by law.

We used the 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 used all this information to plan our inspection.

During the inspection

We visited the office and spoke with the registered manager and reviewed a range of records. This included two people's care records and medication records. We looked at two staff recruitment files. We also reviewed a variety of records relating to the management of the service, including policies and procedures.

We spoke with two people using the service and two family members, on the telephone, about their experience of the care and support provided. We also spoke with two support staff.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

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 were protected from abuse and harm. Staff had been provided with appropriate training and had access to policies and procedures. They understood how to raise any concerns about poor practice. We discussed adding additional information to ensure the whistleblowing policy was clear.
- The registered manager and staff were clear about when to report incidents and safeguarding concerns to other agencies.
- People told us they felt safe. People said, "They offer me safety and security" and "I'm feeling safe and well looked after." Relatives had no concerns about the safety of their family members.

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

- The registered manager and staff assessed and managed risks to people's health, safety and wellbeing. People's care and support records included clear guidance about how to provide support in a safe way. Staff were clear about recognising risks whilst still promoting people's independence.
- The registered manager provided staff with mandatory safety training to ensure people were safe.
- The registered manager had systems to ensure lessons were learnt from any incidents. This would include sharing the outcome of incidents with the staff team to further improve safety.

Staffing and recruitment

- There were enough staff to support people in a safe, flexible and timely way. People told us they received care from a team of staff who knew them well. People made positive comments about the staff. They said, "It feels like a family unit" and "They are good friends." Staff attendance was monitored; people told us staff arrived on time and never missed a visit.
- There were safe systems for staff recruitment. The registered manager carried out checks on new staff to ensure they were suitable to work in people's homes. People confirmed they would be involved in choosing new staff.

Using medicines safely

- Staff supported people, as they needed, to take their medicines as prescribed.
- The registered manager and staff followed safe processes to ensure people's medicines were managed safely. We discussed making improvements to the medication administration record to support the auditing process.
- Staff were suitably trained to administer medicines and they confirmed checks on their practice had been carried out.

Preventing and controlling infection

- Staff protected people from the risk of infection. Staff had received appropriate training and were provided with appropriate protective equipment, such as disposable gloves, masks and aprons, to reduce the risk of infection.
- We were assured the infection prevention and control policy was up to date.

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;

- The registered manager ensured thorough assessments of people's needs would be carried out before agreeing to provide support. The registered manager used the needs assessments to develop individual care plans which guided staff on how to support people.
- The service used technology and equipment to enhance the delivery of effective care and support. People used social media, laptops and phones to communicate with others. Specialised moving equipment was used within the service to ensure people's comfort and safety.

Staff support: induction, training, skills and experience;

- Staff had been trained and supported and were skilled and competent to provide people's care and support. People told us they were happy with the care and support they received.

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

- People were supported at mealtimes in line with their plan of care. Staff provided people with the support they needed with planning their menus, shopping and preparing their meals and drinks. Records showed staff knew people's dietary preferences and gave people choices about their food and drink.

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

- People's records included important telephone contact details for people's GP and next of kin and information about people's healthcare conditions. This helped staff recognise any deterioration of health and liaise with people's relatives and health and social care professionals if they had concerns.

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.

- People confirmed they were asked for their consent before care and support was given and they were supported to make their own decisions. Staff understood the importance of giving people choices and their right to make decisions about their care and support.
- Staff had received training on the MCA and had access to appropriate policies and procedures.

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

- People were treated with dignity and respect and without discrimination. Staff had access to a set of equality and diversity policies and procedures and received training in this area. Staff were knowledgeable about people's individual needs, backgrounds and personalities and were familiar with the content of their care records.
- Staff were aware of the importance of maintaining people's privacy; people told us their privacy was always respected. People told us staff supported and encouraged them to maintain and build their independence skills.
- People told us staff treated them with care and kindness and they were complimentary of the support they received. One person said, "We have a trustworthy and dignified relationship; they don't stand on ceremony. I can choose my daily routines."

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

- People, and where appropriate families, were consulted about the level of care and support they needed and how they wished to receive it. People were involved in developing their care plans and they told us their views were listened to and respected. One person said, "Staff offer advice and it is my decision what I want to do. They actively encourage people to plan for themselves." A relative said, "There are no restrictions; [family member's] decisions and choices are respected."

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

- The registered manager and staff provided people with person-centred care and support that met their needs and took account of their wishes. People confirmed if they asked for any changes to the planned care, the registered manager and staff agreed to these where possible. They said, "They know me and do things the way I want them done."
- The registered manager and staff developed people's care plans with them. The care plans guided staff on how people wanted their care and support to be provided. The care plans included people's preferences and details about how they wished their care and support to be provided. People's care plans were reviewed regularly, and if their needs changed, to ensure staff had up-to-date information.

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.

- Information could be made available in a variety of formats to meet people's communication needs and to give people more control over their lives. One person's care plan had been designed with easy read headings.
- The registered manager assessed people's communication needs to identify how they needed information to be provided. This was recorded in people's care records to guide staff on how to share information and communicate with them in ways that met their needs and preferences.

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

- The registered manager and staff supported people to attend the events and activities they valued, if this was in line with their plan of care. Care records included information about important relationships. People appreciated the additional support and alternative activities offered by staff during local lockdown restrictions.

Improving care quality in response to complaints or concerns

- The registered manager had an effective procedure for receiving and managing complaints about the service. People knew how they could make a formal complaint if they needed to. One person said, "If I have any concerns [registered manager] will do anything possible to accommodate my needs." A relative said, "If there are any issues, I can mention them and they are addressed immediately."

- The registered manager ensured people had the information they needed to raise their concerns. We discussed adding the contact information for CQC. There had been no complaints made about this service.

End of life care and support

- There was no one receiving end of life care at the time of the inspection. The registered manager said they would work alongside other professionals to provide people with dignified care at the end of their life. One person had chosen to record their wishes.

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.

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

- The registered manager and staff were committed to providing people with positive outcomes; they knew people well and encouraged them to make decisions about their care and support. Care records were person-centred and people had been involved in their development and review. Everyone spoken with told us they were satisfied and happy with the service.
- Staff were committed to providing high standards of care and support and genuinely cared about the people they supported. Staff enjoyed working at the service and felt supported. They said, "Our ethos is about the people we support and their relatives. [Registered manager] is excellent; she knows people well" and "[Registered manager] sets the standards really high; she is a fantastic role model." A relative said, "[Registered manager] is trustworthy and listens to me and [family member]. Maximum stars to [Registered manager]."

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 manager was aware of their responsibility to be open and honest when something had gone wrong. Good relationships had been developed between management, staff and people using the service and their family members.

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

- The registered manager had monitoring systems in place and there was a good standard of organisation within the service. The registered manager worked alongside staff as part of the team and monitored records on a day to day basis, but this was not always recorded. We discussed how some of the auditing and checking systems could be improved to ensure they were fully effective and demonstrated the registered managers oversight. The registered manager gave assurances this would be addressed.
- The registered manager understood their legal responsibilities and ensured records were accessible, organised and used for auditing purposes.
- The registered manager made sure staff understood their individual responsibilities and contributions to service delivery. Staff had access to a set of policies and procedures.

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

- The registered manager sought feedback from people using the service to ensure they were happy and to ensure their diversity and personal and cultural needs were met. A recent survey supported staff, people and their relatives were satisfied with all aspects of the service.
- The registered manager ensured all staff were kept up to date and promptly notified of any changes. Staff told us they were kept up to date and they felt communication was good. They were confident the service was well managed.

Continuous learning and improving care; Working in partnership with others

- The registered manager encouraged continuous learning and development within the service. Staff training, supervision sessions and meetings were used to ensure learning and improvements took place. Staff told us they were comfortable in raising any issues or concerns.
- The registered manager and staff had access to a variety of professionals and other agencies to enable effective coordinated care for people.