

Bespoke Guardians Ltd

Head Office

Inspection report

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Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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Is the service well-led?	Inspected but not rated
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Summary of findings

Overall summary

About the service

Bespoke Guardians is a domiciliary care service registered to provide personal care to children and young people in their own homes. At the time of the inspection the service was supporting two children and one young person.

Prior to the inspection we received concerns about how the service supported children and young people. Due to this we made the decision to inspect to check if the provider was carrying out a regulated activity and to assess if the provider were to provide a regulated activity, that this would be done safely.

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

Children and young people were supported by staff who had not always been recruited safely.

Children and young people were supported by staff who had minimal training and understanding of safeguarding processes.

Children and young people did not have their individual identified risks of harm assessed, reviewed or monitored.

Children and young people were being supported by a provider who did not have an adequate infrastructure, governance or understanding of accountability and lacked oversight of the service.

Children and young people were not supported to have maximum choice and control of their lives and staff did not support them in the least restrictive way possible and in their best interests; the policies and systems in the service did not support this practice.

We read compliments from relatives and professionals and heard examples of how the support provided by Bespoke Guardians had resulted in children and young people making positive progress.

Although the systems and processes in place were not adequate, the provider had a drive and passion to provide a supportive service to improve outcomes for the most vulnerable children and young people.

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 not able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right support:

- Incidents of the use of de-escalation and physical intervention methods in children and young people's records varied in quality and detail and all lacked analysis.

Right care:

- The support in place was not documented or recorded accurately enough to demonstrate person-centred care which promotes children and young people's dignity, privacy and human rights.

Right culture:

- There was a lack of sufficient detailed recording of physical interventions used. This meant we were not assured staff were adhering to the ethos, values, attitudes and behaviours of the provider. We were not assured that people using the service led 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 21 August 2020 and this is the first inspection.

Why we inspected

We reviewed the information we held about the service. We undertook this targeted inspection to check on specific concerns we had about recruitment, staffing, safeguarding and governance and review the key questions of safe and well-led only. The overall rating for the service has not changed following this targeted inspection and remains un-rated. CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about.

Despite being registered for the regulated activity of personal care; Bespoke Guardians do not provide regulated activities to any of the three children and young people they currently support. Neither have they provided regulated activities to any children they have supported since setting up the company in 2018. Due to this CQC cannot legally and lawfully consider breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

During the inspection we identified that if the provider had been or were to commence the delivery of a regulated activity that significant improvements would be required to meet the legal requirements and to ensure the safe delivery of care and support. We have identified concerns in relation to safe care and treatment and good governance.

Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate.

Please see the safe and well led sections of this full report. We are currently reviewing CQC's regulatory response to the more serious concerns found during the inspection. This will be added to the report after any representations and appeals have been concluded.

Follow up

Following inspection we have met with the provider who gave us assurances they were committed to make the necessary improvements to the service. 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?

Inspected but not rated.

Inspected but not rated

Is the service well-led?

Inspected but not rated.

Inspected but not rated

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.

This was a targeted inspection to check on specific concerns we had received relating to recruitment, staffing, safeguarding and governance.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

This service is a domiciliary care agency. It is registered to provide personal care to children and young people living in their own homes.

Notice of inspection

This inspection was unannounced.

Inspection activity started on 26 April 2021 and ended on 7 May 2021. We visited the office location on 28 April 2021.

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We sought feedback from local authorities and professionals who work with the service. We used all of this information to plan our inspection.

During the inspection

We spoke with the provider, who is also the nominated individual and the area manager. We reviewed a

range of records including three children and young people's care records. We looked at eight staff records 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 receive documents to review 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 inspected but not rated. We have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check specific concerns that we had received relating to recruitment, staffing, safeguarding and assessment of risk.

Systems and processes to safeguard people from the risk of abuse; Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Systems and processes were not always in place to safeguard children and young people from the risk of abuse.
- Safeguarding children practice in Bespoke Guardians was under-developed.
- The management team were externally trained to level 3 in safeguarding children, with all other staff trained to level 2 by an on-line accredited agency. There was no evidence staff had the opportunity to access multi-agency training.
- There was limited evidence of the safeguarding training having an impact on practice. For example, we did not see any evidence of safeguarding needs being identified or referrals being made to the MASH (multi-agency safeguarding hub), although referrals were appropriately made to the LADO (local authority designated officer) when concerns were raised about members of staff. This meant children and young people may have been exposed to the risk of abuse or harm.
- There was no evidence of anyone being trained in delivering safeguarding supervision or of safeguarding supervision sessions taking place. This limited the opportunity for children to have emerging or unknown safeguarding needs identified and did not ensure their safety whilst being supported by Bespoke Guardians staff.
- There was no evidence that Bespoke Guardians staff had completed any assessments of the children's needs or risks or developed plans to meet needs and mitigate risks.
- There were no monitoring systems in place to assess and act on identified risks, nor were there systems in place to identify and make the necessary improvements. For example, one child was at risk of absconding. There were no records to evidence the frequency or length of the absconding or if any interventions had reduced these events and what actions were taken.
- Accidents, incidents and complaints had not been recorded or monitored sufficiently. This meant the provider was not able to adequately or appropriately make any required changes to improve the service.

Staffing and recruitment

- Staff were not always recruited safely.
- The provider's policy on recruitment of ex-offenders states a risk assessment would be carried out prior to employment. However, staff had been employed with past spent cautions and convictions on their DBS, without accompanying risk assessments. This meant people of unsuitable character had been allowed to

work with vulnerable children and young people. The Disclosure and Barring Service (DBS) helps employers make safer recruitment decisions by preventing unsuitable people from working with vulnerable groups, including children.

- Recruitment information was held on two separate systems. Whilst we could review some of the information held electronically, the provider was not able to locate the paper records. We were not able to review all references or DBS certificate detail for staff previously or currently employed. This meant we were unable to confirm whether current staff had been recruited appropriately or were of suitable character to work with vulnerable children.

Preventing and controlling infection

- We were somewhat assured that the provider was meeting shielding and social distancing rules.
- We were somewhat assured that the provider was using PPE effectively and safely. Staff did not always wear face coverings in children's and young people's homes.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

We have also signposted the provider to resources to develop their approach.

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 inspected but not rated. We have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check a specific concern we had about governance.

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

- The service did not have a registered manager in place at the time of the inspection.
- Despite the provider having a drive and passion for wanting to improve outcomes for the most vulnerable children and young people; the service did not have adequate infrastructure, governance or understanding of accountability to support this vision.
- The standard, quality and consistency of record keeping by Bespoke Guardians staff was unsubstantial.
- Children and young people were often restrained using physical interventions by Bespoke Guardian staff.
- Physical intervention (PI) records were not fully or regularly completed. (These were documents for staff to record when a restraint method was used). This meant managers did not have oversight of when or why PI was used, or what the outcome for the person and staff was. There was insufficient evidence to show the methods were carried out appropriately. This meant that children, young people, families, and managers at Bespoke Guardians were not assured that practice was always the least restrictive and in the best interests of the child or young person.
- We saw some examples in records of children and young people being effectively supported through therapeutic de-escalation techniques. However, we also saw examples of physical restraint. One child had reports of 27 separate physical restraint incidents in their records, varying in quality and detail and all lacking in analysis. It was positive to note however, that the frequency of the physical interventions had reduced during the time Bespoke Guardians had been working with them.
- Reference was incorrectly made to children and young people being subject to 'DoLS' (Deprivation of Liberty Safeguards); but there was no evidence in any of the records of what court orders (if any) were actually in place, or in progress and whether the interventions Bespoke Guardians were commissioned to provide, were legal.
- Records were fragmented, incomplete and at times inaccurate. For example, there was poor attention to detail including incorrect recording of dates of birth. This made it difficult for anyone working with the children and young people to have a full picture and prevented a clear understanding of the support needed or given to each child or young person. It also meant that there was no measurement of improvement to determine the impact of the service or whether the children and young people were having their needs met.
- There was no evidence of managers and staff at the service challenging inappropriate requests being made of them; rather they appeared to carry out requests that they did not always agree with. For example, failing to document work with a child due to parental objection which was not in the best interests of the

child.

- Furthermore, whilst there was a general manager in post, the provider did not have oversight of the service, nor an understanding of what is required to safely and effectively develop, manage and deliver such services. There was also no evidence that the general manager produced reports or audits to the provider.
- This meant there was no assurance or overall accountability that the service provided was safe and effective for the children and young people they were supporting.
- Supervision records were incomplete and inconsistent. Although the provider told us staff supervision occurred monthly; some staff did not have a recorded supervision since November 2020. This meant the management team may have lacked oversight of staff competency, skill, concerns or issues within the staff team.
- We did see however, newly developed documentation that would support assessment and planning for children and young people, as well as providing a more holistic and complete record. This had not yet been implemented for any of the children being supported at the time of the inspection.

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; Continuous learning and improving care

- There were no records of accidents and incidents with relevant analysis of events to identify themes and trends. This meant there was no assurance the service could learn how to improve when things went wrong.

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

- The provider did not actively request formal feedback from people, relatives and staff. They did not carry out surveys.
- However, we read compliments from families and health professionals and heard examples of how the support by Bespoke Guardians had resulted in the children and young people making progress. For example, one child who could have periods of aggression, resulting in frequent physical restraint experienced fewer restraint incidents following Bespoke Guardians working with them. However, this was not demonstrated in the documents and records of the service.