Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Bespoke Senior Care Limited ta Home Instead (Cowbridge, Pontyclun and Pontypridd)

Castle House
63-69
Cardiff Road
Cardiff
CF15 7RD

Date Inspection Completed

09/02/2024

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About Bespoke Senior Care Limited ta Home Instead (Cowbridge, Pontyclun and Pontypridd)

Type of care provided	Domiciliary Support Service
Registered Provider	Bespoke Senior Care Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	12th September 2022
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

This report covers the Cwm Taff, Cardiff and Vale and Gwent registered footprints of the service.

People and their families are happy with the care and support they receive from Bespoke Senior Care. Personal plans outline the care required, and ongoing reviews ensure information remains up to date. The service has good medication systems in place to support safe administration. Care is provided by a small consistent team of staff who provide support in a way people like. People tell us they benefit from positive relationships with both care and office staff.

Ongoing supervision and training is offered to all staff. Rotas are well organised with calls received at scheduled times and for the full duration. Staff feel well supported by the management team. A range of up-to-date policies are used to support and guide best practice. A variety of recruitment checks ensure staff are suitable to work for the service. The Responsible Individual (RI) is visible in the service and has good oversight over the care provided. Ongoing quality assurance checks are used to support and maintain care standards.

Well-being

People feel listened to and have influence over their care. We found personal plans describe people's preferences, goals and what is important to them. People tell us they have the opportunity to discuss their preferred outcomes and how they would like their care to be provided. People and relatives confirm positive communication with both office and care staff and the management team are seen as approachable and responsive to any feedback or requests. The service completes introductory visits with staff and endeavours to match care staff with people accessing the service. Regular reviews and quality assurance tools allow people to provide feedback on the care they receive.

The service understands the support required and people have positive relationships with staff. Each person has a personal plan which sets out their support needs and goals. People's care is regularly reviewed to identify any changes and ensure the support provided continues to meet their needs. Care staff know people well and understand the importance of following individual routines and preferences. People report having positive relationships with staff and feel happy with the standard of care they receive. Good medication management ensures people remain as healthy as they can be.

There are a number of systems in place to protect people from abuse and harm. People can be confident they are supported by staff who undergo a range of recruitment checks prior to the start of their employment. Staff receive ongoing core and specialist training to ensure they hold the required skills to carry out their duties. A range of policies are in place to promote good practices. Care staff understand their safeguarding responsibilities and tell us they are confident in reporting concerns. Regular audits ensure both documentation and direct care is provided to a good standard. Ongoing quality assurance checks makes sure the service continues to work effectively.

The service is working towards a Welsh Active Offer. Language is considered during the assessment process. A Welsh language policy is not available and there are currently no Welsh language speaking staff or people using the service.

Care and Support

People benefit from a good standard of care and support. People tell us they receive good quality and reliable care from a small and stable team of staff. Rotas are forwarded to clients so they know the time of calls and who will be attending. Feedback and care call records show care staff remain for the full duration of their calls. People tell us tasks are completed in an unhurried manner in a way they like, staff are attentive, and they feel listened to. People and relatives confirm they have a good relationship with care staff and are complementary about the level of communication and care provided.

People's comments include *"They help me every day", "they follow my routines".*
"They know exactly what to do", "They are marvellous".
"I always know they will be here", "Staff are nice, polite and well spoken".
"Everything has been wonderful", "they are punctual", "staff are very caring, can't do enough for you".
"I have the same one or two staff they know my ways and where everything is".
Relatives told us *"The girls are good as gold", "We are happy with the care staff". "Dad's routines are followed".*
Staff also noted *"They* (the service) *do the best for the clients, the service is spot on", "They work to make sure that people and clients are well matched".*

Plans are clearly written, and person-centred. Personal plans we viewed provide care staff with clear details of how to best support people and achieve outcomes. Daily notes completed by care staff contain a good level of detail and evidence staff support the goals identified in people's personal plans. Risk assessments consider physical and environmental risks. Care staff tell us they have access to up to date plans and undertake an introductory visit before providing hands on care. The service supports people and their relatives to contribute to reviews, this ensures plans remain up to date, care remains effective, and their opinions are heard.

Medication is managed and administered safely. The medication charts we viewed evidence people receive their prescribed medication at the right time. We found routine medication audits used to ensure medication remains safe and well managed. Completed charts are collected in a timely manner and are stored safely. Staff tell us they receive ongoing medication training and we found evidence staff skills are continually assessed to ensure practice remains safe.

Leadership and Management

Staff receive regular supervision and training opportunities. Care staff tell us they receive regular and sufficient supervision sessions to discuss any issues and reflect on general performance and development. The information provided in the training matrix confirms the service offers frequent training opportunities. Care staff advised the training sessions offered are of a good quality and supports them to feel knowledgeable and skilled in their roles. The service considers the quality of care provided and there are effective management arrangements in place. A range of up to date policies and procedures supports the running of the service. The collection, transportation and storage of confidential information is effective in ensuring these documents remain safe. We found staff rotas and calls are well managed, with one staff member describing their rota as "*Perfect*". Other staff confirm they have ample time to travel, take breaks and sufficient time to spend with people during care calls. The RI seeks feedback from people using the service on a three monthly basis. Six-monthly quality of care reviews are completed to identify what the service does well, and any improvements needed.

The service conducts all the necessary pre-employment checks. We looked at a number of recruitment records and found all of the required checks and information had been completed. Newly appointed staff tell us they have a positive induction experience which includes training and shadowing opportunities. Staff members are registered with Social Care Wales (SCW) which evidences staff hold the right values, skills, and training to work in the care sector.

Care staff feel supported in their roles. We spoke to a number of care staff all of whom tell us they enjoy working for the service and feel supported and valued as employees. Comments include *"I love my job"*, "*They are really supportive and flexible"* and *"It's a really rewarding job, with a really supportive team and the clients are amazing".* Feedback confirms the management team maintain regular contact with care staff to support their wellbeing. One staff member commented *"They (management team) always check in on us to make sure we are ok"* while another commented *"They (management team) take their time to speak with us, this never feels rushed or hurried".* Staff report out of hours staff are easy to reach and they feel confident in approaching office staff. Comments include*, "They (office staff) are easy to get hold of and are helpful", "All the office staff go above and beyond, they are always contactable" and "the office will listen to you", "The team works well together".*

Summary of Non-Compliance	
Status	**What each means**
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement		
Regulation	Summary	Status

N/A	No non-compliance of this type was identified at this inspection	N/A

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