

## **Aeracura Limited**

# Bluebird Care (Cheshire East) Domiciliary Care Agency

## **Inspection report**

Scope House Weston Road Crewe

Cheshire CW1 6DD

Tel: 01270617081

Website: www.bluebirdcare.co.uk

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## Ratings

Overall rating for this service	Outstanding ☆
Is the service safe?	Good •
Is the service effective?	Good
Is the service caring?	Outstanding 🌣
Is the service responsive?	Good
Is the service well-led?	Outstanding 🌣

# Summary of findings

## Overall summary

About the service

Bluebird Care (Cheshire East) is registered to provide personal care to people who live in their own homes. The offices for the service are located in Crewe. At the time of the inspection 55 people were supported by the agency.

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

The service was praised by people and visiting professionals. People spoke extremely positively about the ways in which the quality of their life had improved by the service they received. We were told staff made a fantastic effort and promoted an exceptional quality of life for people with their outstanding caring and respectful attitude.

The organisation, registered manager and staff were passionate about the quality of service delivery and led by example. They pursued opportunities to improve and monitor care and people's experiences to achieve better outcomes.

There was an open, honest, caring and positive culture across the service and staff demonstrated a high value base. This was clearly led from the management team to all staff.

The service continued to promote people's individual and cultural needs. This included training to support staff in person-centred care and diversity and understanding so staff were aware of what high standards looked like.

The service worked extremely well in partnership with other organisations to ensure they followed the best practice. The registered manager took a person-centred approach to support people. This had resulted in exceptionally positive outcomes for people. Risk was managed well to keep people safe from harm.

People were supported to have maximum 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.

Procedures were in place to record safeguarding concerns, accidents and incidents and take necessary action as required. People told us they had no concerns about their safety whilst in the care of staff supporting them.

The service had a complaints procedure which was made available to people and their family members. No complaints had been received since the last inspection. People told us they were happy with their service and had no complaints but knew the procedure should they need to.

The service used a variety of methods to assess and monitor the quality of the service. These included regular audits and satisfaction surveys to seek people's views about the service provided.

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

Rating at the last inspection (and update)

The last rating for this service was Good (published 25 November 2016).

## Why we inspected

This was a planned inspection based on the previous rating.

### Follow up

The next scheduled inspection will be in keeping with the overall rating. We will continue to monitor information we receive from and about the service. We may inspect sooner if we receive concerning information about the service.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service remained safe

Details are in our safe findings below.

Is the service effective?

The service remained effective

Details are in our effective findings below.

Is the service caring?

The service was exceptionally caring

Details are in our caring findings below.

Is the service responsive?

Good ●

Outstanding 🌣

The service remained responsive

Is the service well-led?

Details are in our responsive findings below.



# Bluebird Care (Cheshire East) Domiciliary Care Agency

**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 team consisted of one inspector.

#### Service and service type

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

The service had a manager registered with the Care Quality Commission. 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.

### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the registered manager would be in the office to support the inspection.

Inspection site visit activity started on 26 June 2019 and ended on 27 June 2019. We visited the office location on 26 and 27 June 2019 to see the registered manger; and to review care records and policies and procedures.

## What we did before the inspection

Before our inspection we completed our planning tool and reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people supported by the service.

We checked to see if any information concerning the care and welfare of people supported by the service had been received. We also sought feedback from professionals who work with the agency.

As part of the inspection we used information the provider sent us in the Provider Information Returns. 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.

We used all of this information to plan our inspection.

#### During the inspection

We spoke with six people who used the service, five relatives of people and three health and social care professionals about their experience of the care provided. We spoke with five members of care staff as well as the registered manager, deputy manager and a director of the company. In addition, we spoke with two senior carers at the agency.

We reviewed a range of records. These included the care records of two people, staff training records, arrangements for staff recruitment, supervision and appraisal, medication procedures and records relating to the management of the service.

## After the inspection

We received updates from the registered manager about the quality of care they provided. We contacted two community professionals who regularly used the service for their feedback about the agency.



## Is the service safe?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

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 the risk of abuse and their human rights were respected and upheld. Effective safeguarding systems continued to be in place and staff spoken with had a very good understanding of what to do to make sure people were protected from harm.
- People told us their relatives received safe care and felt their family members were cared for and had no concerns in relation their wellbeing. One relative said, "I can go out knowing they are so well cared in the company of the staff."

Assessing risk, safety monitoring and management

- The service continued to manage risk through effective procedures. Care plans were person-centred, and a risk-taking culture was in place to ensure people were supported to take risks and promote their independence.
- Each person had a thorough risk assessment and risk was managed and addressed to ensure people were kept safe. These had been kept under review by the registered manager and updated where required to ensure staff had access to information to support people safely.
- Staff understood where people required support to reduce the risk of avoidable harm.

### Staffing and recruitment

- Suitable staffing arrangements were in place to meet the assessed needs of people in a person-centred and timely way. Staff spoken with were happy with the staffing arrangements and the way they supported people. People told us staff were reliable and didn't let their relatives down. One person said, "Never late they are always there on time and stay over if required." Another person said, "Mainly we have the same carers, so they know what they are doing and we get along fine."
- Staff told us their visits were well managed and they were able to support people without feeling rushed or under pressure.
- Recruitment continued to be safe and managed well. Checks were made before new staff had commenced their employment. This was confirmed by staff spoken with.

#### Using medicines safely

- Medicines continued to be managed safely and people received their medicines when they should. Where people were supported, we found medicines were managed in line with good practice guidance.
- People told us they were happy with support their relatives received with their medicines.

Preventing and controlling infection

- The service continued to have effective infection control procedures. Staff had access to and used protective personal equipment such as disposable gloves and aprons. This meant staff and people they supported were protected from potential infection during the delivery of personal care.
- Staff received training and regular audits were carried out to ensure standards were maintained

Learning lessons when things go wrong.

• Systems were in place to record and review accidents and incidents. We saw evidence any accidents and incidents were investigated and actions put in place to minimise future occurrences. Lessons learned were shared with staff to improve the service and reduce the risk of similar incidents.



# 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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

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 completed assessments which were comprehensive to ensure people's needs could be met. Expected outcomes were identified, discussed and agreed with the person and family members. Following assessment the service had provided a holistic approach towards providing personcentred care. Records were consistent and staff provided support that had been agreed during the assessment process. People confirmed this when we spoke with them.
- We saw evidence the provider was referencing current legislation, standards and evidence based on guidance to achieve effective outcomes. This supported the service to ensure people received effective, safe and appropriate care which met their needs and protected their rights.
- Care records had been regularly reviewed and updated when necessary. This ensured people received up to date care they needed.

Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and carried out their roles effectively. Discussion with staff confirmed training continued to be of a high standard and provided in different ways to suit them. One staff member said, "The best induction and training I have ever had working in the care industry." All new staff had received a thorough induction on their appointment to ensure they had the appropriate skills to support people with their care. One relative said, "They seem so well trained in what they do, very impressive."
- Staff told us they felt well supported and had access to the management team when they needed them. One staff member said, "Great support the best company I have ever worked for.

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

- People's nutritional needs were managed well. Care plans confirmed people's dietary needs had been assessed and support and guidance recorded. People told us they were happy with the arrangements in place to support their relatives with their meals. One person said, "They make lovely meals for me nothing is too much trouble."
- Staff confirmed they had received training in food safety and were aware of safe food handling practices.

Staff working with other agencies to provide consistent, effective, timely care

• The service continued to work well and effectively with healthcare professionals to ensure people received a good standard of palliative care. We saw the service worked closely with health care services including

GPs, district nurses, and occupational therapists. This ensured people were supported by healthcare services in a timely manner.

Supporting people to live healthier lives, access healthcare services and support

- People's healthcare needs were carefully monitored and discussed with the person or family members as part of the care planning process. Care records seen confirmed staff worked closely with and liaised with healthcare professionals to ensure people received the appropriate level of care as their needs changed. One health care professional said, "Nothing is to much trouble for this agency the staff and management work really well with us."
- Healthcare professionals told us how impressed they were with the service and said staff were caring, kind and provided excellent standards of care. They said staff worked alongside them well and they were always delighted when they knew they would be supporting their patients.

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 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 decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

Where people may need to be deprived of their liberty to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty

• Records contained evidence to demonstrate care planning was discussed and agreed with people and their representatives. Consent documentation was in place and signed by the person receiving care.

# 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

At the last inspection this key question was rated as good. At this inspection this key question has now improved to outstanding.

This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- The service had carefully considered people's human rights and support to maintain their individuality. Documents included information of protected characteristics as defined under the Equality Act 2010, such as their religion, disability, cultural background and sexual orientation. The registered manager told us they had systems to ensure people's human rights were upheld.
- The service's, vision and values promoted people's rights to make choices and live fulfilled and valued lives. People were supported by exceptional caring and respectful staff. Relatives told us their family members had the same small group of carers who knew and understood their needs. Comments were extremely positive and included, "The best service around they are so kind and caring they have made my life so much better with the treatment and kindness all the staff have shown me." And, "Thank you for making my life better. You really don't know what impact the staff have made on my life. Now I feel more independent and able to do more things. They are brilliant caring individuals."
- Staff had an excellent understanding of protecting and respecting people's human rights. They talked with us about the importance of supporting people's different and diverse needs. A staff member said, "We have had excellent training in diversity and equality and I am so confident about supporting people with diverse needs and aware of the needs and support different people require." An example of this was demonstrated by a relative who told us they had different needs due to religious beliefs. They told us the staff were fantastic and treated their family member with dignity and were aware of their needs in terms of diet and beliefs. They told us they had a big impact on their life by making them feel at ease and comfortable in their company. Care records seen had documented people's preferences and information about their backgrounds.

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

- People continued to be consulted about care and support and contributed to how their care would be delivered. One person said, "They have encouraged and supported me over time to make decisions for myself and be more involved. It has helped me. At times they have stayed over and above what they should have done." A relative said, "They make sure they keep me up to date the support from the agency is absolutely fantastic we are involved in all aspects of [relative] care."
- People who required aids to express their views were supported to ensure they were consulted and contributed to any decisions made. For example, staff organised hearing aids, mobility equipment and went out of their way to ensure people received the best treatment. One person said, "They went out of their way

to contact the people who provide aids and ensured they were all fitted. "It has made a massive difference to my life. I can get about the home now and have a bath on my own. I am so happy, the agency is the best fantastic people all of them." A relative told us they now had much more confidence and contributed to their being more independent."

- The service supported people with decision making. Care records contained evidence the person who received care or a family member had been involved with and were at the centre of developing their care plans.
- Information was available about local advocacy contacts, should someone wish to utilise this service. An advocate is an independent person, who will support people in making decisions, in order to ensure these are made in their best interests. This ensured people's interests would be represented and they could access appropriate services outside of the service to act on their behalf.

Respecting and promoting people's privacy, dignity and independence

- People were treated with respect and their dignity was upheld. People told us staff worked extremely hard to support them to retain their independence in their own home and the community. We found many examples of how staff supported people to improve their independence and confidence. One person following the assessment process was provided with support with personal care. The person had neglected themselves and their home which was in an unkempt state. The role of the service was to assist the person with their mobility which was poor and had made the person depressed. The agency provided two carers which they did not charge for and cleaned their home. The service spent many hours with extra support to enable the person to live in a cleaner environment and be more independent. The relatives of the person explained how the efforts of the agency had certainly had an impact on their family member and, 'changed their life.' They told us their family member was a proud person who used to be articulate in their appearance and home life. This made the person more confident to socialise in the community and was much more independent and took 'pride in their appearance and home.'
- People told us staff respected their privacy and dignity and consent was sought before staff carried out any support tasks. They told us they were always treated with respect and their human rights were respected.
- Staff described to us in detail how they supported people with personal care and went out of their way to help people retain their dignity. A staff member visited a person's home to find it in an unkempt state and dirty bedsheets. As the person had no washing machine the staff member took the articles away and washed them in their own time after checking they had no allergies. The person was extremely grateful and happy that this was done for them. They told us they did not expect this from the staff however were so much happier and grateful they provided help.



# Is the service responsive?

# Our findings

Responsive – this means we looked for evidence that the service met people's needs

At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

This meant people's needs were met through good organisation and delivery.

## End of life care and support

- The service demonstrated an extremely compassionate awareness and understanding for people being supported at the end of their lives. The registered manager told us the service was committed to ensuring people who received palliative care were in full control of their choices of care. A healthcare professional confirmed this and said, "They cared for my [relative] in their final days and were absolutely fantastic. They all were so understanding and caring they made life easier to cope." All staff had received palliative care training and people told us their relatives were supported by professional, caring and compassionate staff.
- The service worked closely with healthcare professionals including district nurses and GP's. This ensured appropriate pain management systems were in place and all relevant equipment to support the person to remain comfortable and pain free at end of life. Healthcare professionals consistently told us the service worked very well with them and staff were professional and caring.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The service provided care and support that was focused on individual needs, preferences and routines. People told us how their relatives were supported by staff to express their views and wishes. This enabled them to make informed choices and decisions about their care. One person said, "They always speak with [relative], explain what they are going to do and get [relatives] agreement before they commence providing care. They are very professional."
- The care files we saw were person-centred and individualised documents. They contained detailed information, providing staff with clear guidance about people's specific needs and how these were to be best met. These included people's personal care needs and nutritional support. Staff spoken with were able to describe people's individualised needs and the support they were providing.

#### 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.

• We found in care records people's communication needs had been assessed and where support was required this had been met. The registered manager sought guidance and training from healthcare specialists so they could support people with their communication needs.

Improving care quality in response to complaints or concerns

- There were processes in place to ensure all complaints would be dealt with appropriately. The registered manager had a system for investigating complaints and told us they used complaints or concerns as a positive experience and learning opportunity to improve the service. We found evidence of timely and appropriate responses to complaints recoded.
- People told us they were happy with the service their family member received and had no reason to complain about anything.

## 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 the last inspection this key question was rated as good. At this inspection this key question has now improved to outstanding.

This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved 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 planned and delivered effective, safe and appropriate person-centred care. There was a strong recognition people were treated as individuals by the management team. This was evidenced by comments we received. One person said, "Fantastic service every time they come they understand and treat me so well it encourages me to get better and start living my life again." An example of the management team manager's outstanding approach was training programmes related to equality, diversity and human rights. Staff told us the training provided information and learning in person-centred care, respect and dignity. One staff member said, "It certainly supported me to understand people better and treat everyone with respect and dignity."
- The registered manager had an excellent oversight and knowledge of the agency. The management team demonstrated an in-depth knowledge of all areas. Staff told us the registered manager led by example and support from the management organisation was excellent. The provider consistently engaged with all levels of staff and stakeholders of the service. One staff member said, "Not only is the registered manager extremely on the ball but they have excellent support from the area manager and above." Other comments from people included, "We have excellent support from managers throughout the company."
- There was an open, honest, caring and positive culture across the service. All staff told us they felt valued, respected and motivated at every level.

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 understood legal obligations, including conditions of CQC registration and those of other organisations. We found the service had clear lines of responsibility and accountability. People told us the registered manager and their staff team were exceptionally supportive, caring and led the service extremely well. Without exception everyone we spoke with could not speak highly enough about the organisation and management team. A health professional said, "Absolutely unbelievable the way they treat people, I have first-hand knowledge of this. This agency is so well organised solely for the benefit of the people."

People told us the agency was well-organised and there was a clear staffing structure.

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

#### regulatory requirements

- The management team and senior support staff had a considerable depth of knowledge and capabilities. Staff told us they had a genuine respect for staff in senior positions. For example, the management team were involved in caring for people as part of their duties. A staff member said, "They are fantastic so helpful and always take on the role as carers which other domiciliary agencies would not do."
- The provider had systems in place to ensure the quality of service was regularly assessed and monitored. The service had a wide range of effective audits such as medication and care records. We saw evidence the service had acted upon any findings from the audits. This demonstrated improvements were made to continue to develop and provide an excellent service for people supported by the agency.
- The service used analytical information to identify any patterns or trends in complaints or incidents. This had resulted in the introduction of a log in and out system which would avoid any late of missed calls. A staff member told us the impact had been positive in relation to the reduction of missed calls to none.
- The registered manager and staff team were experienced, knowledgeable and familiar with the needs of the people they supported. People and relatives were extremely positive about the quality of service they received.
- The service had a system called a 'staff champion' initiative. This meant key staff could share excellent examples of good practice and had a role in linking managers with ideas and experiences of the staff team. The management team told us the impact had been considerable. This was because ideas of excellent care and good practice could be implemented to provide a better service and understanding of what excellent care was. Staff told us this worked well and supported them in their role.

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

- The service provided an open culture and encouraged people to express their views about how the service was run. For example, the registered manager told us people and their families were given the opportunity to be involved in the service through reviews. Additional ways included feedback through regular telephone surveys. We saw people were encouraged to provide feedback through the 'customer newsletter' which was sent out to people on a regular basis. Surveys had been returned with 100% extremely positive comments. One person wrote, 'Absolutely excellent service.'
- People consistently told us they were very confident and extremely happy with the service they received. One person said, "I have recommended this agency to people they are brilliant and definitely the best. I talk from experience."
- Staff told us they felt valued and respected they knew what was expected from them in their role. A staff member said, "It certainly is the best company I have ever been with. They make you feel part of the business." The focus on ensuring staff wellbeing was exceptional. Staff consistently told us they were made to feel valued and equal to everyone at the agency. One said, "The management make you feel so important and motivate me to perform well in my duties. They involve you and that impact has helped me to always provide my best service for everyone." In addition, staff told us the reason for low turnover of personnel was in part due to the exceptional management and support they received. One said, "Why would you leave such an excellent service that puts the well- being of everyone first."
- Staff told us they could contribute to the way the service was run through team meetings, supervisions and anonymous surveys. They told us they felt consulted and listened to.

#### Continuous learning and improving care

• Through excellent leadership, organisation and training, Bluebird Care had the resources and personnel to care for people extremely well and provide a very high standard of service. Comments from people confirmed this. A staff member said, "We are always encouraged and provided with different ways to learn and provide the best support for people." A relative said," No agency has better trained staff and leadership

absolutely no issues whatsoever."

- There was a very effective incident reporting system that recognised which serious incidents required escalation and reporting. Continuous auditing on a regular basis ensured the system was very effective and highlighted any trends. This ensured care continued to improve for people as the service was aware of incidents and how to report and react to them.
- Plans were in place to enable the service to continue to support people in the event of adverse weather or other events. For instance, the registered manager told us in the event of high staffing absences, plans were in place to resource extra staff and utilise management to support people. This would ensure people would continue to receive their care.

#### Working in partnership with others

• The service continued to work in partnership with other organisations and the local community to make sure they provided a high-quality service and followed current practice. For example, the management team created a programme called 'focus group'. This was a meeting held at various venues in the community so people could meet and socialise. It was not only for people who used the agency but the public. Transport was provided free and enabled people to meet new friends. At one recent meeting two people realised they knew each other and rekindled an old friendship. We were told this had a big impact on the person and now from being housebound had changed their outlook and so happier to be out socialising in the community.