

Spyke Enterprises Ltd

# Bluebird Care Sefton

## 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: Bluebird Sefton is a domiciliary care agency registered to provide personal care to people who live in their own homes. At the time of the inspection the service was providing personal care to 124 people.

People's experience of using this service:

People continued to receive a consistently good service and felt safe with the support they received from the staff. The staff team were well-trained and in sufficient numbers to meet people's needs.

People supported by the service told us that staff were reliable, caring and professional in their approach to their work. They spoke positively about the quality of service provided. One relative told us, "The agency are excellent all round. Staff are genuinely caring." Another person told us, " I would rate them as very good, a 10 out of 10. They often go the extra mile to make sure I'm okay."

The provider assessed people's needs to help ensure they received appropriate care. Care plans covered a range of areas including the support people needed with their medicines, nutrition and healthcare.

People's care and support had been planned in partnership with them and they felt consulted and listened to about how their care would be delivered.

Risks to people were assessed and mitigated. When incidents took place, the provider reflected on events to help reduce the risk of reoccurrence.

People were safeguarded against the risks of abuse and harm.

We made a recommendation to check that the service was using the latest good practice in reporting safeguarding concerns.

The service had introduced new IT systems to ensure the reliability and quality of the service provided. People told us they had never had a missed call and very few late calls, and even with these the office rang to confirm staff were on the way.

The service worked in partnership with healthcare professionals and families to ensure people's health care needs were met.

Staff had access to training which was appropriate to their role. Staffing levels were continuously reviewed to ensure there were enough staff to provide a flexible and responsive care.

The service was well-organised and there was a clear staffing structure.

The registered provider and the registered manager used a variety of methods to assess and monitor the quality of the service.

Rating at last inspection: Good (19 March 2016).

Why we inspected: This was a planned inspection based on the rating at the last inspection.

Follow up: We will monitor as part of the inspection programme for a Good service. If any concerning information is received we may inspect sooner.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

## 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.

**Good** ●

### **Is the service effective?**

The service remained effective.

Details are in our Effective findings below.

**Good** ●

### **Is the service caring?**

The service remained caring.

Details are in our Caring findings below.

**Good** ●

### **Is the service responsive?**

The service remained responsive.

Details are in our Responsive findings below.

**Good** ●

### **Is the service well-led?**

The service remained well-led.

Details are in our Well-led findings below.

**Good** ●

# Bluebird Care Sefton

## 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

#### Inspection team:

One adult social care inspector carried out this inspection and an Expert by Experience carried out the inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service; they had cared for a relative living with dementia.

#### Service and service type:

This service is a domiciliary care agency. It provides personal care to people living in their own homes. At the time of the inspection it was providing care and support to 125 people.

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 24 hours' notice of the inspection visit to be sure the registered manager, staff and people they supported would be available to speak with us.

#### What we did:

Inspection site visit activity started on 26 February 2019 and ended on 5 March 2019. We visited the office location on 27 February 2019 to see the manager and office staff; and to review care records and policies and procedures.

Before our inspection we completed a 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 and previous inspection reports.

As part of the inspection we used information the provider sent us in the Provider Information Return. 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 spoke with 12 people and 10 of their relatives on the telephone.

# Is the service safe?

## Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe receiving care and support from staff. Comments from people included; "I trust all of the staff." And, "Yes most definitely staff keep me safe." Another person described how they, "Feel very comfortable with them [staff] in my house."
- Staff had received training on the safeguarding of adults and understood their role and responsibilities in protecting people from abuse.
- There had been no safeguarding incidents since our last inspection over two years ago. When we checked records on incidents we felt that there had been some that may have warranted further investigation by the local safeguarding authority. The registered manager agreed to review these and contact the local authority if necessary.
- We recommend that the service consults current good practice guidance to ensure that they are identifying all types of potential abuse; and making referrals for investigation to the appropriate authority.

Assessing risk, safety monitoring and management

- The registered provider had a variety of risk assessments including assessments that covered the environment, moving and handling and medication.
- Risk assessments were person-centred and individualised for each person. Information contained details of the person's level of independence and action to support them.
- Staff had received training in equipment they needed to use to move people safely.
- Consultation had taken place with each person, their relatives and professionals to ensure risks were identified and managed in line with good practice. Risk assessments had been reviewed regularly to identify if there had been any changes in peoples' risk and needs.

Learning lessons when things go wrong

- The service had a robust system in place to monitor and learn from incidents and accidents. Records showed any themes or patterns were identified and that the registered manager had taken preventative actions where necessary.
- Where there had been errors made with recording of medicines, these were quickly identified and measures put in place to keep people safe.

Staffing and recruitment

- People who were supported by Bluebird Care Sefton, staff and relatives all told us there were no issues with staffing levels and deployment of staff at the service. People told us they received a regular and reliable service and mostly had the same staff team visiting them.
- Recruitment practices continued to be safe. The relevant checks had been completed before staff worked with people in their homes.

#### Using medicines safely

- Medicines continued to be safely managed and in line with good practice guidance, "Managing medicines for people receiving social care in the community." (National Institute of Clinical Excellence, 2018).
- Staff ensured people had sufficient medicine available and that these were administered and stored safely.
- Regular audits were effective at highlighting any errors, for example in recording, and appropriate action was taken.
- Staff had received regular training and competency checks to ensure they had the suitable skills to carry out the task safely. Records seen confirmed this.

#### Preventing and controlling infection

- The registered manager ensured infection control procedures were followed. Staff received effective training and regular audits were undertaken to ensure standards were maintained.
- Staff had access to protective personal equipment such as disposable gloves and aprons when carrying out personal care.

# 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

People's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with guidance standards and the law; supporting people to live healthier lives, access healthcare services and support; staff providing consistent, effective, timely care within and across organisations

- People's health and care needs were well assessed to determine that the service could meet their needs. The information gathered included people's preferences, backgrounds, personal histories and any cultural needs. This enabled staff to know people well and provide person-centred care.
- The service matched staff with the appropriate skills and attributes that were best suited to people's needs. This had led to a high degree of satisfaction expressed by people. One person told us, "I asked for a change in the staff and this was sorted out straight away. There was just a clash in personality but it was done without any fuss."
- The service was very reliable and people told us they had never had a missed visit. A new IT system had been installed to monitor and programme staff visits. People who used the service could give permission for their relatives to also have access to this systems so they could also be kept informed of visits.
- Effective systems were in place to monitor any changes to people's health. The IT system also allowed care staff to alert senior staff to any changes in people's condition so action could be taken. Records of care visits included medicines administration which were recorded on the electronic system. This enabled office and senior staff to monitor care in 'real time' and respond if care tasks were not delivered as planned.
- Where people required support from external healthcare professionals this was arranged, and staff followed guidance provided by such professionals. For example, we saw one person was visited regularly by the district nurses to treat a skin condition. The person told us the staff had worked with the district nurses and their skin condition was improving. Another person told us, "The staff are good at spotting when I'm under the weather and will call the doctor if I need one."
- People were supported to manage their health and well-being. They were supported to attend health appointments and records showed recent and regular contact had been made with health professionals to support the person when needed. These included the dentist, chiropodist, GP and opticians.

Staff support: induction, training, skills and experience

- People were supported by staff who had received training relevant to their roles. Staff told us they had access to a range of training which fully equipped them for their role. Comments we received about staff included, "They are very knowledgeable, they know their stuff." And, "I trust them, they know what they are doing."
- Staff told us they felt well-supported. They received regular supervision which included feedback about their performance and enabled them to discuss any concerns, training and development. One member of staff told us, "There is loads of training about everything we need to know. The support is fabulous. I feel very happy working here, that's why I have been here so many years."

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

- People's care plans contained good information to support people to have enough to drink and to eat. This included any risks associated with eating and drinking such as food allergies. The support people required was recorded with some people encouraged to be independent in this area and requiring minimal support, whilst others needed assistance to prepare meals and support with meals.
- Staff had a good understanding of people's nutritional needs. They told us they would report any changes or concerns to the registered manager for further investigation by the appropriate health care professional.

Adapting service, design, decoration to meet people's needs

- The provider used technology to promote the effective delivery of care. They had implemented the use of an electronic care planning and monitoring system. Staff accessed this system using an application on their mobile phone. The system had details of staff rotas and people's care plans which were accessible to staff.
- The office was suitable for the purpose being accessible for people with limited mobility and with good facilities for staff such as a large training and meeting room.

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.

- The provider sought appropriate consent to care and recorded peoples' capacity to make decisions. Senior staff visited people to go through their care plans to ensure they understood and consented to care. If people were not able to give their consent, this would be sought from a person who had legal authority to consent on their behalf such as the person's representative, who had power of attorney for their health to make decisions in the person's best interests. These actions were in line with the requirements of the MCA. One person told us, "The staff always ask me first if I want to do something. They are good like that."

# 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

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

- People talked very well of the agency and often talked of them 'going the extra mile'. People told us complimentary things about staff treating them well and with respect, such as, "Very nice bunch of ladies" And, "All the girls are nice. I have not had a rude one. They choose the staff well and I always get a jolly smiling face." And another person said, "You feel as though the girls care. A relative told us, "The care he had was absolutely wonderful, lovely sense of humour."
- Each person had their life history recorded within their care records which staff used to get to know people and to build positive, caring relationships with them. People told us staff knew them well and cared for them in the way they liked. One staff member told us, "It's a rewarding job being able to help put a smile on someone's face."
- People who used the service and their relatives were complimentary and enthusiastic about the registered manager and her staff. They told us all staff were very kind, compassionate and respectful. One person told us, "The staff are fabulous, always there for you. I always feel I can talk to them and they listen. We have a laugh too."

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

- Staff recognised what was important to people and ensured they supported them to express their views and maintain their independence.
- Care records we looked at contained evidence the person who received care or a family member had been involved with and were at the centre of developing their support plans.
- People we spoke with and their relatives all confirmed they were supported to express their views. Information was readily available about local advocacy contacts, should someone wish to utilise this service. Advocacy seeks to ensure that people are able to have their voice heard on issues that are important to them.
- The registered manager and staff documented people's diverse needs and assisted them to maintain their different requirements.

Respecting and promoting people's privacy, dignity and independence

- Staff we spoke with had a sensitive and caring approach when talking about the people they supported. They understood the importance of protecting and respecting people's human rights. We saw staff had documented people's preferences and information about their backgrounds and considered the support needed to maintain their individuality and independence.
- People told us their independence was encouraged. One relative told us, "They [care staff] are all good at getting [relative] to do as much as possible. They let [relative] help them make the beds when well enough and are very good at encouraging [relative] to join in. They don't undermine [relative] at all."

- People's confidentiality was respected and people's care records were kept securely.

# Is the service responsive?

## Our findings

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

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People's preferences around personal care routines were identified in their care plans and included areas which they wished to remain independent in. Care files were person-centred and individualised to give staff clear guidance about people's specific needs and how these were to be best met.
- Senior staff met with people to identify what they would like to achieve from receiving care services. This information was then documented in people's care plans along with tasks for staff to help people meet these goals.
- People were visited at regular intervals to check they were satisfied with the care provided and it still met their needs. The registered manager also made phone calls to people to check their satisfaction with the service. When people's needs changed, the registered manager acted responsively to people's changing needs by rearranging care visits, scheduling additional care and contacting professionals to help ensure people had the support they required.
- The service ensured people had access to the information they needed in a way they could understand it and comply with the Accessible Information Standard. The Accessible Information Standard is a legal requirement for all providers to ensure people with a disability or sensory loss can access and understand information they are given. As part of the provider's assessment process, people's sensory needs were considered including, how people could contact the service and the format information was sent to people in. The provider made adjustments such as providing documentation in an easy to read format to meet people's communication needs.

Improving care quality in response to complaints or concerns

- People knew how to provide feedback about their experiences of care and the service provided a range of accessible ways to do this. The people we spoke with were all happy with the service they received and had no complaints. They told us they knew how to make complaints. They felt confident that these would be listened to and acted upon in an open and transparent way, as an opportunity to improve the service.
- The provider had a complaints policy. This detailed how people could make a complaint and how these concerns would be investigated. The policy also detailed external agencies that concerns could be referred to such as the local authority. Records of complaints demonstrated the provider investigated concerns thoroughly and wrote back to people to relay the outcome of investigations. Where complaints were upheld, the registered manager wrote to complainants to apologise, outlining actions taken to avoid future reoccurrence. This demonstrated they had an open approach to working with people when they had complaints or concerns.
- We saw there were several compliments made to the service in the form of cards and letters from relatives praising the staff for care they had provided to their family members.

End of life care and support

- We reviewed systems for end of life care for people supported by the service. Although none of the people supported were currently at the end of life, we were informed the service had worked alongside the person, their relatives and other health professionals to coordinate end of life care.

# 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

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

- The service was well-organised and there was a clear staffing structure. There were co-ordinators and supervisors in place, whose role was to organise staffing rotas, supervise care staff and ensure people's care plans were up to date. Each member of the provider's senior staff was knowledgeable in their role and clear about their duties. The registered manager reviewed each senior staff working performance using a set of key performance indicators, which were specifically related to their role. This enabled them to identify strengths and training needs.
- People spoke positively about how the service was managed. They informed us the registered manager was approachable and had a good understanding of people's needs and backgrounds. One person told us, "I like the manager and I trust her and the staff. I can talk to her at any time."
- The service followed all current and relevant legislation along with best practice guidelines, for example, using current good practice in dementia care from the National Institute for Clinical Evidence. The registered manager understood their role in terms regulatory requirements. For example, when notifications should be sent to CQC to report incidents that had occurred and required attention.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The registered manager was open and transparent. They focused on the needs of the person and on their well-being and strived to ensure the quality of the service and care.
- Policies and procedures provided guidance around the duty of candour responsibility if something was to go wrong. One relative told us that they were always contacted by the service when something went wrong. They said, "The agency are very good like that, very open. They let me know if the timings of the visits have not been met and we get to the bottom of it and sort it out."

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

- People told us they were encouraged to comment on care plans and feedback to the management team through regular review meetings. People also told us they could simply speak with staff if there was anything they wished to discuss or change.
- The service had sought the views of people they supported through annual satisfaction surveys. The results were very positive with a 95 % satisfaction rate. Actions had been addressed for any areas where people felt improvements could be made. This showed the service listened and responded to the views of the people they supported and their family members.

- Staff spoke positively about the support they received from the management team. They told us senior staff were approachable and available for advice and support. One member of staff told us, "The manager is good at listening and will always try to sort anything out."

#### Continuous learning and improving care

- There was a strong emphasis on continually striving to improve their service to deliver the best possible care for people supported by Bluebird Care Sefton. This was supported by a variety of systems and methods to assess and monitor the quality of the service. Regular audits had been completed by the service. These included medication, complaints, financial records, training, staff supervision arrangements and reviewing care plan records. Any issues found on audits were quickly acted upon and any lessons learnt to improve the service going forward.

#### Working in partnership with others:

- The service worked in partnership with other organisations to make sure they followed current practice, provided a quality service and the people in their care were safe. When people had been discharged from hospital for rehabilitation the service had worked in line with the principles of reablement to promote skills and independence. This ensured a multi-disciplinary approach had been taken to support care provision for people in their care.