

TAAE Management Ltd

Bluebird Care Sunderland

Inspection report

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13 November 2019

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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 Care (Sunderland) is a domiciliary care agency providing personal care and support to people living in their own homes. Not everyone who used the service received personal care. 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 inspection 36 people were receiving personal care.

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

People and relatives praised the quality of care and support provided. The management team had a clear vision of providing great care and support, enabling people to remain independent and in their homes.

The provider had processes in place to minimise the risk of abuse and harm. Staff had completed safeguarding training and were aware of how to raise concerns. Individual and environmental risks were identified and managed. Procedures were in place to ensure people received ongoing care and support in the event of an emergency.

The service continued to operate a thorough recruitment process. Staff had the appropriate training and experience to support people safely. The service sought specialist training from healthcare professionals when people had a specific condition or care need. The registered manager conducted regular observations of practice and competency. Staff told us they were supported to develop and received supervisions and appraisals.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this.

The service embraced technology and it was used to improve the quality of care and support. The system was used throughout the service including the recording of interactions with people and administration of medicines. People received their medicines as prescribed.

Care plans were personalised and clearly outlined people's care and support needs. Staff were responsive in advising the office team about changes in people's needs.

People were treated with respect and dignity. People and relatives told us the service was flexible and responsive to their needs.

The service worked in partnerships with healthcare professionals to ensure people received joined up care. Staff supported people to access the community. The service recognised isolation can have an impact on people's wellbeing and worked with local organisations to support people to have positive outcomes.

The registered manager constantly reflected on the service provided. Information was gathered from a range of sources and reviewed to identify any trends with lessons learnt cascaded to staff.

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

Rating at last inspection

The last rating for this service was good (published 4 May 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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.

Bluebird Care Sunderland

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 and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

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

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 provider or a manager would be in the office to support the inspection.

What we did before the inspection

We reviewed the information we held about the service. This included any statutory notifications received. Statutory notifications are specific pieces of information about events, which the provider is required to send to us by law. We contacted professionals in local authority commissioning teams and safeguarding teams. We did not request the provider to complete a Provider Information Return. This is information providers are required to send us with key information about the service, what it does well and improvements they plan to make. We took this into account in making our judgements in this report. We used all of this information to plan our inspection.

During the inspection

Inspection site visit activity started on 6 November 2019 and ended on 13 November 2019. We visited the office location on 6 November 2019 to review records relating to the running of the service, such as medicine records, complaints and training records. We contacted people, relatives and staff with prior permission, on 8 and 13 November 2019.

We spoke with one person who used the service, two relatives. We spoke with eight members of staff including the director, registered manager, supervisor, co-ordinator and four care staff.

We reviewed two people's care and medication records. Also records relating to the management of the service including staff recruitment, training and governance.

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

- The service had effective systems to safeguard people and reduce the likelihood of abuse. The service had dealt with one safeguarding concern and alerted the local safeguarding team.
- Staff had completed safeguarding training. They were confident in recognising the signs of abuse and the actions they needed to take to keep people safe.

Staffing and recruitment

- People received support from a regular staff team. One person told us, "Yes, I always have the same carer and she has the maturity to just get on and do things."
- The service continued to operate an effective recruitment process including Disclosure and Barring checks and obtaining references from previous employers.
- Arrangements were in place to support staff outside office hours. The service was flexible and worked around people's lives.

Assessing risk, safety monitoring and management

- Risks were identified and managed. Risk assessments were created which outlined guidance for staff to follow to keep people safe.
- A business continuity plan was in place to ensure people received continued care and support in the event of an emergency.

Using medicines safely

- Medicines were managed safely. Medicine Administration Records were recorded on the service's electronic handheld systems. If a person did not receive their medicines at the allocated time an alert was sent to the management who could respond immediately.
- Staff had completed training in the administration of medicines. The registered manager regularly conducted observations of practice.
- People were supported to remain independent as possible and manage their own medication.

Preventing and controlling infection

- Staff had completed infection control training and had access to gloves and aprons to use whilst supporting people.

Learning lessons when things go wrong

- The service had systems to monitor, review and learn from accidents and incidents, safeguarding concerns and complaints.

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

- A full assessment was completed prior to people receiving care and support from the service. The information gathered was used to create care plans outlining the person's support needs and preferences.
- People's care and support needs were regularly assessed to ensure the service continued to meet their needs.
- The protected characteristics as defined in the Equality Act 2010 were captured as part of the assessment process.

Staff support: induction, training, skills and experience

- People were supported by well trained and experienced staff.
- Staff completed an induction and a period of shadowing with an experienced member of staff. One person told us, "Once there was a girl who came to work here and I expressed to the manager that she maybe needed a bit more training, it was taken on board and sorted straight away."
- Staff received regular observations of practice by the management team, ensuring they remained at the appropriate level.
- The service consulted with external healthcare professionals to obtain specialist training around specific needs.

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

- People's nutritional needs were met. One relative told us, "They go in and see her if they need to they make her some food, a sandwich or a cooked meal depending on the time of day."
- Where people required assistance to manage their nutritional needs, care plans outlined the level of support for staff to follow.
- Staff told us how they supported people with food preparation and made sure items were readily available between visits.

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

- The service worked with healthcare professionals and supporting services to achieve positive outcomes for people. The registered manager had established good links with the local healthcare professionals.
- Staff were responsive to changes in people's health. They sought immediate assistance when necessary or reported change in needs to the management team for reviews to take place.

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.

- Staff followed the principles of the MCA. Staff had received MCA training. Staff told us they would gain people's consent before providing care and support.
- The registered manager told us no one had a Court of Protection authorisation. They understood the actions to take if they thought someone lacked capacity.

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 remained the same. 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

- People and relatives were complimentary about the caring nature of the staff. One person said, "The quality of the staff is excellent, they seem to have a lot of experience and they are all very caring." A relative told us, "We are over the moon with her care – we cannot fault what they do. "
- Staff had received training on equality and diversity. People were treated as individuals.
- Staff had built relationships with people. They clearly knew people well. One relative said, "They love her – she can't remember much but she is happy and they seem to genuinely love going in to see her and look after her."
- Staff were kind and caring. A person told us, "She is very bright and breezy. My family wanted me to have a carer as I had a fall and became depressed. She just brightens up my day."

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

- People and relatives told us they were involved in discussions about their care. One relative said, "Yes I am always involved in his planning, day to day with the staff."
- Rotas were produced so people knew which staff member was attending and when.
- Advocacy services information was available to people with a service user guide. No one was using the services of an advocate at the time of inspection.

Respecting and promoting people's privacy, dignity and independence

- People were treated with respect and dignity.
- Staff described how to make people comfortable and support them with dignity. One staff member said, "Close the curtains, explain what is happening and keep people covered as much as possible."
- Staff promoted people's independence. Support plans clearly outlined what a person could do independently and what they needed support with.
- People's confidential information was held securely. Handheld devices were password protected.

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 good. At this inspection this key question has remained the same. 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

- People received personalised care and support from a regular team of staff who knew them well.
- The provider and registered manager had a clear focus and drive to make sure people received good care and support. The service worked with other agencies and healthcare professionals enabling people to remain in their homes.
- Care records reflected people's current care needs and preferences. Staff were prompt in identifying changes in people's needs and alerting the management team.
- People took the lead in decisions about their care and support needs. People and relatives told us they felt the service listened and acted on their wishes.
- The service had started to use Herbert Protocol forms so they could react quickly if a person went missing. A Herbert Protocol form holds important information about each person to support the police in the event they were to go missing.

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.

- People's communication needs were outlined in care records.
- The service followed guidance within the AIS. Information was readily available in different formats to support people in understanding their care plans and functions of the service.

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 service recognised the impact loneliness can have on people's well-being. They worked in partnership with a local company which delivered wellbeing programs which included laughter therapy, movement and arts and crafts.
- The service organised an annual event which brought together people and relatives. It involved promoting the local area with music, food and reminiscence. The director told us, "It's about bringing people together to make memories."
- Care records reflected people's histories and interests. People were supported to maintain their religious beliefs.

Improving care quality in response to complaints or concerns

- The service had a complaints procedure in place. The information was used as another opportunity to learn.
- The registered manager told us, "Issues are dealt with immediately so they don't become a big problem."
- People we spoke with did not have any concerns and were confident any issues would be addressed.

End of life care and support

- At the time of inspection, no one was receiving end of life care.
- The director had established links with the local hospice. When required, the service sought advice from specialist healthcare professionals, with the aim that people would have bespoke care and support.

Is the service well-led?

Our findings

Well-Led – this means 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 remained good. This meant 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

- Staff were clear about their roles and responsibilities. The registered manager had submitted the required statutory notifications to CQC.
- The provider had systems to monitor and assess the quality and safety of their service. Audits were regularly completed to assess standards and drive improvements.
- The management conducted observational visits to monitor staff performance and ensure people received good care and support.

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

- The service was committed to providing person-centred care. Enabling people to remain in their homes in a familiar community.
- People and relatives praised the service. One relative told us, "The communication is excellent, we are over the moon with her care – we cannot fault what they do."
- The director spoke passionately about initiatives the service was planning to introduce, including using the National Early Warning Score (NEWS). The service was provided with equipment to obtain records of people's oxygen levels, heart rate, blood pressure, temperature and level of consciousness. This allowed the service to provide accurate information to healthcare professionals, with an aim to reduce hospital admissions.
- Staff told us the registered manager was supportive and approachable.

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

- Duty of candour requirements were understood by the registered manager. They understood their responsibility to apologise to people and give feedback if things went wrong.
- The director constantly reflected on the service provided. They were keen to use information collected and learning from any conclusions. The director told us, "Communicate, don't assume and be proactive, CAP. This message runs through the service."

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

- The service sought feedback from people, relatives and staff. Information was used to drive improvement.

- The registered manager regularly contacted people to enquire about the support and care received.
- Staff had the opportunity to discuss the service in team meetings and supervisions. The service also cascaded information via staff members' handheld devices.

Working in partnership with others

- The service worked in partnership with healthcare professionals to make sure people received ongoing care.
- The director and registered manager were passionate about ensuring people remained part of the wider community.
- The service had developed links with local businesses, including a handyman, hairdressers, counselling, solicitors for Lasting Power of Attorney support. The director told us, "We are not saying use this service we are only offering people the opportunity to get all the relevant information to make a sound decision."