

Marcha Solutions Ltd

# Bluebirdcare Ltd / Loughborough & Ashby de- la Zouch.

## Inspection report

Unit 4, The Oak Business Centre, 79-93 Ratcliffe Road  
Sileby  
Loughborough  
LE12 7PU

Date of inspection visit:  
25 September 2019  
26 September 2019

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22 October 2019

## 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

Bluebirdcare is a domiciliary care agency providing personal care to 14 people at the time of the inspection.

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

People felt they were supported in a safe way by staff. People's risks were identified, assessed and managed appropriately. Staff understood how to protect people from the risk of abuse. People were safely supported with their medicines by competent staff. People were supported by a small team of carers that knew them well, however there were some concerns over call timings.

People's eating and drinking needs were met and they were supported to access healthcare when required. Staff were appropriately inducted and trained in order to meet people's specific needs.

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 practice.

People got to choose how they wanted to be supported. Staff followed personalised and detailed care plans in order to support people in an individualised way. People's concerns were addressed promptly and effectively.

The service was led by an experienced and passionate management team whose focus was on providing quality care. Staff felt supported and involved in the service. The service had good quality monitoring systems in place.

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

### Rating at last inspection

This service was registered with us on 03/08/2018 and this is the first inspection.

### Why we inspected

This was a planned inspection.

## 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.

# Bluebirdcare Ltd / Loughborough & Ashby de- la Zouch.

## **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

This inspection was carried out by 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 it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 25 September 2019 and ended on 26 September 2019. We visited the office location on 25 September 2019.

### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

### During the inspection

We spoke with four people who used the service and two relatives about their experience of the care provided. We spoke to two healthcare professionals who had worked with the service. We spoke with six members of staff including the provider, registered manager, care coordinator and care workers.

We reviewed a range of records. This included three people's care records and medication records. We looked at two staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed.

# Is the service safe?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good.

This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Systems and processes to safeguard people from the risk of abuse

- People's risks were assessed and managed appropriately. Where specific risks had been identified staff were provided with clear guidelines on how to support people in a safe way.
- Staff were trained in how to protect people against the risk of abuse and understood how to report potential safeguarding concerns.
- People felt safe whilst being supported and their relatives recognised this too. One said, "[Person] is definitely safe with the carers...I 100% trust the carers and that things are done properly."
- People were protected by the systems and processes in place.

Staffing and recruitment

- People were supported by a small team of carers who knew them well. One person explained, "The same girl [staff] comes every time, I have had a few different ones at weekends, but they have all been alright, they get to know me. I haven't had random people turning up." A relative said, "It is a small team with the same carers, I am thankful as they all know [person] and all get on well."
- Some people had concerns about call timings, although they were often within a 30 minute window and they would receive a call from the office notifying them. One relative said, "They turn up on time, on occasions that they have been late, due to illness or the last client, they always let you know which is a good thing, I don't mind if they are half an hour late." The registered manager explained that they have plans in place to improve the live monitoring of call timings.
- The service established how many staff were required by using a franchise recommended calculation. At the time of the inspection they were within the advised range. They were also recruiting more staff at the moment to improve the staffing ratio and improve call timings.
- Staff were safely recruited. Robust pre-employment checks had been carried out on staff members to ensure, as much as feasibly possible, that they were safe and suitable to work for the service.
- Some concerns were raised with regard to staff performance however, the registered manager was aware of these and dealing with them appropriately.

Using medicines safely

- Staff supported people to take their medicines in a safe way and had a good awareness of the risks associated with their medicines. A relative explained, "[Person] previously had a reaction to a medication and the pharmacist sent the same medication over. The carer spotted this and left me a note."
- Staff recorded the support they provided in relation to medicines on an electronic recording system.

These records were audited by the registered manager on a monthly basis.

- The processes and systems in place ensured that people were safely supported with their medicines.

#### Preventing and controlling infection

- Staff wore personal protection equipment when supporting people. One person explained, "They [staff] always wear gloves, and change them 2 or 3 times. They wear booties too. I asked them to take off their shoes and now they've got shoe covers, so I'm pleased about that."

#### Learning lessons when things go wrong

- The registered manager had a system in place to record, investigate and analyse any accidents and incidents. We saw appropriate actions had been taken and information had been shared to the wider staff team. One example had led to a change in the medication process for when there were two members of staff on a call, to minimise the risk of missed doses.

# 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.

This is the first inspection for this newly registered service. This key question has been rated good.

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

- People's needs, choices and preferences were fully assessed and recorded prior to support being provided.
- Staff were supported by management to provide care and support in line with best practice and national guidance.

Staff support: induction, training, skills and experience

- Staff completed a 12-week induction and probation period which included appropriate training and shadow shifts, to ensure they were competent and prepared before independently supporting people.
- Staff without past experience of care were to complete the Care Certificate. The Care Certificate covers an identified set of standards which health and social care workers are expected to implement to enable them to provide safe and effective care.
- Staff were happy with the support and training they received. One staff member said, "The training is good, we go out knowing what we are doing."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support; Supporting people to eat and drink enough to maintain a balanced diet

- People were supported with their eating and drinking needs, with any risks associated with these were assessed and plans put into place.
- Staff supported people to live healthier lives and achieve good outcomes. For example, one person described to us how, through the support they have received from Bluebirdcare, they had been discharged from mental health services.
- The service worked well with other agencies to provide good care. A healthcare professional explained, "I think they are a good service, they have stepped up and taken on some difficult packages of care, they really get to know people. They communicate well and have responded well to the advice from occupational therapists."

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.

- The service worked within the principles of MCA and staff understood the MCA. They ensured they obtained people's consent prior to offering care.
- One member of staff explained, "A person is capable of making a decision for themselves, certain things they may not and the bigger things they might not, so that's why they are assessed. I ask whether its ok before taking part in any tasks, even if it's been 100 times or one time I will always ask before, sometimes they get annoyed, but I remind them that I have to ask."

# 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.

This is the first inspection for this newly registered service. This key question has been rated good.

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 their relatives described how kind, friendly and caring the staff were. People said, "The girls are lovely and do anything they ask of them" and "They talk to me like a normal person...they will do random jobs for me like cleaning the fish tank or taking me swimming." A relative said, "They are very caring, they listen to what I have to say and work with me."
- Staff said they were able to get to know people. One explained, "We get enough time to get to know clients, we see the same faces and over time we build relationships with them."
- Staff understood how to respect and support people's diverse needs.

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

- People felt listened to and included. One person explained, "Carers don't do anything without asking me."
- The service supported people to voice their views and make their own decisions when it came to their care. One person explained, "When they did them [care plans] there were things I didn't agree with, so they did redo it and reviewed it. I just had a word with them and they did it. They came out and spoke with me, I have no concerns now."
- Some people explained that they had asked to be supported by female carers only and the service had respected this.
- People were provided with information about advocacy services. This meant that people would have access to someone who could speak up on their behalf if they felt unable to.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with respect and promoted their independence. One person explained, "They don't take liberties, I feel respected."
- A staff member explained, "We talk to people, for example 'are you alright to do this, do you want support with this?' We build up the relationship, so we can just talk about things. They will tell me what they can do, and I try to bring their spirits up and encourage them to be independent." Another said, "We always gain their consent for everything before we start to ensure they are comfortable with what we do. We close the door, cover them with towels and respect their wishes."

# Is the service responsive?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good.

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 and their relatives were involved in the planning of care. This ensured that plans were personalised and specific to their needs. All care plans were signed off by people or their representatives to ensure they agreed with the content.
- A person explained, "They did a long assessment, [registered manager] came over had a long session about what I needed." The registered manager explained after the first assessment the plans were developed and then they had another meeting to show people their full care plan.
- People's care records were available for them, or their relatives, to view on an secure 'app' on their mobile phones. However, the people we spoke to were not all aware of this, but they did have paper copies of their plans.
- Staff were provided with plans that enabled them to support people in an individualised way to ensure they met people's needs and preferences.

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 assessed and included in care plans.
- At the time of the inspection the service was not supporting anyone that required any information in alternative formats or required the use of communication aids.
- The registered manager explained that alternative formats, such as large print, would be made available if required.

Improving care quality in response to complaints or concerns

- People knew how to raise concerns with the service if they had any. One person explained, "If I'm not happy I just ring up and they sort it straight away."
- The registered manager ensured that both complaints and concerns were investigated thoroughly and responded to appropriately in line with the services complaints policy and procedure.

End of life care and support

- At the time of the inspection the service was not supporting anyone with end of life care.
- People's care plans did include their wishes for their care and treatment at the end of their life, but these

were not all fully completed.

# Is the service well-led?

## Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection for this newly registered service. This key question has been rated good.

This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- People and their relatives all knew who the registered manager was and spoke positively about his approach and of the service. A relative said, "I have been really impressed with the service and the company as a whole I am really happy with it."
- The registered manager was supported by passionate and committed providers who were focussed on improving the lives of the people they supported.
- Staff understood that the service aimed to provide a person-centred caring service. One person explained, "I think the ethos is to be a caring service. There is no point being a successful business if you are not looking after the clients. That's what I can see."

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

- There was a clear structure to the service and everyone was aware of this and their own responsibilities.
- Staff felt supported and had regular supervisions to ensure their competencies and delivery of quality care.
- The registered manager understood his duty to monitor performance so therefore completed regular checks and audits.
- The management team held regularly risk meetings to ensure they maintained oversight of the service and that the quality improvement plan was being updated and actioned on.
- The registered manager understood their regulatory duties and requirements.

Continuous learning and improving care; 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 service conducted an annual survey to identify areas they can improve on; the results were collated and analysed; actions from this and an internal audit had been added to the quality improvement plan.
- People's relatives, where appropriate, were kept informed when there had been concerns or incidents. This shows that the registered manager worked in an open and transparent way in line with the duty of candour.
- The service was looking for ways to improve and expand on the care they offered people.

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

characteristics; Working in partnership with others

- People and their relatives were happy with the level of communication and engagement from the service. One relative said, "We work really well together, they communicate with [person] really well which helps."
- Staff felt involved in the service and said that they were able to provide feedback and suggestions both informally and at team meetings.
- The service worked with the local community on various charity events, such as helping to host a "Macmillan Coffee Morning". The registered manager had also given talks in the community to raise awareness about living with dementia.
- The service worked in partnership with healthcare professionals, commissioners and the local safeguarding team to ensure people received the care and support they required.