

J&Y Webber Services Limited

Bluebird Care North East Lincolnshire & West Lindsey

Inspection report

64 St Peters Avenue
Cleethorpes
North East Lincolnshire
DN35 8HP

Tel: 01472601177
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?

Good 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

The inspection took place on 25 October 2018, it was announced.

The service is located in Cleethorpes and supported people in North East Lincolnshire and West Lindsey. This service is a domiciliary care agency. It provides personal care to people living in their own houses in the community. It supports older people and people with mental health, physical disability or sensory impairment needs. At the time of the inspection 70 people were receiving personal care.

Not everyone using Bluebird care North East Lincolnshire and West Lindsey receives a regulated activity; The Care Quality Commission (CQC) only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided.

There is a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

At the last inspection the service was rated good. At this inspection, we found the service had improved to outstanding. The reasons why responsive and well-led domains have been rated outstanding are summarised below.

During this inspection, we found multiple examples to demonstrate the staff and management team were passionate about providing an innovative, excellent service.

People were protected from social isolation. Staff's extreme dedication enabled them to recognise the vital importance of providing meaningful activities and they worked tirelessly to meet people's holistic needs, hobbies and interests.

People received individualised end of life care and their lives were celebrated on a tree of remembrance.

The provider and registered manager placed a strong emphasis on continually improving the service. They were extremely passionate and dedicated about fund raising and supporting good causes that helped to make a difference to people's lives. The provider, registered manager and staff promoted the spirit of generosity.

The provider and registered manager were wonderfully passionate about delivering an outstanding person-centred service. The providers ethos and values were promoted by the staff at the service which, benefitted the people using the service.

Quality assurance procedures were in place to assess the quality of the service provided and maintain people's welfare and safety.

The provider and registered manager valued the staff team immensely and supported them. They in turn valued the service and supported people extremely well.

Individualised end of life care was promoted at the service. Staff followed people's recorded wishes at this time.

Staff understood their responsibilities to protect people from harm and abuse. Accidents and incidents were monitored. Robust recruitment and medicine management processes were in place. Infection control was maintained.

Staffing levels met people's needs and they remained under review by the management team. Staff undertook training and supervision to maintain and develop their skills.

People were supported by kind, caring and compassionate staff.

People's nutritional needs were met.

People who lacked capacity to make their own decisions about their care and support had care provided by staff in their best interests following discussion with their relatives and relevant health care professionals. This helped to protect people's rights.

Staff gained advice and support from health care professionals to maintain people's wellbeing.

People's privacy and dignity was respected. People were addressed by their preferred name.

A complaints policy was in place and issues could be raised. However no complaints had been received. Compliments were received about the service provided.

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.

People were safeguarded from abuse and harm. Accidents and incidents were monitored. Recruitment systems were robust.

Staffing levels were monitored to ensure there were enough skilled and experienced staff to meet people's needs.

Medicines management and infection control was robust.

Audits of the service were undertaken to help to protect people's health and safety.

Is the service effective?

Good ●

The service was effective.

Staff were provided with training to help them meet people's needs. Staff received supervision and had a yearly appraisal to maintain and develop their skills.

People's rights were respected and care was provided with consent or in people's best interests.

People's dietary needs were assessed, monitored and met.

Is the service caring?

Good ●

The service was caring.

People were supported by caring, kind staff.

People's privacy and dignity was protected.

Confidential information was stored securely in line with the Data Protection Act.

Is the service responsive?

Outstanding ☆

The service was outstandingly responsive.

Staff were extremely dedicated at recognising the importance of promoting meaningful activity and social stimulation for people.

Staff were passionate about protecting people from the risks of social isolation, and loneliness.

Staff demonstrated their commitment to provide personalised holistic care and support. People received end of life care which, ensured they had a comfortable, dignified and pain-free death.

There was a complaints procedure in place for people to use.

Is the service well-led?

The service was outstandingly well-led.

The directors and registered manager promoted excellence and motivated staff to provide exceptional care and support to people. Staff were happy in their work and were valued and supported by the management team.

The provider had a clear set of values and staff demonstrated a shared commitment to meeting them. Staff were nominated for and gained awards, which enhanced the service provided for people.

The management team were very proactive in identifying and implementing creative solutions to enhance the quality of service provided to people.

Outstanding 

Bluebird Care North East Lincolnshire & West Lindsey

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This comprehensive inspection took place on 25 October 2018 and was announced. We gave the service 48 hours' notice of the inspection visit because the location provides a domiciliary care service. We needed to be sure that the registered manager would be available to speak with us. The site visit ended the same day.

The inspection was carried out by one inspector and an Expert by Experience who conducted telephone interviews with people using the service and with their relatives. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service. Their expertise included older people, dementia care and services provided to people in their own home.

We used information the provider sent us in the Provider Information Return (PIR). 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 looked at the notifications we had received and reviewed all the intelligence the Care Quality Commission (CQC) held to help inform us about the level of risk present and make a judgement about this service. During our inspection we looked at a variety of records; this included four people's care records. Records relating to the management of the service, policies and procedures, quality assurance checks and audits and complaint information. We looked at three staff files, staff's training, supervision, and appraisal records, recruitment documentation and staff rotas. We spoke with one director, the registered manager and nine staff. The expert by experience undertook telephone interviews with five people using the service and with four relatives, to gain their views.

We asked for feedback about this service from other stakeholders. These included Healthwatch, and the local authority safeguarding team and commissioning team. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

Is the service safe?

Our findings

People told us they felt safe with the staff and protected from abuse and harm. We received the following comments, "When the carers are here, I do feel safe", "Yes (I feel safe) as I normally know when the staff are coming and I can identify them because they wear a uniform" and "I feel safe, the carers come in by the key safe. They say a cheery hello, so I am not surprised."

Relatives told us their relations received a safe service. They commented, "Oh it is definitely safe. I know [Name] feels secure and he gets on very well with the carers" and "Safe yes, in terms of staff being cruel or hurting my relative, I never have had any concerns at all."

The provider had safeguarding and whistleblowing (telling someone) policies and procedures in place. Staff undertook training about how to protect people from harm and abuse. Potential issues were raised with the local authority and we received statutory notifications as required. Staff had information cards and an 'app' on their phones about how to safeguard people. A member of staff said, "I would report any issues."

Risk was managed safely and effectively. People's needs were assessed and risks to their health and wellbeing were recorded for example, slips, trips and falls or poor dietary intake. This information was reviewed regularly and was updated as people's needs changed. Staff promoted people's independence and choice, even if there were some risks present. Risks in people's home environment were assessed and monitored to maintain the safety of all parties.

Staffing levels were reviewed by the registered manager and provider. People's needs were assessed and this information was used to make sure there were enough staff on duty to meet people's needs. Staff told us, "There are enough staff." The service was monitored using technology which reviewed people's calls as they occurred. Office staff were trained to undertake care calls which, allowed them to support people and staff in emergencies.

Medicine management policies and procedures were robust. Staff were provided with training and supervision about how to assist and prompt people with their medicines. Electronic records and Medication Administration Records (MARs) were used by staff to record medicines that people had taken. People's allergy information was recorded to alert staff and health care professionals of potential risk. Audits of medicine management were undertaken to ensure people received their medicines as prescribed.

Staff were provided with personal protective equipment such as, gloves and aprons which, helped maintain effective infection prevention and control. One person told us, "Staff do wear gloves and aprons."

The management team monitored the safety and wellbeing of people and staff. If accidents or incidents occurred they were investigated and this information was used to help to prevent any further re-occurrence. For example, one person using the service was deceived out of savings. Their relative and staff worked together to get this money back and action was taken so this could not occur again.

The provider had a business continuity plan in place which, informed staff about how the service would be maintained for people if the office was closed due to a fire or flood for example. Staff were trained in emergency first aid, fire safety and health and safety to help them maintain people's wellbeing.

Is the service effective?

Our findings

People told us the staff knew how to support them and had completed training so were effective at meeting their needs. We received the following comments, "The staff are skilled and trained, they are very professional and very good" and "The carers I have are very well trained." A relative said, "The staff are competent."

People had their needs assessed before they were provided with a service. Information was gathered from people, their relatives, discharging hospitals, the local authority and from relevant health care professionals. This ensured people's needs were known and could be met. Staff worked with relevant health care professionals to make sure people received the care they required to maintain their wellbeing.

Staff were provided with training in a variety of subjects, for example, health and safety, first aid, safeguarding, food hygiene, fire safety and the Mental Capacity Act 2005. Nurses trained staff in subjects such as diabetes, epilepsy and enteral nutrition (liquid nutritional food given to people via a tube placed into their stomach). A period of induction was undertaken by new staff which, included shadowing senior care staff. The Care Certificate, (a nationally recognised training programme) was provided for staff to develop their skills. Staff confirmed the training helped them keep their knowledge up to date. A member of staff said, "The training is good at keeping me up to date with things."

The service employed nurses who were registered to practice and had completed the re-validation process to make sure their skills were up to date. They reviewed people's care and assessed those with nursing needs. Work was being undertaken to enhance training for staff regarding catheter care and enteral nutrition.

Staff undertook regular supervision and had a yearly appraisal. This allowed discussion of their performance to take place and for further training needs to be agreed. If issues were raised about staff's performance, extra training and supervision was provided to address this. Staff told us they felt supported. One said, "I find the supervision and appraisal very helpful."

Small teams of staff supported people which, promoted trust and a good working relationship to develop. Staff confirmed they took their time to understand people's needs and provided person-centred care and support to people.

Information about people's care needs was kept up to date by staff and was stored in the information technology system used by the service. This was accessible which, enabled it to be shared with people's consent, if they were admitted into hospital. Staff monitored people's health and sought advice from relevant health care professionals as people's needs changed to maintain their health. The service had developed good working relationships with health care professionals to promote people's wellbeing.

People's dietary needs, preferences and allergies were assessed, recorded and monitored. Staff prepared meals and assisted people to eat and drink, if necessary. Staff reported concerns to make sure people's

dietary needs were met.

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 made decisions about their care and support, where possible. Where people lacked capacity, care was provided in their best interests following discussions with the person's relatives and relevant health care professionals. This helped to protect people's rights. Staff told us they gave people choices and asked for consent. A member of staff said, "We talk with people and ask what they want and follow their wishes."

The service promoted activities and worked to ensure people were not lonely or isolated. The provider's office is located in Cleethorpes. It was accessible for people wanting to visit the service.

Is the service caring?

Our findings

People told us they valued their relationships with the staff who were kind and caring and they treated them with dignity and respect. We received the following comments, "The staff are kind and caring, I can take to them", "Oh yes, the staff are kind and patient, as one would expect them to be", "Staff are aware of my range of emotions, the staff are sensitive" and "I couldn't ask for anything better."

Relatives of people using the service said the staff were caring and respectful. One said, "Staff always make sure before they go, that my relative is comfortable before they leave. They ask if there is anything else they can do for them." Another said, "Staff are respectful."

People told us the staff spent time with them and listened to what they said which, helped them feel cared for and at ease with the staff. A person said, "I can build a rapport with all the staff. We seem to find topics to talk about, football, shopping and holidays. The staff are easy to develop a professional relationship with."

Staff we spoke with said they loved their work and enjoyed supporting people allocated to them. Staff told us, "I love working here. It is a nice 'family', made up of people we care for and staff", "We are matched to our customers, so we get along well." People received care and support from a small team of regular staff to maintain continuity of care. People valued this, a person said, "I wanted continuity of care. I didn't want a whole lot of different staff. This has gone very well with Bluebird. Usually I get the same carer on a morning and two other carers to cover. This is the same in the evening." A relative said, "The continuity of care is really good. [Name] has two or three carers who visit and latterly four. One of the reasons I went with the service was they try to keep the same carer for people living with dementia." Staff worked flexibly to cover holidays and absence so people were cared for by staff who understood their needs.

Staff were introduced to people before they supported them. Information about the person's life, family history, next of kin and preferences for their care and support was provided to enable staff to provide holistic person-centred care. A relative told us, "The agency are good at finding carers who suit [Names] personality. One or two carers would go anywhere with them and do anything for them. They spend time to find out who could work with [Name]. They sent carers for a couple of visits to find this out."

People told us their privacy and dignity was respected. For example, a person told us, "Staff make sure the doors and curtains are closed when delivering my care." Another person said, "When I get out of the bath, staff discretely pass a towel. I don't feel embarrassed at all." People confirmed staff asked how they wished to be addressed. People we spoke with told us they made decisions about the care and support they wished to receive and their wishes were followed by the staff.

People's communication needs were recorded and were understood by staff. People were given information about the service in a format that met their needs. This ensured the Accessible Information Standards were complied with. Advocates were available locally (independent representatives) to help people raise their views. We found data was stored securely to protect confidential information, this was in line with the Data Protection Act.

Equality and diversity information such as gender, race, religion, nationality and sexual orientation was recorded in people's care records. People confirmed they received care and support which reflected their diverse needs in respect of the nine protected characteristics of the Equality Act 2010. We saw no evidence to suggest that anyone who used the service was discriminated against.

Is the service responsive?

Our findings

The service was extremely dedicated at recognising the importance of meaningful activity and social stimulation. Many examples were shared with us. One person who could not travel wanted to go to Liverpool because they were a Beatles fan. A member of staff found out a 'Beatles' tribute band was appearing at Grimsby Auditorium. They spoke with the management team who paid for both to attend the concert. The member of staff said, "We cannot get [Name] to Liverpool, but we can get them to the Auditorium." The person said, "I am over the moon, how lovely was that?" Some people wanted to go to Lincoln Castle to see the Poppy display, this was arranged for them free of charge. Another person who was bomber crew in the war was being taken, as a surprise, to the new Bomber Command Centre Memorial at Lincoln. Another person was assisted by staff to have a holiday and was supported by staff to attend their 60th wedding anniversary celebration. A family member wrote, "You allowed [Name] to live, thank you all." These examples demonstrated the staff's commitment to do all they could to meet people's wishes, which enhanced their lives.

Staff were passionate about protecting people from the risks of social isolation, and loneliness. The service took part in the Mayor of Cleethorpes Combatting Loneliness Scheme 2017. A social event at Christ Church, Grimsby was organised by staff. The registered manager said, "We really want to raise awareness that loneliness is an issue, many people don't see anyone apart from their carers. The idea is to bring people together so they can have a chat and find common ground." One person said, "It is very nice to meet all these people and get out of the house." A person whose family could not attend on Christmas Day was surprised by their member of staff cooking and then delivering a home cooked Christmas dinner to them, both ate this together. The person said, "This was amazing."

Staff demonstrated their commitment to work tirelessly to meet people's holistic needs in a personalised way, in accordance with their preferences and wishes. A member of staff told us, "I have people I look after who love reading. It was difficult for them to get to the library so I started a library at Bluebird. I take the books to people and they can have them for as long as they like. This includes talking books for the visually impaired." Staff understood people's religious needs and delivered church magazines to people and organised Holy Communion. A member of staff told us, "We provide this support because there is a need for it and it puts a smile on people's faces."

Individualised end of life care was promoted. People had an 'End of life plan, What I wish to happen' record completed. The registered manager told us the staff followed people's specific wishes. Staff took pride and were passionate about supporting people at this time. After people had passed away their name was placed on a 'tree of remembrance' that was hand painted at the office so staff could celebrate the times they had shared together. Staff always attended funerals and an open invitation was given to people's family to keep in touch with staff to support them through the grieving process.

Staff had experience in delivering end of life care and were committed to ensuring people received a comfortable, dignified and pain-free death. The service promoted the Marie Curie, 'Thinking about your care and wishes ahead of time, planning ahead' documentation. Feedback from family members about this care

was heartfelt and included the following comments, "Thank you for all your loving care, for all the many visits, always with a smile and a cheerful greeting, for your professionalism in understanding and helping with problems that occurred. You all gave [Name] an extra year of life, which you all made possible. And we made the most of it", "A big thank you to all the carers who looked after [Name]. You are all great and helped to make the last months of [Names] life extremely comfortable and pleasurable" and "I want to thank you for the fantastic care you all gave to [Name], who spoke very highly of you, you acted with the upmost professionalism and considered them as a friend. It was a great comfort to me knowing you provided such a great start to [Name] each day."

The provider had joined a scheme called Forest, The Heart of England. For each person who had used the service who passed away the provider had made a donation which, was used to buy and plant trees of remembrance throughout England.

The service provided was person centred and people were supported in varying situations. For example, a person who the staff knew feared hospitals had to attend hospital as an emergency. Staff were immediately sent to the accident and emergency department to support the person. The registered manager told us, "We looked at what we could do together, the hospital staff and our staff. This was necessary." We received the following comments from people about the support they received, "The carers are highly responsive at delivering my care the way I want it. All the carers I have had are fabulous. They are intuitive." and, "Everyone works very hard to make sure I receive the service I need. I am very enthusiastic about the service I receive."

Relatives gave very positive feedback about the service. One said, "We have just spent a weekend listening to our relation telling us how thrilled they are about the care provided. We cannot tell you how comforting that is to know they are so well looked after. Your [staff] have had such a positive impact on them and their health. We wanted to say a big thank you to everyone."

Assessments of people's needs were completed by senior staff or by nurses. They developed person-centred care plans and risk assessments in conjunction with the person or their family. People's care records were mainly electronic and they were updated immediately when staff attended people's calls. This ensured staff were able to deliver the care and support people required and changes in people's needs were implemented immediately. People's care records took account of the person's skills, abilities, preferences and wishes. One person told us, "Staff write on my records using their phone so the next carer knows what is going on. I think they are pretty efficient." People's communication needs were recorded and information was provided to people in a suitable format which, kept them informed.

People told us before new staff provided care or support they were introduced to them. The staff had worked 'shadow shifts' with other experienced staff which, helped them understand how people wished to be supported. Staff were 'matched' to people as part of the assessment process to encourage positive relationships to occur.

Staff we spoke with consistently demonstrated an exceptional knowledge and understanding of the individual support needs of people they cared for, including their wishes and preferences for their care. Relatives informed us about support staff provided to their loved ones in emergency situations. For example, a person was discharged from hospital with a cannula in their arm. They removed it themselves. This caused bleeding and staff quickly gained appropriate help and acted to address this. The person's relative wrote, "Sincere thanks, it is so reassuring to us as a family that Bluebird staff are so caring, responsive and efficient." Staff were supported to stay with people during an emergency to ensure people were supported appropriately.

There was a complaints procedure in place that was supplied to people in a format that met their needs. There had been no complaints received since our last inspection. The registered manager told us any issues raised would be investigated and the information would be used to improve the service or prevent a recurrence of the complaint.

Is the service well-led?

Our findings

The registered manager and provider placed a strong emphasis on continually striving to improve the service. The registered manager had written and delivered a training course for relatives of people living with dementia to increase their knowledge and understanding of this condition. A relative commented, "This was invaluable to us." The registered manager had undertaken further work to develop people's understanding of Parkinson's disease. We found the registered manager had won the Bluebird Care Award, Care Manager of the Year Award 2017, for their passionate development of the service by creating a strong business that placed people using the service first.

The provider and registered manager were dedicated and passionate about promoting the service and developing strong links in the community. The registered manager had been nominated for the Lincolnshire Care Awards 2017, Community Leadership Award. They were nominated because they had led a project to enable the service to put on community events. The registered manager had organised a free Christmas Dinner in 2017 for anyone using the service and people in the community. They asked for charitable donations from companies who contributed produce for the event and funding was provided from a local council. People using the service made handmade cards for people in the community who attended and the registered manager's relatives donated produce and a homemade Christmas cake for the event. A person who attended told us, "This made my year, it was such a wonderful event."

We found the provider, registered manager and staff were passionate and determined to raise funds and support causes that helped to make a difference to people's lives. For example, staff took part in a Cup Cake Day to raise funds for the Alzheimer's Society. They supported the St Aidan's Church Summer Fayre by making candles, giving donations and helping with fundraising. Staff undertook a sponsored swim for 'Lincolnshire Life' and they took part in MacMillan Cancer Research 'Big Coffee Morning' to raise money for charity. The registered manager and staff undertook sponsored walks. One was held to raise money for the Stroke Society when a member of staff's relation had become unwell. These events were celebrated on an 'events and charity' wall displayed at the office.

This service robustly promoted the vision and values of providing person-centred holistic care for people who were placed at the heart of the service. This family run service was created to make a difference to people receiving home care as the directors had experienced poor care themselves from this type of service. They wanted to create a service to make a real difference for others. The provider and registered manager motivated staff to provide exceptional care and support to people. A member of staff told us how they promoted excellence. They said, "The little things we know that people like are not taken for granted. If people like a sausage from a certain butcher we go out of our way to get this for them. We listen to people and do this for them." Another member of staff told us they suggested valuing people using the service by giving birthday presents to their customers. This was put in place. A person gave feedback about this and commented, "[Name] loves every one of their customers, they are selfless and kind hearted and a credit to the service."

Staff we spoke with told us the registered manager provided outstanding leadership that motivated them.

Staff described the registered manager as inspirational and said this benefited the people using the service. One member of staff told us, "The registered manager is really brilliant. They are very passionate about the service. They make sure standards of care and support are maintained at the highest level." Another member of staff said, "I love working here. It is a family run business and the service is proactive. We have the very best interests of people at heart. The management team support staff extremely well. The registered manager is knowledgeable and their communication skills are extremely good. I truly admire them and look up to them because they always fight the corner of people using the service, their family and staff."

The provider and registered manager supported staff to develop their skills and ideas about how to promote excellence for people using the service. We found many staff had been recognised for awards. One member of staff had developed their fund-raising skills to support older and disabled people. They had been nominated for and had won the Team Member of the Year category at the Bluebird Care Award in 2017. Another member of staff was nominated for Team Member of the Year at these Awards for having the wellbeing of people using the service at heart. They had taken people out for Christmas lunch, created a library facility at the service and delivered books to people, played a big part in activity days by cooking food and calling bingo. People using the service told us this member of staff was 'amazing.'

The service found innovative ways to promote person-centred care. The provider had nurses at the service to develop holistic care and train staff to be highly skilled in delivering care. A nurse at the service was nominated for an award for making a huge difference to the quality of care provided to people through producing a medication database, developing pressure ulcer monitoring and a new peg feeding policy. Another person had benefitted from continence aids to improve their quality of life. A member of staff had become a 'Cancer Champion.' They had started to work with local health care professionals to inform people about the signs and symptom of cancer and the care people required when living with different types of cancer.

The service worked in partnership with other organisations to provide high quality care. A care professional we spoke with praised the service. They told us, "I have to say this company have supported me with some individuals with complex needs and made all the difference to the people they support. I am very impressed with how professional and contactable this company is." The provider was working with North East Lincolnshire Council and the Clinical Commissioning Group to develop and implement integrated care for people and aid their discharge from hospitals.

People using the service told us the service was well-led. They commented, "Staff are wonderful ambassadors for Bluebird. "I ring the office and staff always do their best to help" "I am always ringing to change things, they are very, very good" and "The service is provided to a very high standard." Relatives told us, "The care provided by the company is excellent. It's the attitude of the company and carers, this puts my relative at ease" and "I had them earlier in the year for myself, that's why I wanted them for my relative. They are great."

People benefited from a service where staff were happy and motivated in their work. Every staff member we spoke with told us they loved working for the service and said Bluebird Care North East Lincolnshire and West Lindsey was the best service they had ever worked for because they felt so well supported and valued. Comments we received included, "I love my job", "The service is very well-run" , "I feel so proud to work for Bluebird Care" and "The directors chat with us we are all part of the team. The management team look after me as a carer." There was a clear management structure. Staff had clear roles and responsibilities and worked well as a team. The registered manager was supported by the directors and everyone worked together to make the service successful.

There was a reward system in to celebrate the staff's outstanding achievements. There were Carer of the Month, Carer of the Quarter and Carer of the Year awards. People using the service supplied feedback about the staff and nominations for the awards were based on staff attendance and performance. Staff were given a certificate money and gifts and a photograph of them with their award was displayed. The registered manager told us, "We want to say how much we appreciate the staff for their hard work and the fact they give their all to people using the service." The management team provided social events for staff to say thank you for the care and support they provided to people and each other.

Staff meetings were held. Minutes of the meeting were provided for staff who were unable to attend. This helped to keep them informed. Staff surveys undertaken allowed staff to raise their views and make suggestions about how the service may be improved. Staff told us their ideas were welcomed by the management team.

The provider promoted Carers Week by contacting people's family to offer a small amount of care for free. For example, a relative stated it would be nice for her parents to be taken out for a coffee, staff organised a trip to a café in Waltham. Other people were given an hour's free care, or taxis were paid for by the service for people to be able to go out with a carer shopping.

There was a comprehensive quality assurance process in place which focused on continually improving the service. Audits of each aspect of the service were undertaken. This included areas such as, care and medicines records and staff training. Senior staff conducted 'spot check' visits to observe the care provided to people by staff. Any issues found were acted upon to maintain or improve the quality of service provided. There was an on-call system in place. People using the service, their relatives and staff could gain help and advice at any time.

People were sent surveys to gain their views. Responses were collated and analysed to identify themes for improvement. In addition, people told us senior staff contacted them or visited them to check they were happy with the service. A person told us, "Yes, senior staff do ask every so often, if there is anything they can improve on."

The registered manager produced regular reports for the directors detailing key performance indicators for the service. These included areas such as, reviews of accidents and incidents, information about safeguarding referrals, staff training, recruitment, complaints. Action plans were completed to help improve the service. We found there was an open and transparent culture within the service.