

Brico Ltd

# Bluebird Care (Guildford)

## Inspection report

Lion House  
147 Oriental Road  
Woking  
Surrey  
GU22 8AP

Tel: 01483761000

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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 (Guildford) is a domiciliary care agency which provides support to people in their own homes. It operates in Woking, Guildford and Waverley. The service provides care and support to people with a variety of needs including dementia, mental health and physical disability. The service also provides live-in care 24 hours a day, seven days a week, respite care and ad hoc support to people.

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

Bluebird provided training to families and the local business community to help them to understand how to support people well. This helped families to be confident to support people at home between care worker visits.

People were supported to access healthcare services, staff recognised changes in people's health, and sought professional advice appropriately.

The service had developed strong links with the community. They took short notice packages of care and worked closely with the local authority on the winter pressures discharge project, supporting people to leave hospital and return to their homes.

People reported the service to be flexible and that it enabled families to have a break. There were many examples of where people had been supported to become more independent following timely skilled intervention by the service.

Some people had been identified as being at risk due to their health or living situation. Missed time sensitive medicines, uneaten food, decreased mobility and increased falls were all effectively noticed, reported and action was taken. Timely interventions by Bluebird helped people remain well at home for as long as possible.

Food and drink intake was recorded and effectively shared with healthcare professionals when there were concern. This helped staff to access appropriate timely support when needed.

Bluebird made financial awards to community groups that supported older people in the local area to help combat loneliness.

The service aimed to support people to live full lives and maintain contact with the local community.

Random acts of kindness were provided by staff to help people have an increased feeling of well-being.

There was a positive culture in the service and management and staff were committed to ensuring people received the best service possible. Staff told us they were well supported and had a good working relationship with each other and the management team.

The service was regularly audited and monitored to ensure the service provided was effective and met people's needs.

Many compliments had been received by the service. For example, "Have recommended Bluebird to many people," "Can't fault anything with the service," "I find them responsive to my needs" and "Very impressed with Bluebird."

People using the service all told us they felt safe and staff treated them in a kind, caring and respectful manner. People told us they received consistently effective care from the care staff. Comments included, "It is important to (Person) to be with someone they know," "We have similar interests so can discuss things,"

"You can't beat it. The best one (agency) I've been with. Very good, I can't fault the staff," "Staff are respectful, polite and sensitive. I am very happy."

People told us they were given a list each week detailing the times of their visits and the names of the staff rostered. Care workers were matched with people's interests and needs.

People told us if the staff or times altered they were mostly informed of these changes, staff always stayed for the full time of the visit and were competent in their roles. We were told staff often stayed over their allocated time to ensure all planned outcomes had been met.

Visits were not missed or very late. People were highly complementary of the service provided and of the registered manager. Comments included, "They (staff and management) are all wonderful, we are very pleased" and "We have nothing but praise for the care we get, no problems at all."

Care plans were in place for all people using the service. There was an electronic care planning system in place. Staff accessed this on mobile phones which were provided to them. The information generated by this system was accurate, timely and detailed. The provider monitored and reported on all aspects of the service provided to people.

There were enough staff employed to help ensure all planned visits were made. Staff were recruited safely. New staff were provided with a robust induction and shadowed experienced staff until they felt confident to work alone.

Bluebird provided exceptional support to staff which helped them feel valued. Staff had been offered permanent contracts and regular hours if they wished.

Rating at last inspection and update:

At the last inspection the service was rated as Good (report published 23 January 2017)

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

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. 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?

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 (Guildford)

## Detailed findings

### Background to this inspection

#### The 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.

#### Inspection team:

This 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 homes. This includes older people, people living with dementia and people who may have physical disabilities.

The service had a manager registered with the Care Quality Commission. The registered manager 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 three working days' notice of the inspection site visit to ensure someone would be available in the service office when we inspected.

The inspection started on the 6 September 2019 when we made calls to people who used the service. The location office site visit and visits to people's homes took place on 10 September 2019. Following the office visit we made further calls to staff and people who used the service. The inspection ended on 16 September 2019.

#### What we did before the inspection:

We reviewed information we had received about the service since the last inspection. 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 reviewed the last inspection report, information we had received from people who used the service and other agencies. We used all this

information to plan our inspection.

During the inspection:

We spoke with nine people who used the service and seven relatives. We spoke with the provider, the registered manager the customer support worker, four staff members and the training manager. We visited two people's homes. We met with three people who used the service. We reviewed the care records and medication records for six people who used the service. We reviewed records of accidents, incidents, compliments and complaints, staff recruitment, training and support as well as audits and quality assurance reports.

Following the inspection:

We continued to receive further information from the service. The staff supervision, appraisal and training records were sent to us the day after the inspection. We sought further clarification from the provider regarding the support provided to the registered manager. We spoke to a further three people and one relative.

# 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 good. This meant people were safe and protected from avoidable harm

Systems and processes to safeguard people from the risk of abuse.

- People told us they felt safe receiving care and support from staff.
- People were protected from potential abuse and avoidable harm by staff who had regular safeguarding training and knew about the different types of abuse.
- The provider had effective safeguarding systems in place and all staff had a good understanding of what to do to help ensure people were protected from the risk of harm or abuse. The service had raised appropriate safeguarding concerns with the local authority and CQC.

Using medicines safely

- Medicine care plans were in place to inform staff when people needed support with their medicines.
- Any medicine doses which were time sensitive had been added to the electronic care system as a specific task. This meant the time of the medicine dose could be specifically audited to ensure the planned outcome was always met.
- Medicine administration records (MARs) recorded when staff had supported people to take their medicine. There were regular audits carried out of MARs and where any errors had been identified action was taken to help ensure the issue did not re-occur.
- Staff were trained in medicines management and had regular competency checks to ensure ongoing safe practice.

Assessing risk, safety monitoring and management.

- Assessments were carried out to identify any risks to the person using the service and to the staff supporting them. There was a positive approach to risk taking to enable people to regain and maintain their independence. Any identified risks were well managed.
- The on-call staff took any phone calls and queries out of hours when the office was closed. People were given information packs containing details of their agreed care and telephone numbers for the service, so they could ring at any time should they have a query. People told us phones were always answered, inside and outside of office hours.
- Some people required staff to manage their money on their behalf. There were clear accounts and receipts held which were regularly audited by the management.
- There was an emergency plan in place. All the people using the service were recorded on a traffic light system. In the event of severe weather affecting staff travel it was clear which people needed to be visited and who did not. Red indicated that the person must be visited by care staff and green indicated family or friends could support them in the event of care staff not being able to visit.
- Comments included, "Marvellous, no faults, they come twice a day" and "(Person) has an alarm around

their neck, they have not used it, the phone is always next to them, in an emergency they can call."

#### Preventing and controlling infection

- People told us staff always left things tidy and clean and they had no concerns about infection control practices.
- Staff had access to aprons and gloves to use when supporting people with personal care. Staff were seen wearing person protective equipment (PPE) appropriately during visits. Staff had completed infection control training and followed good infection control practices.

#### Learning lessons when things go wrong

- Accidents and incidents were recorded and analysed so any trends or patterns could be highlighted. Any event which had taken place was used to review risks, processes and procedures to help ensure the issue would not re-occur.
- Issues raised by people or their families had been listened to and addressed. The registered manager was able to evidence how any concern raised was immediately investigated and resolved in a timely manner. Staff meetings were used to share events and reflect upon them.

#### Staffing and recruitment

- There were enough staff to provide all the planned visits to people's homes. There were no staff vacancies at the time of this inspection. Staff had been offered permanent contracts with Bluebird. Some staff had taken up this offer of contracted hours instead of the option to work as and when they wished.
- Staff had been recruited safely. All pre-employment checks had been carried out before staff started work, such as criminal record checks and references. A robust induction programme was in place and new staff shadowed experienced staff until they were confident to work alone. The provider had access to the national Bluebird pool of live-in care staff to help meet people's needs. This meant staff could be easily accessed to provide live in care when needed.
- Staff confirmed their rotas included realistic amounts of travel time, which helped ensure they arrived for visits at the booked times. Any amendments required to the roster, due to sickness or unavoidable delays, were sent to the staff via their mobile phones as an alert.
- The electronic care management system allowed call visits to be clearly monitored by the office in real time. This helped ensure people received their visits at the preferred and agreed time.



# 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 good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- People told us, "You feel you can trust them," "Staff are excellent," "After a period of time the carer becomes a friend as they are so caring, you look forward to their company."
- People received effective care and treatment from competent, knowledgeable and skilled staff. Staff were provided with any specific training and skills needed by the people they supported, such as stoma care or catheter care. Specific training on the electronic care management system was also provided for staff. The service provided the phones which enabled staff to access policies and procedures and best practice guidance. Bluebird charged staff a small charge for their unlimited personal use, including 1G of data. This data use ensured staff could access all the information available on the care management system such as care plans, rosters etc.,
- Staff felt very well supported and had regular supervision and appraisal to discuss their further development and any training needs. The service had large offices to accommodate face to face training such as moving and handling, practical skills practice and meetings. Staff meetings were held regularly. Staff felt confident in their roles and were able to access information and support when needed. A regular newsletter was created by the registered manager containing recognition of staff achievements, practical information about the spelling of some medicines and their use, local community support initiatives, training opportunities and other useful information. The staff found this newsletter very informative and it helped them to gain important knowledge.
- There was a system in place to monitor training to help ensure this was regularly refreshed so staff were kept up to date with best practice. Regular spot checks were also carried out by management to check staff competency and practices. People told us, "They (management) train them well and support new staff," "They (staff) are very experienced" and "I could not be more satisfied with the service. I would recommend them to anyone. Very happy indeed."

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

- The electronic care management system held specific outcomes for each person which staff needed to complete at each visit. When it had been identified that a person needed their food and drink intake monitoring staff were prompted, by the system, to enter what food and drink the person had enjoyed. The system then converted this information in to an easy to read chart showing the nutritional intake of the person at each meal. This information could be shared, as appropriate, with healthcare professionals directly from the system on email. This helped ensure any required advice and guidance could be sought in a timely effective manner.
- The system also prompted staff to record what the person had drunk between their visits, what was taken during the visit and what was left out for them to have after the carer had left. This led to an accurate record

of what people were drinking over a 24-hour period. One person, who had declined to eat food provided at meal times and lost weight. Advice was sought from healthcare professionals and it was agreed additional support was required. The person accepted an increase in the time staff supported them to eat foods they enjoyed, had led to an increase in the person's weight.

- Staff had been provided with training on food hygiene safety. Staff carried out, or supported, some people with their shopping and meal preparation and people told us staff were competent in preparing food. People and their relatives said, "Superb, lovely ladies. I walk to Sainsbury's with my little trolley. I am also driven to the club. They (staff) do what I want, cleaning, washing up, hoovering and doing the lunch," "They cook the food, wash and clean up," "They (staff) are really very good, they even take food out from the fridge that has expired" and "They provide companionship and a cuppa."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed before, or as soon as possible after, they started using the service to help ensure their needs and expectations could be met. Information in pre-assessments was used to develop care plans.

- Care plans were held on an electronic system which provided staff with clear, up to date and effective guidance and direction. People confirmed that care was provided as planned.

- The service took short notice packages of care and stepped in to support people in the community in an emergency such as carer failure. This is when informal carers, often family member, became ill or unavailable.

- The service provided ad hoc and respite care for people when needed. Families were very pleased with the support and care they received. One told us, "They (staff) are very flexible, I am very pleased," "I have been able to have a break," and "They (staff) take (Person's name) out, that is respite for me. That keeps me ticking over."

- People told us they received consistently effective care from care staff who had been matched to meet their needs. People spoke of their enjoyment of the company of 'charming' staff who shared similar interests to their own. This was very important to people who told us they developed confidence in their staff. Comments included, "It is important to (Person) to be with someone they know," "We have similar interests so can have discuss things," "You can't beat it. The best one (agency) I've been with. Very good, I can't fault the staff," "Staff are respectful, polite and sensitive. I am very happy."

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

- Bluebird was very committed to helping support family carers and the local community to understand the best practice in the care of older people and those living with dementia. They provided training sessions, to help give families insight and knowledge on how to care and support for their loved ones in a safe manner at home. Training sessions were provided on nutrition, Parkinson's disease awareness and moving and positioning. The provider felt this enhanced the relationship between the care staff team and the families.

- The electronic care management system meant there was only specific information held on paper in people's homes. To help ensure families and the emergency service could access information relating to the care needs of the person, sections of the electronic care plans could be accessed (time limited) by scanning a mobile phone over the QR code provided at their home. This provided access to a shortened version of the care plan, providing key information that may be helpful, to healthcare providers. The ambulance service were able to access key information, in a timely manner, which could then be shared with others as needed to help ensure they received appropriate care. Families were able to access the daily care visit records in the same way. Relatives told us this helped them stay in touch with how their family member was being cared for.

- Staff supported people to attend health appointments and liaised with health services to ensure any

requirements to enable people to attend their appointments were met. The staff had taken time to resolve a challenge faced by one person when attending an outpatient appointment. The ambulance service would arrive to transport the person, but the stretcher would not fit through the door and the appointment had been repeatedly missed. Bluebird staff arranged for a special wheelchair to be provided to enable the person to be transported to attend the appointment.

- The service worked with other agencies to help ensure people's needs were met. The service worked closely with the local healthcare staff such as occupational therapists and GP's. Staff recognised changes in people's health and sought professional advice appropriately. One relative told us, "The staff are amazingly observant and always let me know if anything has changed."
- One person, who used the service, moved to live in a care home. The staff spent time creating a memory book with them about their life at home, to take with them to the care home. This helped share vital information about the person with the care home.

### 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 with appropriate legal authority.

- Capacity assessments were completed to assess if people were able to make specific decisions independently.
- Staff and management had received specific training which had led to them understanding the requirements of the Mental Capacity Act 2005.
- The service worked closely with healthcare professionals to support one person who was not managing well at home with their partner. A lack of capacity to recognise their care and support needs were recognised by the service and additional support was provided. This led to improved outcomes for both the person and their partner.
- Most people using the service were able to make decisions for themselves. However, there were records that showed which people, had appointed Lasting Powers of Attorney (LPA's). This was clearly recorded in people's care plans. Only people with the appropriate legal power had signed consent forms on behalf of relatives. Such consents were obtained using electronic signatures on the care management system. Printed paper versions of the care plan were provided for people and their families in their homes as needed.
- People told us staff always asked for their consent before commencing any care tasks.

# 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 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 were positive about the caring approach of the staff. People's preferred routines were recorded in care plans. This meant staff were able to deliver care in line with people's wishes.
- Staff treated people with kindness and compassion. One person was very anxious and had care staff with her 24 hours a day, seven days a week. The live-in care worker was relieved for two hours daily by another care worker who was very well known to the person. This helped ensure the person would remain calm and confident with staff they knew.
- Where possible staff had background information about people's personal history. This meant they could gain an understanding of people and engage in meaningful conversations with them.
- Families were positive about the care and support received. They told us staff were kind and considerate.
- Staff had been provided with training to help ensure people's rights were protected by the service.

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

- People were involved in day to day decisions and had control over their care package.
- People told us they felt able to speak with staff about anything they wished to discuss. Relatives felt able to raise any issues with the registered manager or staff.
- Where people had difficulty communicating their needs and choices, care plans described their individual ways of communicating. Staff demonstrated a good knowledge of people's communication needs and how to support them to be involved in their care and support.
- Some care plans indicated that people had been involved in their own care plan reviews.
- Quality assurance surveys were provided to people and their families. The responses to the last survey were very positive and had been audited and responded to. There was a new survey that had recently been sent out to people and families, the responses to this were being collated at this time.

Respecting and promoting people's privacy, dignity and independence

- Personal information was kept securely in the registered office. Information for care staff was shared in a secure manner via mobile phone alerts.
- People told us staff stayed for as long as necessary and they never felt rushed. One commented, "They often stay over their time if it is needed."
- Staff were respectful when delivering personal care and ensured people's dignity was maintained. Staff did not feel rushed. One member of staff told us, "This does not feel like a job, I love it, I really enjoy it and we

are well looked after by the office."

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people's needs were met through good organisation and delivery.

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

- Bluebird worked hard to help address loneliness for older people living alone at home. They invited people to the service offices, which had large accessible rooms, for a variety of opportunities to socialise. Cup cake day, pancake day and 100th birthday celebrations were held. Transport and all refreshments were provided free of charge to people who were assisted to access provided transport to attend.
- The provider asked the staff to record their experiences on #magicmoments and #everyvisitcounts so that they could be shared, reflected upon and implemented across the service to further improve it.
- The service had a strong person-centred culture. Relatives of people supported by the service told us staff were very focused on helping their relatives to increase their wellbeing. The provider encouraged staff to identify people to receive random acts of kindness. For example, supporting a person to go out to have a full English cooked breakfast in a café. Something the person had not been able to do for many years. People's birthdays were also celebrated by the service.
- Bluebird aimed to support people to live full lives. The service worked with its sister service to support 20 people who used the service, in Guildford and Bournemouth, to visit the beach in Bournemouth for the day, including three people who used wheelchairs. An adapted vehicle was hired for the day. Fish and chips were enjoyed on the beach by all. People were supported to achieve their own goals. For example, a person, who used to knit a great deal, wanted to try to knit again, and another person wanted to return to play the piano. Staff provided the necessary support to enable these people to achieve their goals.
- People were supported to maintain contact with the community. For example, a large hall was hired by Bluebird to host a Christmas party including a pantomime and local school children.

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

- The registered manager told us, "We provide care to thrive not just care to survive. There is a big difference in what we do against other providers, we go the extra mile and beyond. We provide a holistic approach to support people and their families. The training we offer families helps them to understand what our carers roles are and where they begin and end."
- Staff had built positive, caring relationships with people and their families and had an in depth knowledge of their needs. Staff noticed changes in people's needs and reported them effectively. One person was taking time sensitive medicine which were found not taken, their mobility then deteriorated as a result, this was effectively reported and addressed. One person repeatedly fell when alone at home. Their family called upon the service to step in at short notice to increase support to aid their recovery, as the family worked all day. This evolved in to live-in support provided by Bluebird, which enabled the person to remain living in their own home,

- Bluebird worked closely with the local authority on the winter pressures discharge project and re-enabling people after illness. The service worked with the Royal Surrey Hospital to improve the sharing of accurate and timely information to improve the process of supporting people from hospital beds back to their own homes. One person living with dementia, was supported to return home. Their family were concerned they would not manage. They have improved since being home, the package of care has been reduced and they are thriving. Another person, who was independent before going in to hospital was supported home with three visits a day. These have now reduced to three visits a week as they have become more independent.
- The care plans were reviewed regularly to help ensure they were an accurate reflection of people's needs. People had information in their homes which showed when their visit would be carried out and what would be provided for them. People told us they knew about this information and had been involved in the development of the care plan.
- Some people needed support to help them to move around. Their care plans detailed the equipment required and how staff should support them. Equipment to enable staff to support people in their own homes had been provided. One care plan, for a person who had poor sight, had clear guidance for staff about not moving any furniture or items without the person's knowledge.
- Care plans contained information about the support people might need to access and understand written information. For example, whether they required hearing aids or spectacles. This demonstrated the service was identifying, recording, highlighting and sharing information about people's information and communication needs in line with legislation laid down in the Accessible Information Standard. All communications from the service to one person were sent to their computer which then 'spoke' the information to them at the other end. This helped ensure information was provided to the person in the way they could access it easily.

#### Improving care quality in response to complaints or concerns

- Many compliments had been received by the service. For example, ""Have recommended Bluebird to many people," "Can't fault anything with the service," "I find them responsive to my needs" and "Very impressed with Bluebird."
- The service held an appropriate complaints policy and procedure. This was accessible to people using the service
- We were told there were no formal complaints in process. Where any issues had been raised by people or families they were addressed effectively and resolved.

#### End of life care and support

- A career pathway was provided by Bluebird to support care staff to progress up through the business. There was an opportunity for staff to become a specialist in a specific area of care such as dementia etc., One care worker has become a specialist in palliative care and lead the care team in offering support and advice to people and their families. This meant people were enabled to stay at home at the end of their lives.
- The service received positive feedback from local hospices and district nursing teams on their end of life care and support.
- No one was receiving end of life care at the time of this inspection.
- Face to face training was provided to staff and the service worked closely with the local hospices to help ensure staff had the necessary skills and knowledge to meet people's needs at this time.
- Staff encouraged people to think about and discuss what they would like to happen at this stage of their lives. Not everyone was ready or willing to take part in these conversations. This was respected and periodically re-visited with people in a sensitive manner.

# Is the service well-led?

## Our findings

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

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

- The provider and registered manager were constantly reviewing and striving to further improve the service provided. There was an effective system of quality and monitoring processes to regularly review the service provided.
- Staff rotas were provided to the staff and the people using the service in advance. People confirmed they always knew who was visiting them at any time. Staff confirmed they could plan around their work commitments. The registered manager told us, "We try very hard to keep them close to home and with as few gaps in their day as possible. We use computer applications for travel maps to help us with this."
- Roles and responsibilities were clearly defined and understood. The registered manager was supported by the provider at regular meetings. The registered manager also met with other managers to share ideas and best practice. The registered manager had a supportive team of administrators, customer support and training staff.
- Staff were positive about the management of the service. They told us they were very happy and felt valued and well supported. Staff confirmed they were well supported.

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

- The provider's systems were designed to help ensure people received person-centred care which met their needs and reflected their preferences. The provider was keen to change the perception of community care provision by ensuring the Bluebird service was recognised for quality in care. The registered manager told us, "We strive to remove task orientation. We are trying to raise the profile of the role of carer, it is not just a 'job'. We provide staff with career prospects and encourage them to be as professional as they can be."
- There was an on-call system in place so people were able to contact someone from the organisation at any time. Senior care staff confirmed they always answered their phone calls from colleagues even if they were off duty. They told us, "Sometimes staff just need a bit of moral support, especially when visiting a new person for the first time. They can be anxious, anything we can do to help them is worth it."
- There was a robust electronic system in place to enable office staff to check visits had taken place as planned. The service had plans to take the use of technology further working to develop more effective ways of using Telehealth to support people to remain well for longer at home.
- The provider had notified CQC of any incidents in line with the regulations. Ratings from the previous inspection were displayed in the office of the service.



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

- People and staff were highly complementary about the staff and the service provided. Comments included, "(Person's name) hit it off with the carers straight away", "They (staff) are all really good, kind, caring and very good company, I enjoy them a great deal" and "We sit and have a cup of tea and a chat every day."
- Bluebird provided exceptional support to staff which helped them feel valued. One staff member had accepted a permanent contract. They told us, "It gives me the security I need with my child. I am not always worrying about having enough hours of work and my pay is consistent." The provider owned six pool cars which were provided for staff to use should their own car not be available. The Angel bonus offered a payment to staff who did additional work over their regular hours. An incremental annual bonus was also paid to all staff for every year they worked with the company. One staff member told us, "I have recently received a lovely payment for working for years for them." Enhanced hourly rates of pay were also given to staff who worked weekends and bank holidays. A funded healthcare scheme was provided for all staff which paid an annual amount towards any optician, dental or healthcare treatment costs. The provider provided uniforms, including winter top coats, to staff. This helped ensure staff always looked professional and instantly recognisable when out in the community. One staff member told us, "I am proud to work here."
- There were formal systems in place for gathering the views of people and their relatives where appropriate. The responses seen were positive.
- Staff told us they had regular staff meetings which were an opportunity to meet up, discuss individual care packages and raise ideas and suggestions for developing the service. Informal support was provided on a daily basis on the phone and when staff called in to the office
- The registered manager worked in line with principles underpinning equality and diversity legislation.

Continuous learning and improving care

- The registered manager attended various forums to help ensure they were up to date with any changes in the sector. For example, attending the Skills for Care network.
- There was a robust audit process in place. For example, two or three care plans were randomly selected each week to check for use of language, medicine administration records, ensuring all outcomes were met, the time of the visit and the length of the visits. This information was easily accessed via the electronic care management system.
- Regular compliance audits are carried out to ensure the service is meeting the requirements of the regulations.

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.
- Bluebird worked with local community businesses to support them to become more dementia friendly. Local businesses attended training, provided by Bluebird at their offices, on how to become a dementia friendly business. This was taken up by a local firm of solicitors and accountants who had many clients who were living with dementia. The local Dementia Action group were also invited to hold their regular meetings in the Bluebird offices
- Records showed the service communicated regularly with other professionals across health and social care.
- The service supported many community groups and businesses in improving dementia awareness.
- Bluebird made financial awards to community groups that supported older people in the local area to help combat loneliness. A sitting service that provided a subsidised respite service to informal carers was recently awarded a large sum of money, by Bluebird, to support their work.

