

Gregor & Gent Limited

Bluebird Care (Norwich & North Norfolk)

Inspection report

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13 October 2023
26 October 2023

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Bluebird Care (Norwich & North Norfolk) is a domiciliary care service providing personal care to people living in their own homes. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided. At the time of our inspection there were 47 people receiving the regulated activity of personal care.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

Right Support: Model of Care and setting that maximises people's choice, control and independence

People, relatives, and staff were asked their opinion about the service and were listened to. There was effective communication. There were enough staff and people did not experience late or missed calls. 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.

Right Care: Care is person-centred and promotes people's dignity, privacy and human rights

People were supported to stay safe. Safeguarding concerns were identified and reported as required. Medicines were managed safely. Staff wore personal protective equipment and displayed good hygiene practices.

Right Culture: The ethos, values, attitudes and behaviours of leaders and care staff ensure people using services lead confident, inclusive and empowered lives.

There was a positive culture. Staff felt well supported and enjoyed working for the service. There were effective governance systems in place. These helped identify any issues and actions were taken to develop and improve the service.

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

Rating at last inspection

The last rating for this service was good (published 7 December 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

This was an 'inspection using remote technology'. This means we did not visit the office location and instead used technology such as electronic file sharing to gather information, and video and phone calls to engage with people using the service as part of this performance review and assessment.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Bluebird Care (Norwich & North Norfolk)

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

Inspection team

The inspection was carried out by 1 inspectors and 2 Experts 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 houses and flats.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave a period of notice for the inspection. This was because it was a large service and consent from people and relatives for us to speak with them needed to be sought.

Inspection activity started on 13 October 2023 and ended on 26 October 2023.

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 who work with the service. We reviewed the Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

This performance review and assessment was carried out without a visit to the location's office. We used technology such as video calls to enable us to engage with people using the service and staff, and electronic file sharing to enable us to review documentation. Inspection activity began on 13 October 2023 and ended on 26 October 2023. During the inspection we spoke with 7 people who used the service and 13 relatives of people using the service. We spoke with 4 staff, this included the registered manager, and 3 care staff. We received written feedback to specific questions from 8 care staff. We reviewed 4 care plans and 5 medicine records. We analysed data from call records and a variety of records relating to the management of the service were reviewed.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for 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

- Staff understood how to identify safeguarding concerns and how to report these. A staff member told us, "I always say if I think something is not right".
- The service's safeguarding records showed safeguarding concerns had been considered and actions taken in response.

Assessing risk, safety monitoring and management

- People were supported to stay safe and manage identified risks.
- People told us they felt safe using the service. One person said, "I've found them to be very professional, very good. They have taught me a thing or two. When [family member] was using a catheter they were knowledgeable and able to give me advice."
- Risks to people were assessed and considered. Written risk assessments contained good information for staff on how to manage identified risks.

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 MCA 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 Mental Capacity Act (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 found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Staffing and recruitment

- There were enough staff to support people using the service. People and relatives told us calls were on time, not missed, and they were supported by consistent staff.
- The service had systems in place to monitor late or missed calls. The records showed no missed or late calls occurred in 2023.
- Staff were recruited safely. Appropriate checks such as Disclosure and Barring Service (DBS) checks had been made. This provides information including details about convictions and cautions held on the Police

National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Medicines were managed safely. People and relatives told us they were happy with how their medicines were managed. One person told us, "I have complete confidence with (staff support of) prescription drugs. There's one that's time sensitive. I have to have it half an hour before any food or any other drugs. As soon as they come in they give it to me and then they do my breakfast and by that time I have done the half hour anyway."
- Staff had received training in medicines management. They received regular competency checks to ensure they were competent to administer medicines.

Preventing and controlling infection

- Infection control risks were assessed and considered. People and relatives told us staff wore personal protective equipment (PPE) as required and undertook good hygiene practices.

Learning lessons when things go wrong

- Systems were in place to report and monitor incidents. The records showed the registered manager reviewed incidents and ensure appropriate actions had been taken in response.

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 our last inspection we rated this key question good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- There was a positive open culture in the service. People, relatives, and staff told us there was effective open communication. A relative told us, "If I have a query about anything they are always quite helpful and friendly and easy to talk to."
- Staff told us there was a good morale in the service and they felt happy and valued. One staff member said, "Friendly, approachable, really nice [staff team]."
- Systems were in place to ensure people and staff were asked their opinions on the service and these were listened to. A relative told us, "[Family member] often gets a letter for how they feel about the service, whether they are satisfied, and I fill them in. [Family member] gives their honest opinion and they are happy".

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

- People, relatives, and staff told us they were happy with the quality of the service provided. A family member said, "I recommend Bluebird to people, really nice [staff], can be trusted, a really nice team. We had others and Bluebird are 150 times better."
- Staff told us they were well supported by the management team. A staff member told us, "[the managers] are fabulous. They are very supportive and informative. They have taught me a lot over the years and I am very grateful to have them as my superiors. I could walk into [registered manager's] office and ask for 5 minutes, no matter what she's doing she will stop and make time for me."
- Systems were in place to assess and monitor the quality and safety of the service provided.
- Where issues had been identified as part of audits on the service, we saw action had been taken to make improvements.
- The registered manager was aware of their legal responsibilities. There had been no incidents in relation to duty of candour. The registered manager understood the importance of being open and honest, they had notified us of incidents appropriately.

Working in partnership with others

- Staff worked in partnership with others, this included people's relatives or health professionals when

required.