

Protea Associates Ltd

Bluebird Care (Swindon)

Inspection report

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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?	Outstanding ☆
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

Bluebird Care (Swindon) is a domiciliary care service that provides personal care to people living in their own homes in Swindon and the surrounding areas. Not everyone using Bluebird Care receives regulated activity; CQC only inspects the service being received by people provided with personal care. Where they do we also take into account any wider social care provided. On the day of the inspection the service was supporting 43 people.

There was 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 in April 2016, the service was rated Good.

At this inspection we found the service remained Good overall.

The service improved and was exceptionally caring. The feedback received from people and their relatives reflected the staff were very compassionate, kind and established positive and meaningful caring relationships. People referred to staff as 'angels' and told us that staff were 'like friends'.

The caring nature of the service was promoted by the management who told us, "We stress that we're not an agency, we are a care company". The senior team led staff by example and this successfully contributed to creating an established and caring team.

Staff exceeded in recognising what was important to people and that even the little things made a huge difference to people. There was evidence the staff often went 'the extra mile' to meet people's needs and improve their lives. This caring approach was also visible within the team with the staff being very caring to one another and toward the local community.

Staff respecting people's privacy and dignity at all times. People were supported to be as independent as possible so they could continue to live their life in a way they wanted.

All people and relatives, without an exception said they would definitely recommend this service to family and friends.

People received safe care and treatment. People complimented the continuity of care provided by regular staff which contributed to building meaningful relationships. People continued to receive their medicines safely and as prescribed. Risks to people's individual conditions and well-being were assessed, recorded and updated when people's circumstances changed. There were sufficient staff to keep people safe.

People received support that met their needs and the service remained flexible to changing people's needs. People's rights to make their own decisions were respected. People remained well supported to maintain healthy diet and access health services if required.

The service remained well-led. The provider's quality assurance processes remained effective and there was a focus on improvement. People and staff were involved and listened to. The service worked well in partnership with other agencies, social and health professionals and external organisations.

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 remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Outstanding ☆

The service improved to Outstanding.

The feedback from people and relatives was excellent and reflected staff were very kind and compassionate.

Staff recognised what was important to people and how little things made a huge difference to people's well-being.

People's privacy, dignity and confidentiality was always respected.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

Bluebird Care (Swindon)

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 was 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 inspection took place on 13 December 2018 and was announced. We told the provider two days before our inspection that we would be coming. We did this because the registered manager is sometimes out of the office supporting staff or visiting people who use the service. We needed to be sure that someone would be in the office. The inspection team consisted of two inspectors.

Before the inspection we reviewed the information we held about the service and the service provider. The registered provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also looked at previous inspection reports and notifications received from the provider. A notification is information about important events which the provider is required to tell us about by law. This ensured we were addressing any areas of concern.

We contacted nine people and four relatives. We looked at three people's care records and medicine administration records (MAR). We spoke with the registered manager, the director, one care co-ordinator and four care staff. We reviewed a range of records relating to the management of the service. These included four staff files, incident reports, complaints and compliments. We also contacted four external professionals to obtain their feedback about the service.

Is the service safe?

Our findings

The service continued to be safe.

People told us they felt they were safe with staff. One person we spoke with told us, "I feel I can trust them". Staff had training in safeguarding matters and understood their responsibilities to report any safeguarding concerns. One member of staff said, "I'd report to the office". Staff also knew how to report externally outside of the organisation.

Where people were supported to take their medicines, the staff ensured people received these as prescribed. The provider used electronic Medicine Administration Records (MAR) and these were completed accurately. The electronic system ensured added safety as staff would not be able to log out of the person's visit if any of the task had not been marked as completed. People told us how staff supported them with taking their medicines. One person said, "They put my patch on, they remember and they sign, too".

Risks to people's individual well-being were assessed, recorded and managed well. Where people were identified as being at risk their care records clearly stated the level of support required to manage this. For example, one person was living with diabetes and their care plan clearly showed how staff were to remind the person to take their insulin and make sure they had their breakfast. People's risk assessments included people's environments to ensure any potential risks in and outside people's homes were identified.

There were sufficient staff to keep people safe and people were supported by consistent staff. The provider used electronic monitoring system that provides an information about staff real time logging in and out of people's visits. The system ensured additional safety as it would flag up if a person did not receive a visit or staff were significantly late. People complimented staffing and their reliability. One person told us, "It puts my mind at ease to know that they're coming". Another relative said, "Rotas (with information which staff are coming) are sent weekly". The provider followed safe recruitment processes, they ensured Disclosure and Barring Service checks (DBS) were completed and references obtained to ensure staff were suitable to work with people.

There was a system for recording accidents and the records showed appropriate action was taken when an accident or incident occurred. For example, one person informed a member of staff they lost track of time and took incorrect medicine and the staff contacted the person's doctor for an advice. The registered manager reflected on where things could have gone better and used the lesson learnt to improve the service. There was a business continuity plan that was updated every three months and covered various emergencies such as loss of staff or adverse weather conditions.

People were protected from risks around cross infection. Staff were trained in infection control and had access to gloves and other Personal Protective Equipment (PPE) available at the office. One relative told us, "PPE always worn".

Is the service effective?

Our findings

The service remained effective.

People's needs were assessed before they received support. The provider's own assessment was used as a base to write people's care plan. The assessments were carried out by senior members of staff. One person told us, "(Registered Manager) did my assessment, I was distressed and nervous, she reassured me from the start, she was absolutely wonderful".

People told us that they felt the staff were suitably qualified and experienced to perform their duties. Comments from people and relatives included, "Very, very good, lovely carers" and "Always willing to help".

New members of staff were supported to complete an induction programme and this included working alongside an experienced member of staff. There were regular supervision sessions and staff told us they felt well supported by the senior team. One member of staff told us, "Training is brilliant".

People were supported to access health professionals if needed. One person told us, "They ring doctor for me". Another person said, "They took me for a hospital appointment".

People's dietary needs were assessed and people's care records contained details on people's needs, including their preferred food. People we spoke with were mostly independent and required minimal support with preparation of meals.

People's rights to make their own decisions were respected. One person said, "They definitely respect my decisions, otherwise it would not work for me". One relative said, "Respectful to me and [person]".

People were supported in line with the principles of the Mental Capacity Act 2005 (MCA). The MCA provides a legal framework for making decisions on behalf of people who may lack the mental capacity to do so for themselves. Staff had received MCA training and understood how to support people in line with the MCA Code of Practice. Where people had relatives appointed as a Power of Attorney the provider had this information to ensure only lawful decision were made on behalf of people using the service.

Is the service caring?

Our findings

The service was exceptionally caring and had improved to Outstanding.

The management of the service aimed to create the service with a 'personal touch' and they established a strong culture that promoted a person-centred approach. The feedback received from people was overwhelmingly positive and demonstrated staff were very kind and compassionate. Comments included, "Extremely kind", "Nothing but kindness", "Absolutely angels" and "Caring and compassionate".

All people and relatives we spoke with without an exception told us they would recommend Bluebird to others. One person said, "All this positive feedback – it is not more than what they deserve. I am very happy with them".

The team run a 'Spread a Smile' campaign where staff excelled in creating opportunities to make people smile. Staff exceeded in recognising what was important to people and that even the little things made a huge difference to people. People told us staff went above and beyond their duties for them. One person said, "I think they go extra mile". Another person said, "If I had any craving (for food) they would get it for me". There was evidence when staff went above their duties and recognised what was important to people. Staff had the appreciation that even the little things made a huge difference to people's well-being. For example, one member of staff put a Christmas tree up for one person that would not be able to do so, another staff member organised for a person to have a shelf put up so their new flat 'looked more like home'. Other examples included: a member of staff organised for one person to have representatives from a charity visit them to sing carols, a member of staff washed one person's window so they could see the garden which meant a lot to them, a staff member bought a person a new jumper as the old one had a hole and the person's family was too unwell to visit, a staff member brought a spare net curtain from their home as the person's net was broken and they were concerned about the person's privacy and well-being.

The caring approach of the provider was additionally demonstrated how staff cared for one another. For example, one staff member helped a colleague to change the battery in their car which meant they were able to safely use their care and preventing them from having to cancel visits to people. The provider also ensured they showed their appreciation and consideration towards the local community and encourage staff to get involved with various charitable fundraising activities. The team were in a process of having a cake sale to fundraise towards 'Elf for Alzheimer's'. A member of staff told us how they offered one person to visit the office to get some cakes but as there was too chilly for the person to go out they took the cakes down to the person's home. They team were involved with various local community engagement to support charitable initiatives with the local radio where Bluebird team fundraised to pay for training for wannabe presenters.

There was a high emphasis to sustain a positive experience for people and staff alike. In their Provider Information Return (PIR) submitted to us before the inspection the provider said, 'we have adopted the approach that our care staff are the front-line of our business. We therefore spend time listening to them and treating them with respect and care. This manifests in the delivery of the care service we provide'. The

registered manager told us, "We stress that we're not an agency, we are a care company". They added staff were expected to sign up to the provider's mission statement that included for 'can do attitude' and 'more passion than competitors'.

The feedback from staff demonstrated the provider successfully created this extremely caring environment. Comments from staff showed they thought highly of the service and had a sense of pride working for the service. Feedback from staff included, "I really believe care provided by Bluebird is absolutely outstanding", "I have worked for care companies before starting with Bluebird nearly three years ago. I find Bluebird care to be far superior to the others in the way they treat their staff and clients" and "Feel very proud to be part of that group on the road". One relative told us, "A breath of fresh air. They are how a care provider should be".

People benefitted from meaningful and caring relationships they built with the staff. This was achieved as the provider saw staff selection process and ongoing training is a vital philosophy of the business. This was to ensure that the right staff were 'matched' with the people's needs. This was being monitored to ensure changes were made as per people's requirements. Feedback received confirmed this approach was successfully achieved and had a positive impact on people's lives. One person said, "(Staff) turned out to be like friends. You can't invite a stranger and feel comfortable. If I want to have a little moan they will always listen". Another person said, "When I am low I can have a little chat to them – always helps". One relative commented, "They are lovely, they are like friends".

People were treated with dignity and respect at all times. People's feedback confirmed staff excelled in their approach to make people comfortable and put at ease. One person told us about the impact it had on them. They said, "I had a different company before (did not go well) and affected me physically and mentally. I was sat in a chair sobbing my eyes out. I had then three companies and none even come close to Bluebird. Now care is amazing. Took me ages to have the confidence to accept personal care – never even once felt uncomfortable. All staff are amazing". The person then went on to tell us the details of personal care they're happy to accept now and how this positively impacted their well-being. They added, "My friend can't believe how much I changed".

People's needs including their diverse needs were respected. The provider had an equal opportunities policy and successfully implemented it in practice. For example, the provider employed one person who passed their retirement age and made reasonable adjustment so the person could fulfil their role well. People's individual needs, including their communication needs were assessed, recorded and met. One person told us, "I am blind and I can rely on them, they will let me know how long to have the microwave on". Another person said, "They read out things for me". We saw when required people received rotas and correspondence in large print.

People were supported to remain independent as much as possible. People were involved in decisions about their support. Feedback from people confirmed this as the comments included, "I do my own personal hygiene, this still makes me feel as I am an independent person" and "Definitely, I am in control (of my care)".

People's confidentiality was respected. People's records were kept secure and staff had own passwords when accessing electronic information. People told us staff were professional in their conduct. One person said, "They never discuss other people's issues (with me)". Another person said, "They never cross the boundaries of being professional but (are) very friendly".

Is the service responsive?

Our findings

People continued to receive a responsive support.

People's care records were held electronically which meant the management were able to ensure these were always up to date. This also allowed staff to have an instant access to the updated records via their electronic devices. The care plans contained information about people's health, likes, dislikes and the details of people's wishes and preferences.

People's care was reviewed regularly to ensure the level of support was meeting their needs. People's reviews took place after a week since the commencement of the service, then after a month, six months and on annual basis. This was to ensure people received support that met their needs.

The service responded well to people's changing circumstances. For example, when people needed to adjust their visit time. One person told us, "When you ring the office you always get a response". One relative said, "Very responsive, flexible if needed".

People told us they received support that met their needs. Comments from people included, "They ask, if there's anything I can do for you. Of course, I'd recommend them" and "The care I get meets my needs". One relative said, "We had no problems whatsoever".

People knew how to complain if needed and were confident that a prompt action would be taken. People and their relatives told us, "I feel I can raise anything, no faults, no complaints, always responsive to my concerns" and "I have no reason to complain".

The provider's complaints policy was available to people. We viewed the complaints log and saw six complaints were recorded since our last inspection visit. These were dealt with in line with the provider's policy. There were several compliments received by the team since our last inspection.

No people were supported with end of life care at the time of our inspection.

Is the service well-led?

Our findings

There was a registered manager in post. 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.

The registered manager was well supported by the director. There was a clear staffing structure in place and staff were aware of their roles and responsibilities. People praised the registered manager and how the service was run. Comments from people included, "I would recommend them to anyone" and "I would recommend them 100%".

The provider had a number of quality assurance systems, such monitoring of the electronic visits, regular reviews of people's care plans and spot checks. The service was also being audited by the representatives from the franchise head office and the records showed their last audit results improved in comparison to the last year's audit.

There was an emphasis on continuous development and further improvement. The provider had a clear plan on future developments around increasing people's safety and office expansion. The management had opportunities to attend regional meetings with the franchise as well as various national conferences. They worked with sister branches as appropriate, for example, before trialling the electronic care records system. The senior team demonstrated a very open, transparent approach and the registered manager told us, "We're not scared of audits".

The provider sought people's views through annual questionnaires surveys and they monitored any feedback received via external websites. Additionally, there was a quarterly newsletter sent to people. People also received letters to inform them about occurrences such as 'beast from the east' during the last winter which reminded people how to keep warm and safe during the adverse weather.

Staff were complimentary of the support they received from the management. Staff told us, "Very approachable, I know any issues raised will be followed up, I don't need to chase up" and "I love my job and feel very supported".

Staff were encouraged to attend team meetings and had a monthly staff newsletter which covered any important updates or reminders. There was an emphasis on staff training and all office staff used to work as carers. This not only reflected the provider's commitment to staff development but also helped with contingency planning if an additional care cover was required.

Services that provide health and social care to people are required to inform the Care Quality Commission (CQC), of important events that happen in the service. The registered manager was aware of their responsibilities and had systems in place to report appropriately to CQC about reportable events. The service worked in partnership with the local health and social care teams. We received positive feedback

from an external professional who said, "Care managers work collaboratively to the benefit of the patient and when I am with the patient and Bluebird carers the patient is always given time".