

Clarewood Care Ltd

Bluebird Care (Rushmoor & Surrey Heath)

Inspection report

24 St. Georges Court
St. Georges Road
Camberley
GU15 3QZ

Date of inspection visit:
19 November 2020

Date of publication:
14 January 2021

Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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Is the service well-led?	Inspected but not rated
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Summary of findings

Overall summary

About the service

Bluebird Care (Rushmoor & Surrey Heath) is a domiciliary care service which at the time of the inspection provided personal care to 42 people living in their own homes. The service supported people with a variety of needs including dementia, mental health and physical disability. The service also provided live-in care 24 hours a day, seven days a week, respite care and ad hoc support to people.

The registered manager and the management team cover two locations which are Bluebird Care (Guildford) and Bluebird Care (Rushmoor & Surrey Heath). This report is for Bluebird Care (Rushmoor & Surrey Heath) location and contains the feedback obtained from people being supported by this location. The nominated individual is in the process of registering with the CQC for both locations to operate from the same office. We inspected both locations as the concerns raised crossed-over both locations. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

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

Risks to people had been assessed well by the service based on people's individual needs. People's medicines were being managed safely and people were supported to manage their own medicines where possible. We found one medicines related incident had been investigated by the registered manager but not reported to the appropriate authorities. The registered manager actioned this immediately following the inspection.

People told us they felt safe during care visits and gave positive feedback about their care and support. However, there were some occasions when people received late or re-arranged calls and did not always receive the communication from the management team around this. Staff also supported this view and stated it could be frustrating when people had not been told about changes to their call times.

People told us on some occasions they had not always received a response from the office team if they had asked a question. The registered manager had identified this as an area for improvement, and they recruited additional office staff to review and develop the communication process with people where required.

The service was through a restructuring process and this involved a turnover of staff, both carers and management staff in the aim to set up a stable team.

Feedback had been sought from people and relatives prior to the Covid-19 pandemic. A new survey would have been due for completion but had been delayed due to these circumstances. The registered manager developed a new feedback survey to send out in November/December 2020.

People told us they were happy with the staff who attended for home visits or provided live-in care. People said they felt staff were well trained, kind, caring and understanding of their needs.

The registered manager was receptive of feedback and demonstrated a desire to ensure any improvements identified were actioned as part of the ongoing development of the service. Staff gave positive feedback about the registered manager and support and supervision they received.

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

Rating at last inspection

This service was registered with us on 16 January 2018 and this is the first inspection.

Why we inspected

We undertook a targeted inspection to follow up on concerns which had been raised around staffing, management of medicines and management oversight of the service. This report only covers findings in relation to the Safe and Well-Led domains.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the Safe and Well-Led sections of this full report.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

This is the first inspection for this newly registered service. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service well-led?

This is the first inspection for this newly registered service. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Bluebird Care (Rushmoor & Surrey Heath)

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

Bluebird Care (Rushmoor & Surrey Heath) is a domiciliary care agency. It provides personal care to people living in their own houses and flats. It provides a service to older people, people living with dementia and people who may have physical disabilities.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave 24 hours' notice of the inspection. This supported the provider and us to manage any potential risks associated with Covid-19. It was also to ensure the registered manager would be present to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We reviewed information shared with us by the provider and safeguarding concerns we had received from the service.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with one person who used the service about their experience of the care provided. We spoke to one relative. We spoke with six members of staff including the registered manager, office staff and care staff.

We reviewed a range of records. This included four people's care records. A variety of records relating to the management of the service, policies and procedures, incidents and accidents, quality audits and governance.

After the inspection

We continued to seek additional information from the registered manager with regards to additional supporting evidence. We also spoke to an additional two people who use the service, three staff members and two relatives via phone or email.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service.

We will assess all of the key questions at the next comprehensive inspection of the service.

The purpose of this inspection was to follow up on concerns that related to the management of medicines, risk and staffing.

Using medicines safely:

- During the inspection we identified a concern regarding a medicines error which had been investigated by the provider but not reported to the local authority or CQC. The registered manager was able to detail the investigation and based on our feedback immediately reported the incident to the appropriate authorities. No harm had been caused by the error, but due to the nature of the incident it was required for CQC to be informed. We also reviewed other incidents and accidents, and which were reported to the appropriate authorities in a timely manner.
- People and relatives told us they were happy with the support they received with their medicines. Most people we spoke to were able to manage their own medicines and found this to be a way to remain independent. Other people had support from family members who knew staff were there to help if needed.
- People's care plans included information about the support they required with their medicines. Staff encouraged people wherever possible to manage their own medicines. People had individual medicines risk assessments in place, and these were reviewed with the person and relatives where appropriate.
- The registered manager was acting to ensure the National Institute for Health and Care Excellence (NICE) guidance around medicines in the community were followed. The provider had plans in place to assess everyone's ability to manage their own medicines.

Staffing and recruitment

- People told us staff always turned up for visits but raised some concerns around staff being late for visits which they had not been informed about. One person told us, "They [staff] have always turned up. Never not turned up for a visit. They have been late a few times and I have not been told. It can be frustrating, and I just pick up the phone and call to have a moan. When they are here, they are very good." Another person told us, "Sometimes they are a little late, but they always spend the time they need to." The registered manager told us, "This is not an area we have excelled in but have been working hard to rectify this. All the office staff have been involved and in the past two weeks we haven't received any complaints regarding times, communication or consistency of staff."
- The provider was installing a new secure system to enable staff to log in and out of care calls. This new system is to enhance and better the existing electronic system (PASS) in place for monitoring care calls. Staff would be required to scan a quick response (QR) code which would be available within the person's home. The registered manager stated, "We aim to have these installed within the next week to two weeks. We will follow this up with carers and it will be mandatory for staff to use the QR codes."

- The provider had made changes to the recruitment and monitoring process for agency staff. Concerns had been identified prior to the inspection around how the provider ensured safe processes for deploying agency staff.. The registered manager told us about the new process where all agency staff go through a quality checking process which includes training checks, recruitment checks, and ongoing competency checks to ensure they are safe to be providing care and support to people.
- The provider had a safe recruitment process for permanent staff. Robust recruitment checks had been completed, including checks on staff's conduct in previous social care roles and Disclosure and Barring Service (DBS) checks. This ensured potential staff member were not known to the Police for previous convictions or cautions and were suitable to support the people using the service.
- Staff told us they felt supported with training and had been provided with all the information needed to support people safely. A staff member told us, "I had full training before I was sent on any calls and there has been lots of other training that has been offered to me also." A second staff member told us, "I have had lots of training. They have been really good in making sure I feel comfortable before I did visits on my own."

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe with staff in their home. A person told us, "I always feel safe. They have a good level of knowledge. They know all about my needs. I don't ever really have to tell them anything. Except if they are new and I may just point out bits that I prefer. They always listen and are happy to help."
- The provider had a safeguarding policy in place. The registered manager confirmed they were aware of their responsibilities to report any safeguarding concerns to the local authority and CQC. The service had been working more closely with the local authority safeguarding team who had provided support.
- People were protected from potential abuse and avoidable harm by staff who had regular safeguarding training and knew about the different types of abuse. A staff member told us, "I would feel confident to speak to my manager if I had any concerns regarding any issues and I believe they would listen."

Assessing risk, safety monitoring and management

- Risks to people were assessed and regularly reviewed, providing staff with appropriate guidance on how to manage and mitigate identified risks. One person who was at risk of falls had a detailed risk assessment which covered falls history, medicines risks, sight, hearing and mobility. It also contained detailed guidance for staff around supporting this person with their walking aid.
- People had individual assessments and support in place to manage their medicines. Where people wanted to be independent or be supported by their family, they could achieve this with the known risks appropriately assessed. A relative told us, "We as a family like to help dad with his medications, it's something we have asked to maintain for as long as possible. The staff are great at supporting us with this and if we ever have any questions then they are always happy to help out."
- The provider had ensured risk assessments relating to the environment had been fully considered. This identified any potential risks around conducting home visits to keep both people and staff safe. The provider had ensured these assessments were detailed and reviewed if any changes were required.

Is the service well-led?

Our findings

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

This is the first inspection for this newly registered service.

We will assess all of the key questions at the next comprehensive inspection of the service.

The purpose of this inspection was to follow up on concerns that related to the management and oversight of the service and engagement with people who use the service.

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

- The registered manager and the management team have oversight of both Bluebird Care Guildford and Bluebird Care Rushmoor & Surrey Heath. The nominated individual who oversees both locations is in the process of registering both locations to operate from the same office. This was primarily in response to the Covid-19 pandemic to reduce any cross-working. We covered both locations during this targeted inspection as the concerns raised crossed-over.
- The provider did not have an effective system in place to be able to monitor care visits times. This meant that the registered manager was not always able to robustly manage when calls had been late or spot any potential pattern or trends. This was being actioned with the introduction of the QR scanning process and the management team were now completing audits on monthly call data and care notes which started in November 2020. We will check on the progress of this at the next inspection.
- The registered manager recognised the pressures which had made the previous 12 months a challenge. The registered manager was accepting of feedback provided and indicated a desire to drive the service forward. The registered manager said, "We have been through a lot of changes in staff over the past year and when added with the pandemic it has been hard to reflect changes. Staff turnover in the office team has taken place and we have worked towards achieving where we want to be."
- The provider had quality assurance systems in place which were used to monitor key aspects of the service. The management team completed audits and checks on a regular basis and the registered manager was reviewing the auditing process in line with the changes the service was making to areas such as call times and feedback.
- The provider conducted spot checks completed by supervisors with staff to ensure knowledge and competence were monitored. Spot checks were completed on a rotation basis every three months covering medicines, observation of staff's practice, for example when supporting people with, moving and positioning. A staff member told us, "We receive spot checks. Which I think is very helpful. Gives me an opportunity to ask any questions and ask about my performance as a carer."

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

- People gave mixed feedback around how the service engaged with them. Some people said they didn't

always get a call back from the office team to questions they had asked or to provide an update on any changes to daily care visits. People said this did not have any big impact on them other than being frustrating. A person told us, "I can get through to the office and they answer quick enough. They don't always call me back when they say they will. It would be nice if they could call me back as I am waiting for them."

- Staff supported the view people had provided around improvement being needed with communication from the office team. Staff told us that it can be frustrating when people's call times are changed at short notice and the person has not been told. A staff member told us, "It's not always run well [office] especially passing information or ringing customers about call time changes. They [customers] often get a bit annoyed over this. So, it would be nice, if the office could take more time informing the customers."
- The registered manager talked to us about the improvements they were making to ensure people were responded to in a timely way. The provider recruited new staff within the management team including a new assistant care manager. This role includes a responsibility to ensure messages from people were captured, documented and responded to appropriately. The registered manager said, "We have recruited an assistant care manager and she has brought about a really good change in support and has changed how issues are addressed."
- The registered manager and the management team spoke to us about developing ways of communicating change. During the inspection we discussed different ways the management team could engage staff and be clear and consistent in the way structural changes are presented and updates provided to increase team morale.
- The provider had launched a fight loneliness campaign alongside their annual rolling social events for people. The registered manager organised a popular poetry competition with the theme, "What does care mean for you." Entries were received from people, relatives and various members of the public including children and the feedback provided for the competition was positive.
- Due to the recent Covid-19 pandemic and structure changes to the service more time will be needed to see if these changes can be maintained and embedded consistently across the service. We will continue to monitor the service going forwards.

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

- The provider had been making changes to the structure of the service which had caused some disruption amongst staff. Although some staff had said they had seen improvement around the communication relating to the structural changes. Some staff told us they didn't always feel consulted around the process and had feared for their jobs.
- The registered manager spoke to us about the changes within the service and stated it had been a difficult time for staff alongside the pandemic. The registered manager told us, "We are speaking to staff about what they would like to see going forwards. We are looking to support mental wellbeing of staff and ensuring they have access to management team and any out of hours support."
- People gave positive feedback about the staff who supported them. One person told us, "The carers are very nice and caring when they are here. I enjoy spending my time with them and they are all very kind to me. Another person told us, "They [carers] are very good. Very nice and friendly. I can only say good things about them."
- Staff did give positive feedback about the support provided by the registered manager during supervisions or when responding to individual support needs. A staff member told us, "You get to chat one on one. Spot checks are useful for me as it's nice to know how you are working." Another staff member told us, "I have always felt comfortable and confident to call the office for support and help and any questions I may have for office team or manager and I am happy with my role."