

Bluewood Recruitment Ltd

Bluewood Healthcare

Inspection report

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31 March 2021
07 April 2021

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30 April 2021

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

Bluewood Healthcare is a domiciliary care service. The service provides care and support to people living in their own homes. At the time of the inspection there were 137 people using the service.

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.

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

People told us they felt safe using the service. Staffing was usually consistent and on time.

Risk assessments were in place that were detailed and updated as required. Staff followed assessments to keep people safe.

Staff were recruited safely, and appropriate pre employment checks were carried out.

Staff wore personal protective equipment whilst providing care to people and followed infection prevention control guidelines.

Incidents were recorded, reported, and reviewed appropriately.

People using the service could contact management as they needed. People felt listened to and able to feedback formally and informally.

The management understood their roles and responsibilities and reported all necessary information to CQC as required.

Quality monitoring systems were in place which ensured any errors could be found and acted upon.

The service worked in partnership with other agencies to ensure care quality remained high.

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 9 October 2019)

Why we inspected

We received concerns in relation to staff timings and quality of care being carried out. As a result, we undertook a focused inspection to review the key questions of Safe and Well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Bluewood Healthcare on our website at www.cqc.org.uk.

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?

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.

Bluewood Healthcare

Detailed findings

Background to this 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 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

The service is a domiciliary care agency. It provides personal care to people living in their own homes.

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

This inspection was announced.

We gave the service notice of the inspection and provided an explanation as to the inspection process. We asked the provider to submit information to the CQC to minimise the time spent on site in response to the pandemic.

Inspection activity started on 31 March 2021 and ended on 07 April 2021. We visited the office location on 31 March 2021.

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 commission the service for some people who use the service. We used all this information to plan our inspection.

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. We used all this information to plan our inspection.

During the inspection

We spoke with twelve people who used the service and eight family members about their experience of the care provided. We spoke with the registered manager, and eight care staff.

We reviewed a range of records. This included six peoples care records. We looked at six staff files in relation to recruitment. A variety of records relating to the management of the service, including quality monitoring, minutes of meetings, policies and procedures, and medicine administration records (MAR).

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 the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe when receiving support from staff. One person told us "I feel safe. The fact that I have the same carer, it feels less of a risk than if I had lots of different carers. They have to hoist me in and out of bed. They realise the importance of me having a shower. It is done quickly but not quickly that I feel I'm missing something. It's just efficiency and they are kind and gentle." A family member of a person using the service said, "I do feel [name] is safe with them. The carers have been great communicating with me during Covid-19, we will write things to each other in the book."
- People's safety was assessed, monitored and reviewed. Staff had been trained in safeguarding procedures and knew what action to take to protect people from harm and abuse.
- Staff were confident they were equipped to keep people safe and knew how to raise concerns appropriately. Staff said that management would take prompt action when required.

Assessing risk, safety monitoring and management

- People had risk assessments in place to cover the risks present within their lives. For example, assessments on communication, nutrition and hydration, mobility, personal care, continence, and pressure care were created to address risks in these areas.
- Assessments of risk were easy to follow and were reviewed and updated regularly.

Staffing and recruitment

- Safe staff recruitment processes were in place with appropriate criminal record and reference checks taking place prior to staff starting work with vulnerable people.
- People told us there were enough staff working for the service and they usually received consistent care. One person said, "We now have the same two staff each time. They turn up on time and if they can't make it, they'll phone me and ask if it's okay if they send someone else. It doesn't happen very often. I like the fact that it is our choice to accept the different person or cancel the call." Another person said, "They are good at keeping to times, arriving and leaving."
- The registered manager told us the service tried to keep staff visiting consistent, and staff we spoke with confirmed they usually cared for the same people.

Using medicines safely

- People were supported with their medicines in a safe and timely way. The level of support provided was dependent upon the person's individual need. A person told us, "We work with the carers to sort the medication in the mornings. There are no mistakes"
- Medicine administration records (MAR) we looked at were filled in accurately and contained sufficient

information.

- Staff told us they were confident in supporting people with their medication and said the training they had received in this area was sufficient.

Preventing and controlling infection

- People and their families told us that staff consistently wore the appropriate personal protective equipment (PPE) during the COVID-19 pandemic. One person said, "They (staff) wear face masks all the time. They are very careful at wearing gloves and washing hands. They keep you up to date about their jabs." A relative said, "We've seen them and they wear face masks and all the PPE, they seem very big with all that."
- Staff had received training about COVID-19 and infection prevention measures, which included the correct procedure for the putting on and taking off, of PPE.
- Staff told us they had access to a continuous supply of PPE, and the provider had not run short at any point.

Learning lessons when things go wrong

- The provider regularly reviewed any incidents and complaints, and supported staff to learn from them and improve practice when required.
- The registered manager worked in partnership with the Local Authority to ensure any safety and safeguarding incidents were investigated and any recommendations adopted.
- Staff were knowledgeable as to what information of concern they should report and how to report it, which included accidents and incidents.

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 has remained the same. 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

- People felt the service was generally well run, and had faith their requests would be listened to. One person said, "When I wanted to change the times I spoke to the registered manager and he made me feel calm. He sorted it out and reassured me. He seemed approachable." Another person said, "To start with we had lots of different carers and they were leaving more of a mess than before they arrived. We raised it with management, and it didn't happen after that. We're in a good place now, all is well"
- The management team regularly communicated with all staff, and systems were in place to enable effective communication.
- Staff spoke positively of the support they received. A member of staff told us, "The management are very approachable, I don't worry about contacting them at all."
- Staff felt able to feedback any issues to management, and had regular contact with a supervisor.

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

- The registered manager understood their role and responsibilities. The duty of candour requires providers to be open and honest with people when things go wrong with their care, giving people support, and providing truthful information and a written apology.

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

- The provider had adequate quality monitoring systems in place. This included regular spot checks on staff whilst providing care to people, to ensure that procedure was followed, and positive interactions took place.
- The registered manager understood their legal obligations. CQC had been informed about events they were required to by law, and we saw that the provider had displayed the last inspection rating on their website and within the service as required.
- Staff told us they were aware of the Whistleblowing policy and procedure, and felt confident to raise concerns when required.

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

- People's views were regularly sought about the quality of the service, including the use of questionnaires. One person said, "They send a questionnaire every few months and my family help me to fill it in." We saw

that results and feedback were analysed so that areas for improvement could be identified as required.

- People, their family, and staff, all told us the management team were approachable, and easy to contact.
- Staff told us they were able to share their views through a variety of formal and informal meetings. We saw minutes of meetings which showed training updates, concerns and safeguarding matters were discussed.

Continuous learning and improving care; Working in partnership with others

- The provider worked with key stakeholders, which included the local authority, in response to the pandemic. Information had been shared to promote people's health and welfare..
- The registered manager was open and honest throughout our inspection, and was receptive of feedback given.