

# Solihull Metropolitan Borough Council

## Bluebell Centre

### 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?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

### About the service

The Bluebell Centre is a reablement service which provides support to people in their own homes. At the time of our visit 24 people were using the service. The reablement service involves a multi-disciplinary approach involving support workers, social workers and occupational therapists agreeing a programme of intensive support for people with the aim of skilling them or re-skilling them to manage the activities of daily living. It is particularly used for people who need support to help regain skills and confidence after being discharged from hospital. The service is for a short intense period of support based on the individual's needs.

People have told us they felt safe in their homes around staff who helped to keep them safe. Risks to people's health and wellbeing were documented for staff to refer to. Staff understood how to keep people safe. People told us there were enough staff to support them. Systems were in place to review the backgrounds of potential staff to assure the registered provider of their suitability to work at the service. People were supported with their medicines according to their needs. The registered manager reviewed practices to ensure any learning could be incorporated to improve the service people received.

People's needs were assessed prior to them receiving care. This was to ensure everything was in place, which included equipment so that people received the care they needed. Staff worked with other health professionals and stakeholders to support people achieve the outcomes they wanted. Where appropriate staff supported people with their meals and offered choices.

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.

People told us staff were very caring and help to reassure them. People explained that when they first left hospital they felt vulnerable, but with the attention and care of staff they were able to gain their independence and dignity. Staff understood how to support people to promote their individual lifestyle choices. Staff had received equality and human rights training and understood how to promote peoples' choices.

People's care was continually reviewed and updated. People told us during their care package their needs quickly changed and that at every step, staff included them in their care planning to achieve goals they identified with the help of staff. Staff used a number of communication methods to communicate with people, depending on the person's needs. People understood they could complain if they needed to but did not feel they needed to. The service did not provide End of Life Care but staff knew who to contact should they need to in the event of an emergency.

People felt they received a good service and that the service was well run. The registered manager

demonstrated how they were working towards an Outstanding rating. Staff felt part of a team that shared the registered manager's vision for giving people the best care possible. Communication was open and staff felt communication was two way and that at staff meetings, staff were encouraged to share their thoughts. The registered provider understood their obligations and staff understood there was a whistleblowing policy in place. The registered manager had taken part in a review of the service to ensure the service people received was in line with other similar services. Staff also worked with local partners in the community to help promote people's independence.

Rating at last inspection

The last rating for this service was Good (published 10 May 2017).

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?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

# Bluebell Centre

## 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

There was one inspector in the inspection team.

#### Service and service type

This service is similar to a domiciliary care agency. It provides personal care to people living in their 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 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

#### What we did before the 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.

#### During the inspection

We spoke with nine members of staff including the service director, registered manager, assistant manager, team supervisor and care workers.

We reviewed a range of records. This included two people's care records and multiple medication records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We contacted eight people and were able to speak to five people on the telephone to ask them about their experience of receiving care.

# 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 told us they felt very safe with staff in their home. One person told us their confidence had been very low when they first started receiving care. However, with the support of staff, who they knew, they felt very safe. Another person told us, "I felt very safe."
- Systems were in place to record and escalate any concerns that had been raised. The registered manager understood their obligations and knew how to report any concerns to the necessary bodies.
- Staff had received safeguarding training and felt assured their concerns would be listened to and acted upon by the registered manager.

Assessing risk, safety monitoring and management

- Risks to people's health had been reviewed and detailed for staff to refer to. Staff told us they received enough information to care for people safely. If people's circumstances changed, they told us they notify the Team Supervisors or the Social Worker/ Reablement Facilitator.

Staffing and recruitment

- Staff were recruited through the registered providers central recruitment service. Staff told us before they commenced work with the service background checks were completed. This was to assure the registered provider of their suitability to work within the service.

Using medicines safely

- Not everybody required support with their medicines. People told us they were supported in accordance with their needs. For example, one person told us they initially needed help to be reminded to take their medicines. They told us staff always reminded them and gradually as their confidence grew they required less support with their medicines.
- Staff received training on supporting people with their medicines. The training was reviewed regularly to ensure people received the correct support.

Preventing and controlling infection

- Staff had received training on preventing the spread of infection. People told us staff always used the protective clothing such as gloves and aprons, as appropriate, when they supported people. Staff also told us they had access to equipment they needed to best support people.

Learning lessons when things go wrong

- The registered manager met regularly with the Team Manager to review performance and understand whether things could be done better.



# 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 the same.

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

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

- People told us they outlined their needs before their care commenced. A "trusted assessor" is a staff member who the registered manager is assured can assess people's needs appropriately. People were able to share their goals with the trusted assessor. People's care needs were then planned. The Registered Manager oversees the service provision and there are professionals within the team who ensure they have the necessary equipment.

Staff support: induction, training, skills and experience

- People told us they had every faith in the staff supporting them. They felt at ease around staff who in turn supported them confidently. Staff had access to training, regular supervision and their performance was reviewed at annual appraisals.

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

- People were supported according to their assessed need. One person told us when they first came from hospital, they could not do anything for themselves. They told us staff helped prepare their meals and drinks. They told us by the end of their care package, they were able to make their own meals again. People told us they were offered choices and involved in making decisions about their meals.

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

- People received care that was co-ordinated and involved a number of stakeholders. Staff explained how they worked with physiotherapists and occupational therapists to improve outcomes for people. One person told us about how equipment was unsuitable for their use, and staff helped them to access the correct equipment.

- Staff told us how they ensured people had access to the correct support throughout their time with the service. They told us as they worked with a number of healthcare professionals, they knew when to contact the appropriate professional and seek their involvement. They told us this helped maintain people's progress.

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 when this is in their best interests and legally authorised under the 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 checked whether the service was working within the principles of the MCA.

- Staff understood the importance of obtaining a person's consent before they commenced care. People told us staff always explained things to them so that they understood what was happening with their care. The registered manager understood the principles within the MCA. At the time of the inspection, people were assessed as having capacity and worked with staff to improve their health and mobility.

# 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 the same.

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 told us they were well treated by staff. One person described staff as "Absolutely marvellous." Staff had received equality training and understood the importance of respecting the persons human rights. Staff told us they promoted people's individual lifestyle choices by working with them.

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

- People told us they were involved in day to day decisions about their care. One person told us. "I felt like I could open up to them. They listened to me. They were brilliant." People told us that their care needs varied greatly during their care package. However, with each change, they spoke to staff and staff encouraged and adapted the care to meet their needs.

Respecting and promoting people's privacy, dignity and independence

- People told us staff worked exceptionally hard in order to promote peoples' independence. People told us they had at times felt low in confidence but with the support of staff had gained back their confidence and independence. One person told us, "They showed me how to do things for myself."
- People told us staff always treated them with dignity and respect. Staff had received training on dignity and respect and gave practical examples of how they had supported people appropriately.
- The registered manager told us they tried to recruit male staff also to be able to offer people the support of a male care staff member where appropriate.

## Is the service responsive?

### Our findings

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same.

This meant people's needs were met through good organisation and delivery.

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

- People told us they had regular meetings with the staff to discuss their care. One person told us, "[Office staff] kept in contact. If there's anything needs changing, you can tell them." People felt assured that as their needs changed, care was amended to reflect their changing circumstances. Care plans we reviewed demonstrated how changes in people's needs were documented and planned for.
- Staff told us they continually assessed people's needs and updated care records to ensure care and equipment was appropriate to the person. Staff told us this was imperative to ensuring people achieved their goals.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People felt able to communicate with staff. Staff told us they worked with people using a number of differing communication skills. Staff understood how to support people in relation to their individual needs. The registered manager told us they worked with people to understand their communication needs and responded accordingly. They told us they worked with the RNIB (Royal National Institute for the Blind) if they were unsure of issues in relation to people with a visual impairment. Where people had difficulty hearing, staff ensured people were supported to communicate.

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

- Staff told us they supported people as appropriate. For example, one staff member described how a person had lost confidence going into the community and staff worked with them to gradually access the community again.

Improving care quality in response to complaints or concerns

- People told us they felt no need to complain. However, they understood the process should they need to complain. The registered manager had a complaints process in place to investigate and respond to complaints.

# 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 that they received a good service and that the service itself was well run. People felt assured if they had any issues, staff would support them to resolve them.

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 obligations and worked closely with the registered providers representatives to ensure their regulatory obligations were met. Notifications we reviewed prior to the inspection were submitted promptly and appropriately. There was also a whistle blowing policy in place which staff knew about and understood.

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

- Staff told us they understood the registered managers expectations for providing care. Staff spoke positively about attending staff meetings and feeling part of the service. Staff told us they understood the strategic vision for the service and this helped motivate them and encourage them to support people as best they could.
- Quality officers on behalf of the Council regularly visited the service to assure the registered provider of the service people received.

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

- People were supported by a diverse team. People told us they felt involved in the service and that they could freely contribute their thoughts and feedback about the care they received. Staff told us that the diverse staff team supported each other's understanding of other cultures and lifestyles and this benefits people.

Continuous learning and improving care

- The registered manager explained how they work continually review practices to ensure people received the most value for money. They also told us about how they had worked with other local authorities to

ensure the service they delivered was based upon best practice. They told us any learning was then incorporated into the running of the service to ensure the service met people's needs.

Working in partnership with others

- Staff worked with partners in the local community to promote peoples' independence. For example, one person had not been able to access local shops but staff worked with them to improve their mobility and independence. The person told us this had meant a lot to her.