

## Care service inspection report

# Bluebird Care (Glasgow South)

Support Service Care at Home

No 3 The Stables 161 Crookston Road Glasgow G52 3NQ

Telephone: 0141 810 4537

Inspected by: Daphne Ndlovu

Type of inspection: Announced (Short Notice)
Inspection completed on: 26 November 2012



## **Contents**

	Page No
Summary	3
1 About the service we inspected	4
2 How we inspected this service	5
3 The inspection	9
4 Other information	17
5 Summary of grades	18
6 Inspection and grading history	18

## Service provided by:

Care Glasgow Ltd t/a Bluebird Care

## Service provider number:

SP2008009694

#### Care service number:

CS2008173228

## Contact details for the inspector who inspected this service:

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## Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

### We gave the service these grades

Quality of Care and Support 5 Very Good

Quality of Staffing 5 Very Good

Quality of Management and Leadership 5 Very Good

#### What the service does well

Many positive comments were received from those who use the service and their relatives in relation to the standards of care provided and the positive relationships and interactions with staff.

#### What the service could do better

The service should ensure that all policies and procedures reflect Scottish legislation where this is required.

## What the service has done since the last inspection

The evidence that the service keeps to demonstrate how well it is performing has improved a lot since the last inspection.

#### Conclusion

The management and staff of the service continue to work well to deliver an individualised person centred service. The people who use the service tell us that it is a good service and that they are happy and satisfied with the quality of service delivered.

### Who did this inspection

Daphne Ndlovu

## 1 About the service we inspected

Bluebird Care (Glasgow South) was registered by the Care Commission on 4 September 2008 to provide a Support Service (Care at Home). The service aims to enable people who need care to remain living in their own home, providing the information and support they need to enable them to lead their lives safely and in comfort.

Social Care and Social Work Improvement Scotland (SCSWIS) is the new regulatory body for care services in Scotland. it will award grades for services based on the findings of inspections. The history of the grades. The history of the grades that previously have been awarded by the Care Commission will also be available on the SCSWIS website.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 5 - Very Good Quality of Staffing - Grade 5 - Very Good Quality of Management and Leadership - Grade 5 - Very Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

## 2 How we inspected this service

### The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

### What we did during the inspection

We compiled the report following a short notice announced inspection. The inspection was carried out by Daphne Ndlovu, an inspector from the Care Inspectorate. The inspection took place on Friday 23 November 2012 from 10am until 5pm. Feedback was given to the service manager on Monday 26 November 2012 at 3.30pm. The service submitted an annual return. The service also submitted a detailed fully completed self assessment.

In this inspection we gathered evidence from various sources including the relevant sections of policies, procedures and other documents, including:

- support plans
- service's self assessment
- service's annual return
- completed care standard questionnaires
- minutes of meetings
- quality audit records
- staff training records

## Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

## Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make

## Inspection report continued

during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

## Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

# What the service has done to meet any recommendations we made at our last inspection

There were 2 recommendations made at the last inspection. The service now has a participation strategy in place which means that one of the recommendations has now been met. The second recommendation remains outstanding and will appear as recommendation1 in statement 4.4.

#### The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

**Annual Return Received:** Yes - Electronic

#### Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

Every year all care services must complete a self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate. We received a fully completed self assessment document from the service provider. We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each of the headings that we grade them under.

## Taking the views of people using the care service into account

These are some of the comments that the people using the service made:

'Bluebird care provide a very friendly and professional service.'

'Staff are always cheerful and willing to help.'

'I really look forward to the girls coming in.'

'Everyone of them makes sure life is easy for me in my old age.'

'A very friendly bunch of people.'

'I am generally very happy with the service and feel it has been a great support.'

## Taking carers' views into account

The following are some of the comments that the carers of people using the service made:

'I am very happy with the care provided by Bluebird for my mother.'

'The staff can always be contacted.'

'I always deal with the same personnel when I call.'

'They are open to suggested changes.'

'The support I get is super.'

'Although my relative is getting very confused, the staff at Bluebird are coping with this very well.'

'I get regular emails from the service updating me about my mother.'

'They deliver a very good service.'

'They are very supportive and reassuring.'

## 3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

## Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

#### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

#### Service strengths

We saw a range of ways by which the service sought the views of people who use it and those of their carers. In this report, service users will be referred to as customers as this is the term that the service uses.

The organisation had carried out it's own satisfaction surveys earlier this year. Within these they asked customers and carers about the quality of service, the quality of staff and also looked for comments to improve service.

The coordinator made telephone contact with new customers after they had had their first visit. This was to check if the service they had received was what they had asked for.

We saw review meetings where it was clear that people's views were taken into consideration and acted on. One example was where a carer had asked that the care plan to be changed to highlight that this particular individual was not to be left alone especially with food or drink. We saw the amended care plan highlighting this. Another example was where a carer had asked that staff photographs of staff working with her mother be left in the house in order to help the customer remember. This had been done.

Within survey questionnaires that we looked at, people said that they were listened to.

We contacted a relative of a customer who currently resides abroad. They told us that they got regular updates about their mother via email from the service.

There was evidence to demonstrate that the service involved customers and their carers in the recruitment of staff.

We saw minutes of a senior staff meeting where there had been discussions about dementia information forums that the service planned to deliver to carers. Carers had been informed about these and some had already expressed their interest to be involved.

Customers and carers had been contacted to find out what service they wished to get over the Christmas and new year holiday period.

Customer satisfaction was demonstrated by people choosing to come back when they had required the service again.

The service continued to support carers even after their loved one had died. There were personal touches like sending flowers and a card and having staff representation at funerals, as long as the family was in agreement. We saw letters and cards form carers expressing their thanks and saying how much this had meant to them.

Customers were all issued with inspection reports so that they could see how the service was performing.

#### Areas for improvement

The service was currently in the process of producing a newsletter. We will see how this is progressed at the next inspection.

We saw a lot of cards and thank you letters from people who had used the service or their relatives. We have asked the service to ensure that these are always marked with dates showing when they were received and what period they relate to.

At the time of the inspection, the service did not have a participation strategy in place. There was however evidence demonstrating that the manager had been chasing this up with the organisation.

During feedback, we informed the manager that the recommendation made at the last inspection, about developing and implementing a participation strategy would be brought forward to this inspection. The manager has since sent us a participation strategy outlining how the service involves people and how it takes account of their views. The recommendation has therefore now been met. At the next inspection, we will look at how the service is progressing with implementing it's participation strategy.

## Inspection report continued

**Grade awarded for this statement:** 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

#### Statement 3

We ensure that service users' health and wellbeing needs are met.

#### Service strengths

Within the support plans we could see that healthcare assessments had been carried out on individuals when they started using the service. Any issues arising from the health care history and assessments were incorporated into the support plans. The support plans that we looked at, were detailed and contained relevant information that staff required in order to support the individual fully.

We could see that instructions left or given by other agencies for example Speech and Language Therapist (SALT), on supporting individuals with swallowing, were followed. We saw examples of time when staff advocated for customers.

Customers had access to and were supported to attend health screening appointments.

Where individuals sometimes presented with challenging behaviour, we saw details of what had been identified as triggers. Guidance on what staff needed to know to work with the individual during this time, were also outlined.

Contact details of other health professionals involved in the individual's continuing care were available within the personal files. The service had good links with other health agencies.

The medication profiles that we saw had good detail in them. They identified any allergies an individual had. They also outlined what support needs an individual had with managing and taking medication.

While respecting individual's choice, staff promoted healthy eating when supporting people with food purchases or menu choices.

## Areas for improvement

The service was currently maintaining an excellent standard in this area and should continue to do so.

Grade awarded for this statement: 6 - Excellent

Number of requirements:  $\ \ 0$ 

Number of recommendations: 0

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

#### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

#### Service strengths

The service strengths outlined under statement 1.1, also apply to this statement.

#### Areas for improvement

The service was currently maintaining a very good standard in this area and should continue to do so. Some areas of improvement outlined under statement 1.1 apply to this statement too.

**Grade awarded for this statement:** 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

#### Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

## Service strengths

The staff that we spoke with, and those that completed our questionnaires, were motivated and spoke highly of a supportive management. The service had a stable staff team. The people who use the service liked this as they felt they knew the staff that worked with them well.

Regular staff meetings took place. There were minutes of meetings kept to evidence this. The second part of the staff meeting was always a training session. Some of the training undertaken during this time included: infection control and challenging behaviour.

When we asked staff about the National Care standards, they were well aware of them and how these impacted on the work that they did. Staff also knew about the codes of conduct, and legislation surrounding social care.

## Inspection report continued

Staff we spoke with told us that they received regular supervision. We could also see this from the supervision records that the service kept. Staff also received annual appraisals.

We saw a training plan that showed us what training staff would be undertaking and when this would take place. Staff training records were also in place. All mandatory refresher training appeared to up to date. Staff training was also via Individual Learning Account (ILA,) and distant learning with a local college.

The organisation had policies and procedures for protecting people. From looking through records we could see that staff were competent in applying these procedures.

Although we did not speak with any recently recruited staff, we looked at the induction pack and were satisfied that staff received a good induction when they first started in the service.

There was evidence from some of the staff meeting minutes that reflected on practice. This helped them with managing situations better if they they were to happen again.

Staff achievements were acknowledged at staff meetings.

#### Areas for improvement

The service was currently maintaining an excellent standard in this area and should continue to do so.

**Grade awarded for this statement:** 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

### Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

#### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

#### Service strengths

The service strengths outlined under statement 1.1 also apply to this statement.

#### Areas for improvement

The service was currently maintaining a very good standard within this area and should continue to do so. Some areas of improvement outlined under statement 1.1 apply to this statement too.

**Grade awarded for this statement:** 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

#### Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

## Service strengths

The service had systems in place by which it assured it's own quality. There was evidence to demonstrate that customers, carers and staff also played a part in assuring the quality of the service. This was evident in the self assessment that the service had submitted to us.

These are some of the ways by which the service demonstrated it's quality assurance:

- Monthly customer telephone contact.
- · Quality surveys with customer outcomes identified and addressed
- Medication audit
- · Staff and customer views Incorporated into self assessment.
- Supervisor's follow up visits in the first week of the customer using the service or as near as possible to that date.

A Safeguarding people policy was in place.

The service had a good notification history, whereby they notified all relevant bodies including the care inspectorate, of any incidents that required to be notified. The service kept a log of complaints and concerns that came in. Although there had been no complaints raised against the service, we could see that the policy had specific lengths of time by which complaints had to be dealt with.

#### Areas for improvement

We noted that no audit of support plans had been carried out. The manager was aware of this.

Although some of the policies and procedures had been amended to reflect Scottish legislation, the Safeguarding people policy did not refer to the Adult Support and Protection (Scotland) Act. (ASP). This was a recommendation at the last inspection (Recommendation 1).

We did however note that the manager kept a copy of the ASP Act with the Safeguarding policy and that this was applied in ay ASP cases that the service had to deal with.

**Grade awarded for this statement:** 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

#### Recommendations

1. The provider should ensure that policies and procedures which cover legal requirements are amended to reflect Scottish legislation. National Care Standards for Care at Home services, Standard 4, Management and leadership.

## 4 Other information

## Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

#### **Enforcements**

We have taken no enforcement action against this care service since the last inspection.

### Additional Information

None.

#### **Action Plan**

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in SCSWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

## 5 Summary of grades

Quality of Care and Support - 5 - Very Good			
tement 1 5 - Very Good			
Statement 3	6 - Excellent		
Quality of Staffing - 5 - Very Good			
Statement 1	5 - Very Good		
Statement 3	6 - Excellent		
Quality of Management and Leadership - 5 - Very Good			
Statement 1	5 - Very Good		
Statement 4	5 - Very Good		

## 6 Inspection and grading history

Date	Туре	Gradings	
24 Jun 2011	Unannounced	Care and support Staffing Management and Leadership	5 - Very Good 4 - Good Not Assessed
21 May 2010	Announced	Care and support Staffing Management and Leadership	4 - Good 4 - Good 4 - Good
4 Jun 2009	Announced	Care and support Staffing Management and Leadership	5 - Very Good 4 - Good 3 - Adequate

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

- که بایت سد ریم رونابز رگید روا رولکش رگید رپ شرازگ تعاشا هی

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

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