



# Inspection Report on

**Bluebird Care (Cardiff South)**

**St Hilary Court  
Cophorne Way  
Cardiff  
CF5 6ES**

**1<sup>st</sup> December 2021**

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## About Bluebird Care (Cardiff South)

Type of care provided	Domiciliary Support Service
Registered Provider	ANNWYL LTD
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection under the Regulation and Inspection of Social Care (Wales) Act 2016
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

People are extremely happy with the care and support they receive. People are supported to maintain their independence and achieve their personal outcomes. People have the opportunity to share their feedback with managers and the Responsible Individual (RI). Detailed personal plans and daily records are person centred and regularly reviewed. Managers and supervisors have good oversight of the care and support being delivered. Management conduct supervisions and observations with care staff to ensure they are competent in their role. Care staff feel well supported and valued in their role.

## Well-being

Several systems are in place to ensure people have the opportunity to share their views. People can talk openly with consistent care staff they know well and can speak directly to the RI. Regular feedback surveys are provided for people and their relatives. Mostly, people are involved in their reviews and can access their own personal plan. People feel they can make changes to their care if required and their requests are listened to and acted on. People's outcomes are clearly identified. People told us they are supported to be independent.

People told us they feel safe and are very happy with the care and support they receive. People have ways to raise a concern with the service if required. We saw regular feedback is listened to and appropriate action taken. Managers have systems and records in place to maintain oversight of people's safety. Managers log any compliments, complaints and concerns. People have individual risk assessments where measures are identified to limit their level of risk. People and care staff have access to a service user guide and policies and procedures which explain how to raise a concern.

People told us that the service has enabled them to be more independent and helped them gain confidence. Relatives told us that care staff have good levels of knowledge and understanding and knew their loved ones well. Relatives are involved in their loved ones care where appropriate. Health professionals are involved in people's care when required to ensure their physical and mental well-being is maintained.

## Care and Support

People are extremely happy with the care and support they receive. One person told us the support provided has helped their confidence. Care staff are praised for their dedication to the role and levels of care provided. Consistent care staff supports the development of professional relationships between people. People told us they are involved in their care and can make changes as they choose. We saw that people and their representatives have the opportunity to be involved in their reviews and provide feedback in surveys. People told us they can speak openly with the care staff and can contact the office with any issues.

Personal plans are detailed and person centred. Clear outcomes and tasks are identified for care staff to understand what support is required. Documents are regularly reviewed, however we noted that whole care plans are being reviewed six monthly rather than three monthly. The manager told us this would be amended on their electronic system. The electronic system used enables managers to have good oversight of care and support being provided. Managers can ensure that people are receiving the right support at the right time. One person told us that care staff are always on time and never rush. People and their relatives can also access the electronic system. Some relatives told us how helpful this was to them and allowed them see time scales and what support had been delivered.

Relatives told us that they are kept up to date and well informed regarding any concerns. One relative told us *"you just pick up the phone and they will deal with it"*. Managers ensure that accidents, incidents and safeguarding's are recorded and any action taken is clear. Managers told us they were working with the team to ensure that Care Inspectorate Wales (CIW) are notified in a timely manner of any notifiable events. People are referred to the right health professional such as an Occupational Therapist. Risk assessments are in place, these identify people's individual risks and measures in place to reduce risk. People feel safe and well cared for. Relatives told us *"the care is second to none"*, *"they're absolutely wonderful"* and *"I would recommend to anyone"*.

## Leadership and Management

Systems are in place to monitor the performance of the service. Feedback from people, their relatives and care staff is regularly sought. Manager's monitor care and support systems daily. Supervisors ensure that care staff are competent in their roles by conducting regular medication competencies and observations. Policies and procedures are in place for care staff and people and these provide a good level of information. Some documents could be improved to include important phone numbers such as safeguarding and CIW. However most care staff are confident in reporting concerns to external agencies.

The RI conducts three monthly visits and gains feedback from people. The three monthly visits could better reflect feedback from care staff. A six monthly 'Quality of care review' is conducted and this provides some oversight. Engagement with people and care staff is reflected and any action taken to improve the service. However, the review does not include matters such as complaints, accidents, incidents and safeguarding's. In addition, the 'Quality of care review' could be strengthened by identifying clear areas of improvement required for the service as a whole. We expect the provider to take action to address this. We will follow this up at our next inspection.

The Services Statement of purpose (SOP) is up to date and reflective of the service provided. The SOP states that the service offers the 'Welsh Active Offer' and during inspection, we were informed that the service can provide policies and information in Welsh if required. There are also care staff who speak Welsh if needed. Personal plans reflect ways of communicating for people whose mother tongue is not English. However, these documents could be improved to include a clear section regarding communication. This would bring this information together, making it easier for care staff to understand the person's needs.

Care staff go through a recruitment procedure which includes the appropriate checks. Most care staff receive regular supervision and appraisal. Care staff have an induction, training refreshers and competencies to keep their knowledge up to date. However, there are some areas of training which are out of date and systems could be improved to better reflect training. We expect the provider to take action to address this. We will follow this up at the next inspection. Care staff told us they feel valued and appreciated. The service has implemented several additional rewards systems for care staff such as employee of the month, offering free drinks and lunches and a Charity Ball. This appears to have maintained morale during the Covid-19 pandemic. Due to the pandemic staff meetings have not been possible. However, management told us they would look to find way to conduct these safely. All the feedback we received from care staff was positive with the majority stating, "*I love my job*".

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

### Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

### Area(s) for Improvement

Regulation	Summary	Status
80	The report does not cover matters such as: (a) considering the outcome of the engagement with	New

	<p>individuals and others, as required by regulation 76;</p> <p>(b) analysing the aggregated data on incidents, notifiable incidents, safeguarding matters, whistleblowing, concerns and complaints; (c) reviewing any action taken in relation to complaints; (d) considering the outcome of any audit of the accuracy and completeness of records</p>	
34	<p>Training is inconsistent across the staff team, some training is out of date and some care staff did not have training in certain areas</p>	New



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