



Inspection Report on

Bluebird Care Cardiff North

**Bluebird Care
2a Old Church Road
Cardiff
CF14 1AE**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

6th October 2021

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About Bluebird Care Cardiff North

Type of care provided	Domiciliary Support Service
Registered Provider	Langham Health Ltd
Registered places	0
Language of the service	Both
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	<i>'The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.'</i>

Summary

People are happy with the care they receive and feel they have good relationships with care staff. People are involved in their care and have opportunities to provide feedback and/or raise concerns regarding the service. People have access to health professionals when required and this information is reflected within people's personal plans. Personal plans are detailed and person centred however, these need to be reviewed in line with regulation. Trained care staff appear passionate about their roles and the people they support. Care staff go through a robust recruitment process and receive regular supervisions. However, regular team meetings need to be implemented. The responsible individual (RI) needs to conduct three monthly visits and a six monthly quality of care review in line with regulation.

Well-being

People are involved in their care and are asked to give their consent and feedback. The service provides several opportunities for people to share their feedback or raise any concerns with the provider. We saw annual surveys have been conducted and reviews involve the individual. Feedback we received from people and their families show that overall people are happy with the care they receive and feel confident in discussing matters with care staff.

People hold good relationships with the care staff who support them. Family members are involved when and if appropriate and are kept up to date on any matters. People are supported to see the appropriate health professional when required and this is reflected in their personal plans.

People feel happy, safe and well looked after. Policies and procedures are in place to ensure care staff know what to do following a concern. The majority of care staff have a good understanding of safeguarding and whistleblowing procedures. A service user guide includes key information and contacts details for safeguarding and Care Inspectorate Wales (CIW). The service has been open in reporting concerns to CIW.

Care and Development

Personal plans are detailed and person centred. Plans identify an individual's level of independence as well as what they require support with. These enable care staff to support people in achieving their personal outcomes. Risk assessments are in place in relation to moving and handling, skin care and food and drink. People told us care staff know them well and know what tasks and support is required. People using the service have good relationships with care staff. One individual told us *"they're wonderful, never met such lovely people, I'm very grateful"*. However, personal plans are not being reviewed in line with regulation. We expect the provider to take action to address this and will follow this up at the next inspection.

We saw that people are involved in their reviews. People are asked if they are happy with their care and if they have any concerns. Health professionals are involved in people's care where appropriate. We saw that records are kept to ensure that all care staff know what professionals are involved and how to contact them if required. We saw that other agencies and professionals are involved in people's care such as Nurse Assessors and the local authority.

People are kept safe from abuse. People have the opportunity to share concerns and feel confident discussing these with care staff or management. We saw policies and procedures in place in relation to Safeguarding and whistleblowing. There is a level of management oversight such as spot checks, medication competencies and supervisions in line with regulation. Care staff are confident in reporting concerns to the management team and external agencies. Care staff receive regular safeguarding training. One person said, *"I cannot find anything bad to say they look after me very well and take their time"*.

Leadership and Management

Well-organised staff files include work history, disclosure and barring service checks (DBS), references and proof of identification. Care staff receive regular supervision and appraisal as well as spot checks, observations and medication competencies. Some staff feel supported by management however; some feel that levels of confidentiality could be improved within the office environment. Care staff have been given the opportunity to provide feedback in a survey. Most felt that the service cares about their well-being but some felt contact with managers could be improved. Care staff told us that the service considers them as individuals and take a considerate approach in relation to their work and personal life. There have been no recent staff meetings and these would enable care staff to share concerns better as a team. We expect the provider to take action to address this and we will follow this up at the next inspection.

Management have maintained contact with staff through messaging systems, emails and a monthly magazine. The magazine keeps care staff up to date on any changes such as new policies and procedures and a 'carer of the month' award. We saw that the service had implemented a 'Covid Heroes' award to recognise the hard work of care staff through the Covid-19 pandemic. Policies and procedures are available to staff and an up to date Statement of Purpose and service user guide are in place. These include key contact details for care staff and people using the service.

People have the opportunity to share their feedback on the quality of the service with the providers. We saw feedback surveys, reviews and discussions between people and management. Feedback we received from people and their families was positive. A relative told us "*they're amazing, very caring, thorough, you couldn't ask for better carers*". Surveys and feedback show that people are kept up to date on changes most of the time. People feel happy and listened to within the service.

We saw that management meetings have continued through the Covid-19 pandemic and enabled management to maintain a level of oversight of the service. We saw management conduct regular spot checks and audits are completed. Some people and care staff are not familiar with the term RI nor understand their roles and responsibilities. The RI has not completed any three monthly visits in line with regulation nor a six monthly quality of care review. We expect the provider to take action to address this and will follow this up at the next inspection. The RI has now put systems in place to address this.

Areas for improvement and action at, or since, the previous inspection. Achieved**Areas for improvement and action at, or since, the previous inspection. Not Achieved**

None

Areas where priority action is required

None

Areas where improvement is required

Personal plans must be reviewed as and when required but at least every three months	Regulation 16(1)
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A minimum of six staff meetings must take place a year	Regulation 38(1)
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The responsible individual must meet with members of staff and individuals for whom the regulated service is being provided at least every three months	Regulation 73(2) Regulation 73(3)
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The responsible individual must complete a quality of care review at least every six months	Regulation 80(1) Regulation 80(2) Regulation 80(3) Regulation 80(4)
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The area(s) identified above require improvement but we have not issued a priority action notice on this occasion. This is because there is no immediate or significant risk for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection.

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