



Inspection Report on

Bluebell House

Barry

Date Inspection Completed

17/01/2024

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About Bluebell House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Amethyst Healthcare Ltd
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	15 December 2022
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People are settled, they lead active lives and do things they enjoy. Care staff are kind, caring and respectful to people and know them very well. The environment is suitable to meet people's needs. Care staff follow personal plans to inform them how to provide care and support to people living at the service. People have access to health care and receive planned input from other health professionals. There are effective systems in place to store and administer medication. Since the last inspection there has been a change to the management structure. The responsible individual (RI) is supportive in making further improvements to the service alongside the management team. Better systems mean care staff receive timely supervision and training needs are being met. There are improvements in the oversight of the service to monitor and review the quality and safety of care being provided to people.

Well-being

People are treated with dignity and respect. People can express their choices and opinions on a day-to-day basis. When the RI visits the service, they speak with people to seek their views. Formal engagement with people and their representatives is not as good as it should be. Care staff support people to discuss what they want to do, plan, and achieve. Some people access advocacy services and representatives are available to them. But representatives are not always included in supporting a person to make more complex decisions. This is important to ensure people's voices are heard.

People contribute to making decisions about how they spend their social time. People are doing things they enjoy and are important to them. Care staff understand people very well and know their likes, hobbies, and interests. People told us about new experiences and things they have done in the last year they have enjoyed. Such as going abroad for the first time, taking part in hobbies such as going on fishing trips, visiting the theatre and places of interest. Care staff provide support to people to explore opportunities in their community, such as enrolling on courses to improve their skills and to learn new ones.

There are systems in place to protect people from harm and abuse. Care staff understand their roles and responsibilities to protect people. There is a safeguarding policy in place and care staff receive training and supervision. Care staff support people to maintain healthy relationships and know how to raise concerns about a person's well-being. The service provider shares people's experiences on social media, but it is not clear if all people fully understand the risks of using social media and have suitably agreed to it. The RI is taking immediate action to ensure on-line safety is in place for all people.

The environment promotes people's outcomes. It is fully equipped to meet people's needs and is well-maintained. Bedrooms are individualised and unique and people's privacy is respected. People are extremely settled living in the home, we saw people enjoying time together in the communal areas, watching television together, chatting and engaging easily with care staff.

Care and Support

People receive the right care at the right time. Care staff complete daily records detailing the care and support people receive. Care staff are sensitive to people's personal care needs and outcomes are consistently met. On the day of the inspection, people were well dressed, in clean clothes. The service supports people to maintain their personal hygiene and make choices about their day-to-day appearance, such as having a shave or having a haircut.

People access healthcare services. Care staff support people to attend appointments. Records relating to health updates are in order. When a person is unwell, care staff take appropriate action. Updates about people's health or other important events, are not consistently shared with representatives. Records relating to accidents do not clearly tell us when medical advice is sought.

Care staff provide support for people to manage their medication. There are effective procedures in place to store, administer and record the medication people take. Care staff follow policies and procedures which informs them of their responsibilities. Care staff are trained and competent to administer medication. We saw improved auditing and monitoring of medication records.

Care staff maintain daily records of the food and drinks people are offered. People have access to regular meals, snacks, and drinks. Care staff encourage people to choose home cooked meals, but people occasionally choose a take-away meal as their preference. Care staff receive training to provide additional support to people at mealtimes when they require a modified diet.

People have access to the right information about the service, when needed, in a suitable format. A new service user agreement is in place and a service user guide is up to date. People are settled and happy with the care and support they receive. Care staff have a great depth of knowledge about the people living at the service and interact with people with genuine warmth and kindness, and they share a strong bond. People are valued and respected and mostly receive continuity of care from a team of core care staff.

The service completes a personal plan to inform care staff about someone's care and support needs. We found reviews of the personal plan are frequent, but some details are missing. It is not always clear when a person or their representatives are included in the personal plan review. Some representatives told us they want more involvement and better communication from the service.

Environment

People live in a home that supports their well-being outcomes. The location of the home has good access to local facilities and places of interest. It offers a pleasant, homely environment. The home is well maintained, communal areas are accessible, doorways and corridors are widened to enable wheelchair access. Recent decoration of the home keeps the environment fresh and clean.

The home is hygienic and clutter free, there is adequate room for equipment. Cleaning equipment and products are stored safely. Medications are stored securely to keep people safe from harm. There is a good supply of PPE throughout the home. The fixtures, fittings and furnishings are of a good standard. Regular audits in the home ensures good oversight of the environment.

Bedrooms are personalised and meet the needs and preferences of people; room sizes are good and there is storage for personal items. Bathrooms are spacious and maintenance in one bathroom is ongoing. There is a separate visitors room for formal meetings.

The garden is accessible with a lawn, a seating area, and an area where people can have shade in the warmer weather. The lounge doors lead on to raised decking which overlooks the garden. The garden is fully enclosed and offers a peaceful and safe environment.

Some areas of the home are locked to keep people safe, such as the utility and storage cupboards. Care staff encourage people to take part in household tasks to develop their skills should they choose to.

People live in a safe home and are protected from harm. Should people require full supervision to leave the premises, appropriate Deprivation of Liberty Safeguard (DoLS) authorisations are in place. DoLS authorisations ensure that care is provided in a lawful way when people lack the mental capacity to make decisions around their own care and safety. The level of security is appropriate to the people living there. Care staff check the identity of visitors to the service. People have a personal emergency evacuation plan specific to their individual support needs in case of an emergency.

Leadership and Management

There is an improvement in the oversight and quality monitoring at the home. A new manager is working at the service and the organisational structure is clear to people and care staff. Regular RI visits, and better quality of care reviews tell us the oversight and governance are improving. The quality of care review captures what the service does well, but also what needs to improve. We found better auditing of accidents, incidents, concerns, complaints, and medication management. There is a clear plan for further improvements to communicate better with representatives, to improve records, further strengthen audits and to provide people with continuity of care.

There is a system and procedure to maintain records of recruitment. We found most records are complete but not all. The RI is taking action to strengthen audits and ensure gaps in records are complete. Disclosure and Barring Service (DBS) checks are complete for all care staff, and all care staff are registered with Social Care Wales, the workforce regulator. There is an on-going application for the manager to become registered. Care staff hold appropriate qualifications. There are better systems for recording and overseeing the training of care staff. Most are up to date with their training, but not all. The range of training available to care staff meets the needs of people using the service. Recent supervisions for care staff are up to date, but we did not see annual appraisals. The manager and RI are taking action to complete them and improve the oversight of supervision and appraisal for all care staff.

The service keeps people's records up to date, and files are stored securely. On-line policies and procedures are available to care staff, they are up to date and follow guidelines and refer to current legislation. Regular meetings fully inform care staff of any updates. Overall, care staff feel valued and listened to. We found sufficient care staff on duty on the day of the inspection, but records tell us of times where care staff are working a lot. Representatives told us they would like more regular care staff to improve continuity of care.

People, representatives and visiting professionals tell us people achieve good outcomes. The RI and management are keen to further improve the service. The statement of purpose is a document which describes the service to stakeholders and is a regulatory requirement. The statement of purpose mostly reflects the service people receive but requires further amendments to be accurate.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	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.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	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
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N/A	No non-compliance of this type was identified at this inspection	N/A
16	People or their representatives should be given the opportunity to be involved in their review to seek their views and preferences	Achieved
58	There should be robust medication audits to maintain oversight of the management of medicines. The medication policy to be revised in accordance with current guidance	Achieved
36	Although staff are trained for their role this must also include other areas to understand the needs of people they currently support.	Achieved
20	People should have a signed copy of a service agreement to inform them of the terms and conditions of the placement.	Achieved
35	Recruitment procedures must be consistently followed to ensure that vulnerable people are protected.	Achieved
8	The service provider failed to have effective systems in place for monitoring, reviewing and improving the quality of care and support.	Achieved

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