



Inspection Report on

Bluebird Care Pontypridd

**Office G, Business Development Centre
Main Avenue
Pontypridd
CF37 5UR**

Date Inspection Completed

26/01/2023

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About Bluebird Care Pontypridd

Type of care provided	Domiciliary Support Service
Registered Provider	MSF Group Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	First Inspection since RISCA Registration.
Does this service provide the Welsh Language active offer?	The service is working towards an 'Active Offer' of the Welsh language.

Summary

Bluebird Care Pontypridd provide support to people over the age of 18 years in their own homes.

People receiving a service from Bluebird Care Pontypridd receive care from staff who are happy in their roles and feel well supported. They receive regular one to one/individual supervision, attend team meetings, and have appropriate training. Staff have the skills and knowledge to carry out their roles effectively and the opportunity to raise any concerns.

People have accurate and up to date personal plans which detail their individual outcomes. People, and their representatives, are complimentary about the positive relationship they have with staff and are happy with the service provided.

Appropriate and up to date policies ensure staff have the information and guidance they need. The responsible individual (RI) carries out his visits and quality assurance processes.

Well-being

People have choice about the care and support they receive. Staff develop plans with the individual and their representative, using appropriate assessment tools. People provide feedback face to face and through telephone monitoring, which contributes to the quality assurance of the service. People's language and communication needs are considered. The service is currently working towards the Welsh language offer. We are told documentation can be provided in both English and Welsh if requested. Some staff are fluent in the Welsh language and others have basic Welsh language skills, however the service does not currently provide support to anyone who speaks Welsh.

Staff document people's needs and risks to their physical, mental health and emotional well-being, in personalised risk assessments. The service is responsive to changes in care needs and regular reviews are carried out. The service uses an electronic care monitoring system, which allows care staff to communicate with each other, office staff and the management team. The system also enables office staff to communicate promptly with care staff about any changes to rotas or care tasks.

Staff help protect people from potential harm or abuse. Staff receive safeguarding training and have knowledge of the procedure to report any concerns they have. Up to date safeguarding and whistleblowing policies are in place to provide guidance and support to staff.

Care and Support

People and their families have positive relationships with staff. People told us the communication is very good. We saw a customer guide people are given and a statement of purpose, which are mostly consistent with the service provided. Management ensures they inform staff of everything they need to know to provide good daily care and provide channels to feedback any concerns or queries. Staff use a care monitoring application on their phones to access care plans, rotas, and daily notes. Feedback from people and their families is very positive. One relative said about staff *'all really good..they've been a treat... made home life so much easier...made a big difference... doing a really good job'*. Another person told us about staff *'I'm very happy with them...they do what I want'*.

Care plans consider people's personal outcomes, as well as the practical care and support they require. We saw evidence these are reviewed regularly. These involve people, their families, and other professionals such as social workers and health care workers.

There are measures in place for assisting people with their medication, if needed. A medication policy is in place. All staff have up to date medication training, and supervisors check care staff competence in supporting people with medication through spot checks and competency assessments. Staff complete MAR (Medication Administration Records) charts on hard copies if provided, or electronically on the care monitoring app. This is monitored by the management team.

The service aims to protect people from potential harm and abuse. All staff receive safeguarding training and there are policies in place informing them how to report abuse. Staff told us they feel confident they would know what to do if they were concerned about someone at risk of harm and could approach management with these issues.

There are infection control measures in place. Staff have received training in this area and there is an up to date policy and procedures in place. During our office visit, we saw there were good supplies of Personal Protective Equipment (PPE) such as masks, gloves, and hand sanitiser. People receiving care and support told us staff use PPE when in their homes.

Environment

As this is a domiciliary support service, we do not consider the environment theme. However, on the day of our site visit, it was noted the main entrance had keypad access. The building is used by a number of organisations, but the service's office spaces were locked to ensure care files and other confidential information are kept secure. The service has a few office spaces for training and meetings.

Leadership and Management

Staff are knowledgeable in their roles and responsibilities and feel very well supported by the management team. Staff told us they have time to gain the knowledge and experience they need before visiting people on their own. There is an induction process in place, which includes training and shadowing other staff. Staff have regular supervision that includes one-to-one discussions with the management team regarding their wellbeing and professional development, 'spot checks', and competency assessments. Staff receive training, which includes a mix of online e-learning and some face-to-face training. Time is booked into staff rotas when required. The service needs to ensure a high level of training compliance and regular supervision with staff as the service continues to expand.

Staff told us they receive rotas via the care monitoring application and management advises them of any changes. Staff told us they feel happy and confident in their roles. One staff member said '*They are the best company I've worked for...I'm the happiest...they respect us...they listen and appreciate you...feel part of a Team*'. Another said, '*I love my job...they're as good as gold...100% supportive*'. Recruitment and vetting processes are in place and are robust. All staff have up to date Disclosure and Barring Service (DBS) checks. Recruitment is ongoing at the service with incentives for existing and new staff.

There are monitoring and auditing processes in place to maintain the quality of the service. The RI, staff and people told us the RI visits people in their own homes and has good communication and contact with staff to ensure oversight of day-to-day occurrences with the service. Logging and documenting these visits would provide clearer evidence of this. Quality of Improvement plans are in place which shows engagement with people and staff and an assessment of the care and support provided at the service, however more evidence of the information analysed would make this clearer. People receiving support provide feedback on the service during visits and through monitoring calls. They told us they can call the office with any issues or queries. A log of complaints, incidents, and safeguarding events is kept at the service. Some formal notifications have been received by Care Inspectorate Wales (CIW), but the provider needs to ensure all notifiable events are sent, and in a timely manner. A complaints and other policies are in place, up to date, and reviewed regularly. These are generic across all Bluebird services, but the RI told us are appropriate to this service.

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
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