

# Review of compliance

Lifestyle Support Limited Bluebird Care (Stafford)	
<b>Region:</b>	West Midlands
<b>Location address:</b>	Suite 24, Stafford Business Village Staffordshire Technology Park, Dyson Way Stafford Staffordshire ST18 0TW
<b>Type of service:</b>	Domiciliary care service
<b>Date of Publication:</b>	February 2012
<b>Overview of the service:</b>	This is a domiciliary care agency for Stafford and surrounding areas.

# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Bluebird Care (Stafford) was meeting all the essential standards of quality and safety.**

The summary below describes why we carried out this review, what we found and any action required.

### Why we carried out this review

We carried out this review to check whether Bluebird Care (Stafford) had made improvements in relation to:

Outcome 04 - Care and welfare of people who use services

Outcome 16 - Assessing and monitoring the quality of service provision

### How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 8 February 2012, looked at records of people who use services, talked to staff and talked to people who use services.

### What people told us

We carried out this review as our records showed that there had been no recent inspection of this service. Therefore, we visited Bluebird Care in order to up date the information we held and to establish that people's needs were being safely met.

The visit was announced the day before we met the provider and staff in their office.

People we spoke to that used the service gave many positive statements about the carers and the service they offered including, "Very satisfied, very courteous staff." One person told us "They are all very helpful and I am very happy with the service." Another person told us "I can't fault them, they really are marvellous."

We spoke to staff that told us "I am very happy working for the agency, I am well supported and have received good training. I can always ask senior staff if I have concerns or feel that the time allocated is not correct."

We found the office to be well managed and efficient, with robust audit procedures in place.

### What we found about the standards we reviewed and how well Bluebird Care (Stafford) was meeting them

**Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights**

People who use the service experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

**Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care**

People who use the service benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

**Other information**

Please see previous reports for more information about previous reviews.

**What we found  
for each essential standard of quality  
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

**Compliant** means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

## Outcome 04: Care and welfare of people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

### What we found

#### Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

#### Our findings

##### What people who use the service experienced and told us

Through a process called 'pathway tracking' we followed the care of 4 people who used the service. We looked at the care records and spoke with people using the service on the telephone, talked with staff and some relatives about the care provided. Pathway tracking helps us understand the outcomes and experiences of selected people as we look at documentation relating to that person and speak to the person receiving care. The information we gathered helped us to make a judgement about whether the service is meeting the essential standards of quality and safety.

People who used the service told us that they were treated well and addressed properly by the care staff. They told us that staff stayed for their stated visit time and they were usually contacted by the agency if the carer was going to be late or if there was a change to their usual carer. They told us they felt respected by staff and their dignity was protected and they gave them the support they needed.

When we spoke with people on the telephone they told us the agency provided consistent care and they received a rota offering them weekly information about who would be visiting and at what time. People said the rota had been very helpful and they were aware that the staff rang in to confirm their arrival and on leaving the visit.

##### Other evidence

We saw that individual care plans were person centred and that the assessment process had involved people that used the service and their representatives. We saw that a pre-assessment process had been undertaken before the service started. We

saw that care plans and risk assessments were in place, had been reviewed and the person and their relatives had been involved and signed the documents. We saw that where care needs had changed, prompt action had been taken to ensure that the care package was updated to meet the needs of the person.

We looked at three medication administration records (MAR) and these confirmed that people were receiving their medication as prescribed. We saw that care staff had undergone training for the safe administration of medication and reviews of their competency were recorded as part of the supervision process. We noted that not all refused/missed medication had been recorded as the medication policy stated and this was to be addressed by the manager.

We spoke with staff, all of whom were very clear about raising concerns about risks to people. Staff knew about and understood the purpose of the organisation's whistle blowing policy. The organisation had a procedure in place for people to make complaints. We saw that all complaints were recorded and monitored so that improvements could be made to the service delivery and learning could take place. When compliments or complaints were received the senior staff spoke with the individual carer to give praise or to resolve the issues immediately.

We looked at computerised staff time sheets which confirmed that the staff attended people at the agreed time. We saw that the staff had to call a logging number on arrival and on departure of the visit, which was logged on the computer system in the office.

### **Our judgement**

People who use the service experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

## Outcome 16: Assessing and monitoring the quality of service provision

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

### What we found

#### Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

#### Our findings

##### What people who use the service experienced and told us

We saw that the service sent surveys out to people using the service, and also encouraged people to compliment or raise concerns if they needed to.

Comments included: "The main carer is excellent, no complaints." One person said "Mum has been delighted with the care she has been receiving; she has found all the carers very pleasant and really has no complaints."

We saw the analysis of the last annual quality assurance survey that the service had completed, and the action they had taken to address any practice issues identified.

Feedback from the survey was sent to people using the service. We saw that the results from the surveys were positive. Customer comments included:

'Very pleased with the service.'

'You can't improve on excellence.'

'No complaints, 100% thanks to all the staff.'

'All the family are very pleased with the care and service.'

##### Other evidence

Staff told us they enjoyed working with people in their own homes, they felt supported by the management team and had been given appropriate training that enabled them to do their jobs. Staff told us the four day induction they received was good, that they worked as a team, and communication from the office was excellent.

Staff also confirmed that emergency on call arrangements were effective. We saw that

staff recruitment procedures were robust. Staff told us they received a fortnightly bulletin leaflet to update them on recent events, employment of any new staff and it gave dates for any forthcoming training sessions. Staff confirmed that training was always being updated and further training in specialist topics was also organised.

We saw that staff supervision was being undertaken monthly along with documented spot checks by the senior staff. Some observational supervision took place in people's homes, some on the telephone and others were carried out in the office. Staff confirmed they received supervision and that they could approach the manager at any time if they had concerns.

Care records contained individual user risk assessments as well as environmental risk assessments and there was evidence of regular review. We saw that the managers continually audit the service. Care plans, risk assessments, complaints, call monitoring; medication and customer satisfaction are all audited to ensure a quality service is being provided. We saw evidence that the service was constantly looking to improve the quality of the support it provided.

### **Our judgement**

People who use the service benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

# What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

**Improvement actions:** These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

**Compliance actions:** These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

**Enforcement action:** These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

## Information for the reader

<b>Document purpose</b>	Review of compliance report
<b>Author</b>	Care Quality Commission
<b>Audience</b>	The general public
<b>Further copies from</b>	03000 616161 / <a href="http://www.cqc.org.uk">www.cqc.org.uk</a>
<b>Copyright</b>	Copyright © (2010) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

## Care Quality Commission

<b>Website</b>	<a href="http://www.cqc.org.uk">www.cqc.org.uk</a>
<b>Telephone</b>	03000 616161
<b>Email address</b>	<a href="mailto:enquiries@cqc.org.uk">enquiries@cqc.org.uk</a>
<b>Postal address</b>	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA