



Inspection Report on

Bluebird Care Pontypridd

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Pontypridd
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Date Inspection Completed

12/01/2024

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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	3 February 2023
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Bluebird Care Pontypridd provides 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. Appropriate and up to date policies ensure staff have the information and guidance they need.

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. Care staff usually arrive for calls promptly and provide support people need and in the way they want. There are medication management policies and procedures in place to support people to remain well.

There are good quality assurance processes in place, and the responsible individual (RI) carries out their regulatory duties.

Well-being

People have choice about the care and support they receive. Staff develop clear and detailed plans with the individual and their representative, using appropriate assessment tools. People provide feedback face to face during reviews and through satisfaction surveys, 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 active offer. We are told documentation can be provided in both English and Welsh if requested. One staff member and one service user currently using the service speak in the Welsh language.

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 people's 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 and whistleblowing training and have knowledge of the procedures to report any concerns they have. Up to date safeguarding and whistleblowing policies are in place to provide guidance and support to staff. There are also robust recruitment processes in place.

There are medication policies and procedures in place to ensure this is administered as prescribed and supports people to remain well.

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. 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 person said *'They're amazing...they're a god send...life has changed for the better'*. Another relative told us *'They are very good in enabling mum...there's always laughing...puts that extra smile on her face...brighten her day'*.

Care plans consider people's personal outcomes, as well as the practical care and support they require. These are reviewed regularly involving people, their families, and other professionals such as social workers and health care workers. People told us carers usually arrive when expected, support them with the things they want and need, and do not feel rushed.

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 their competence 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.

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.

Staff told us they receive rotas via the care monitoring application and the office advises them of any changes. 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 told us they feel happy and confident in their roles. One staff member said '*I feel well supported...better than any other company I've been in previously...can't fault the whole team*'. Recruitment and vetting processes are in place and are robust. All staff have up to date Disclosure and Barring Service (DBS) checks, and are registered or in the process of registering with Social Care Wales. 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 more of these visits would provide clearer evidence of this. Quality Assurance Reviews are completed, and a Quality of Improvement plan is in place. This is reviewed regularly by the management team. People and relatives provide feedback on the service during visits, through satisfaction surveys, and on homecare.co.uk. Staff 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. Notifications have been received by Care Inspectorate Wales (CIW), but the provider needs to ensure these are all appropriate. A number of policies are in place, up to date, and reviewed regularly. These are generic across all Bluebird services, but the provider is in the process of making these more specific to services in Wales.

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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