

Care service inspection report

Bluebird Care Edinburgh

Support Service Care at Home

Unit 4 Castlebrae Business Centre 40 Peffer Place Edinburgh EH16 4BB

Inspected by: Karen Mack

Annemarie Palmer

Type of inspection: Announced (Short Notice)

Inspection completed on: 7 March 2014



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Service provided by:

J & J Perry Limited Trading as Bluebird Care Edinburgh

Service provider number:

SP2008009670

Care service number:

CS2008172332

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Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of Care and Support 5 Very Good

Quality of Staffing 6 Excellent

Quality of Management and Leadership 5 Very Good

What the service does well

Customers told us that the care and support from Bluebird Care (Edinburgh) was of a very high standard, reliable and provided by regular care staff. People we spoke with told us of a 'person centred service' that was responsive and professional. The staff team that we met were committed, professional and dedicated to ensuring the service met the needs of customers. Staff also valued their own development and recognised how they could influence not only their future - but the future of the company.

We found the service to be very pro-active. They were thinking ahead in terms of customers' needs and the changes ahead in social care. Strong partnership working with organisations such as the Scottish Social Services Council (SSSC) and Scottish Care meant that all staff in the service were actively leading and shaping developments in the care at home sector.

What the service could do better

The service is committed to development and improvement, and there are a number of strategies in place to ensure that service delivery remains at a high standard.

We did discuss ways that the service could 'bring together' the quality assurance systems that are in place to measure progress more effectively.

We also advised the service to apply to the Care Inspectorate to be registered to provide a Housing Support service as well as Care at Home. This was being considered at the time of the Inspection.

What the service has done since the last inspection

There have been significant developments in the service since the service was inspected in March 2013. These are reported on under the relevant themes and statements but included:

- * A work pattern has been introduced for frontline care staff.
- * The staff team had increased to support the overall development of the company.
- * 'I Connect' has been fully implemented to support staff scheduling, support staff as lone workers and ensure customers are receiving the contracted service.
- * 'E learning' has been introduced to further support staffs learning and development.
- * The service has developed strong partnerships working with agencies including the SSSC and Scottish Care.
- * The service is implementing 'Step into Leadership'. This is a strategy for building 'leadership capability' within the Social Services sector. The Registered Manager is working closely with the SSSC to measure how this is impacting upon the service.
- * Staff training and learning opportunities have developed. The service regularly works alongside NHS staff and other organisations (including Alzheimer's Scotland) to deliver this.
- * New care plans have been introduced to support staff in meeting customers' needs.
- * Bluebird (Edinburgh) have been approached to implement and lead an independent 'care at home' providers forums with Edinburgh City Council.

Conclusion

This was a very positive Inspection. Customers and relatives told us that they were very happy with the service provided. Many people said they would recommend the service to others and 'word of mouth' is how most people knew of the service.

Staff recognised the value of on-going training and development for themselves and the people using the service. There was a clear career pathway for staff and individuals were encouraged to make changes and be responsible for their actions. This ethos was strongly encouraged by the Directors and managers of the service who recognised that their staff team were their biggest strength.

The care planning and reports that we sampled supported the 'person centred' approach that the staff told us about. The way that customers support and care needs were recorded was of an excellent standard, this fully enabled the reader to understand that person and what was important to them.

We saw that the staff and management team are focused and responsive to the needs of the customers and that this value is at the heart of the service.

Who did this inspection

Karen Mack Annemarie Palmer

1 About the service we inspected

Bluebird Care (Edinburgh) opened in 2008 and is part of the Bluebird Care franchise group of companies. Bluebird Care is a national provider of care in the home, specialising in working with customers and their families who require social care in their own homes. The service offers a unique service of tailored care visits from 30 minutes to full live-in support.

Care and support provided include:

- * Assistance with personal care.
- * Support managing medicines.
- * Assistance with maintaining mobility.
- * Support to prepare meals.
- * Support with shopping.
- * Domestic tasks.
- * Outings.
- * Short breaks for carers (Respite care).

The company's website states that:

'The ethos of Bluebird Care is good old fashioned service with a 'can do' attitude, which has been built around a passion to deliver high quality care and an excellent level of service'.

Customers may be funded through a variety of routes or they may purchase their care through a Direct Payment, an individual budget or personal fund. At the time of our inspection, 107 customers were using the registered service.

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 2011, this function was carried out by the Care Commission. Information in relation to all care services is available on our website at www.scswis.com.

This service registered with the Care Inspectorate on 19th May 2008.

Requirements and recommendations

If we are concerned about some aspect of a service, or think it needs to do more to improve, we may make a recommendation or requirement.

A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service based on best practice or the National Care Standards.

A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 ("the Act") and secondary

legislation made under the Act, or a condition of registration. Where there are breaches of Regulations, Orders or conditions, a requirement may be made. Requirements are legally enforceable at the discretion of the Care Inspectorate."

About the service we inspected

Bluebird Care (Edinburgh) is part of the Bluebird Care franchise group of companies. Bluebird Care is a national provider of care in the home, specialising in working with customers and their families who require social care in their own homes. The service offers a unique service of tailored care visits from 30 minutes to full live-in support.

Care and support provided:

- * Assistance with personal care
- * Support managing medicines
- * Assistance with moving around the home
- * Support to prepare meals
- * Support with shopping
- * Cleaning the house
- * Outings
- * Short breaks for carers (Respite care)

The aims and objectives of the service: (Taken from their website)
The service aims to be friendly and approachable whilst always maintaining a very professional and customer focused attitude. We realise that making decisions about care can seem very daunting. The need for care can often arise at a stressful time, for example, when you or a loved one has been ill. Or perhaps, it has been getting increasingly difficult for you or a loved one to manage at home and you are thinking that some help may now be needed.

At the time of our inspection, 130 customers were using the registered service.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 5 - Very Good Quality of Staffing - Grade 6 - Excellent Quality of Management and Leadership - Grade 5 - Very Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a medium intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

What we did during the inspection

We wrote this report following a short notice announced inspection. This was carried out by Inspectors Karen Mack and Annmarie Palmer. The Inspection took place between Wednesday 5th March and Friday 7th March 2013. Final Inspection feedback was given to the Registered Manager and Directors on the 7th of March.

The inspection focused on 3 Quality Themes this year with 2 statements under each theme heading.

As part of the inspection, we took account of the completed self assessment form that we asked the provider to complete and return to us.

We also asked the manager to give out Care Inspectorate questionnaires to staff and people who use the service.

During this Inspection we sampled evidence from sources including:

The Customer Involvement Strategy for the service (this is the services plan for how they will involve people who use the service).

Relevant sections of policies/procedures/records/documents.

The services most recent self assessment.

Care plans for people using the service.

Staff Records.

Information from staff training records.

Information on Quality Assurance systems.

Questionnaires that had been issued and returned to the care service from clients, their relatives or advocates.

We met with people including:

5 Customers.

5 members of the front line care staff.

The Company Directors.

The Operational Manager (Registered Manager).

The Care Manager.

Supervisor.

Support Supervisor. Coordinator. Support Co-ordinator.

All of the above information was taken into account during the inspection process and was reported on. For the purpose of this report, people using the care service will be referred to as 'customers' - a term used most often within the service inspected.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

What the service has done to meet any requirements we made at our last inspection

The requirement

The service provider must ensure risk assessments for customers are reviewed on a minimum 6 monthly basis or less if required. This is to comply with the Scottish Statutory Instruments (SSI) 2011 No 210, Welfare of users 4.1.a Timescale: Within a 4 week period on receipt of this inspection report.

What the service did to meet the requirement

Evidence in customers support plans that we sampled that risk assessments were reviewed and updated regualrly and at least 6 monthly.

The requirement is: Met - Within Timescales

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Flectronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The Care Inspectorate received a fully completed self assessment document from the provider. This was completed to a high standard with relevant information included for each heading that we grade the services under.

The provider identified what it thought the service did well, some areas for development and any changes it had planned. This self assessment included good examples of how people using the service were involved in the delivery of the service and how using the service has impacted upon the lives of the people using it.

Taking the views of people using the care service into account

We asked the service to distribute 50 Care Standard Questionnaires to a sample of people using its service. We received 17 completed questionnaires.

All respondents (100%) agreed that overall they were happy with the quality of care.

Other findings were:

- * 100% agreed that staff treated them with respect.
- * 100% knew the names of the staff providing their support.
- * 100% said they were confident that staff had the skills to support them.
- * 89% agreed that the service checked with them regularly that they were meeting their needs.
- * 94% said that staff had enough time to carry out the agreed support.
- * 100% agreed they had a personal (support) plan which contained information about their support needs.
- * 94% agreed that the service asked them for their opinion about it could improve.
- * 94% of respondents knew how to use the service's complaints procedure.

We visited customers in their homes and spoke to others on the telephone. Comments and opinions offered by customers were very positive, comments included:

'Staff are nice - charming'.

'We had 3 separate recommendations for the company'.

'They are very good to me'.

'Delighted with the service'.

Further comments have been included in the body of this report.

Taking carers' views into account

Some of the returned Care Standard Questionnaires were completed by relatives. Comments included:

'I am filling in this form on behalf of my husband who has had Bluebird carers for more than a year now. We are both delighted with the standard of care. Each carer comes in with a smile and treats my husband very well. It is very good for me to know my husband is in good hands if I am not available. I have already recommended Bluebird Care to other people'.

'Over the year we have had too many different carers. We are told that this is being rectified in the next few weeks. Without exception, they have been delightful, caring and competent. The office staff are a pleasure to deal with and if our first comment was attended to we would be 100% happy'.

We did not meet with relatives during the Inspection.

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

The information provided by the service in their self assessment detailed the policies, procedures and work practices in place that enable people who use the service and their relatives to be involved, in all aspects of service delivery and development. We were able to confirm this during the Inspection.

Since the last inspection of the service, the Bluebird Care franchise had introduced their customer involvement strategy, detailing the aims and objectives of involving customers in assessing and improving the quality of the service provided.

The aims and objectives of the strategy are:

- * To give customers and staff a real say in the services that they offer.
- * Take account of the views and experiences of staff and customers when making decisions about how the services are delivered and how they can be improved.
- * Make sure they provide high quality services that respect people's diverse needs and promote rights to dignity and respect.

We looked at some evidence in terms of how the service works in line with this strategy.

All customers that we met had a care plan in place. Customers had been involved in the planning of their support and were then provided with detailed information about the ways that this would happen.

All customers were aware of why this plan was important and they provided positive

feedback on the level of detail and consideration that had gone into this plan. One customer told us:

'The whole family sat around the table, to set out the care plan, the time spent on it was fantastic' and 'The initial assessment was a careful assessment, I was asked to lead on what my needs were. There was re-assurance about my privacy'. The plans we saw were a good reflection of that person and how they wanted to be supported. In the plans we also saw regular correspondence from the company. This included updates on the staffing in the office, on the introduction of the 'I Connect' System and feedback after customers had completed surveys and questionnaires. Care plans are reported on further under Statement 1.3.

We saw evidence that the services takes account of customers views and needs when reviewing their care and support packages. In one situation, the customer was hesitant and worried about staff supporting them with their personal care. The way that the plan was recorded and reviewed meant that the customers concerns were at the forefront - and it was evident from staffs' recordings that the customers' anxieties were recognised.

Customers were encouraged to give their views about the services they received. We looked at the findings from the customer satisfaction survey the service undertook in February and August 2013. The majority of the responses were very positive. If concerns were identified or suggestions made, the manager responded to each customer individually. They were thanked for their contribution, and a detailed reason or solution provided to their comment. The feedback was split into categories so that the service could identify patterns in the feedback. See Areas for Improvement.

The service publishes a regular news letter for both staff and customers. This provided relevant information on the developments and aims of the service. In the winter edition, re-assurance was given that the service was planning for poor weather and contingency plans were in place. Customers were asked to inform the service of what they thought they would need and what (if any) local support they had in place.

We saw that good information was provided about the gifts & gratuities policy and what this meant for customers and staff. Customers were invited to vote for 'carer of the year' and ballot papers attached, customers provided positive feedback about this - and told us how important it was the company valued the staff - 'they do things to reward staff and that peels off to benefit the clients'.

In the newsletter an invite was extended to attend a 'Rabbie Burns celebration event'. We met with customers who had attended this; they said that this was an excellent outing where they got to meet the Directors as well as many other office staff. Local school children attended and recited poetry and this event allowed some customers their only chance to be involved in this national celebration.

In files we saw evidence of regular contact with families/carers. This was mainly about scheduling and work patterns but we saw that the service was very flexible and responsive. As an example - one family had written 'please can (carers name) go at every visit, we found that (customers name) responded better than ever to this and can it be 1030 every Wednesday' the service responded and agreed that this would happen. The way that the service responded was always professional, courteous and with the intent of meeting the customers' needs.

All customers that we met with told us that there was regular communication with the office and management team. Customers were able to give examples of contacting the office if they had concerns and the management responding promptly. We also saw evidence that customers/families concerns and comments were discussed during staff meetings. This was very good practice and meant that all staff were informed and involved in making changes for the customers benefit.

The service published their complaints procedure and we saw a copy of this in all the customers' plans when we visited their homes. This informed customers that they could make a complaint either to the service or the Care Inspectorate. Information was also provided on other organisations such as the United Kingdom's Homecare Association, Advocacy services and Edinburgh City Council's duty Social Work system. Customers' plans also contained a copy of a 'concerns and complaints 'form with guidance.

From the evidence sampled, we found the performance of the service was very good in relation to this statement.

Areas for improvement

There was evidence that more 'strategic' information about the company was passed to customers through individual letters and newsletters. The service should consider how customers can become more involved in influencing the future of the service, as example, more direct involvement in the 'service Improvement plan'.

In their self-assessment, the service identified the benefits of introducing a participation strategy specifically for the staff team. This will be considered at the next Inspection.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We ensure that service users' health and wellbeing needs are met.

Service strengths

From our inspection of the documents available to us (including care plans, daily recording notes, risk assessments, records of reviews) and the discussions with the customers and the staff we met, our conclusion was that Bluebird Care (Edinburgh) was providing an excellent service in meeting the care and support needs of its customers.

The strengths' identified under Statement 1.1, 3.2, 3.3 and 4.4 are relevant to this Statement.

The majority of customers using Bluebird Care (Edinburgh) have chosen to use this service and have approached the service directly, these customers told us that they can use a combination of 'Direct Payments' and personal funds to purchase their care. Other customers have been assessed by the Social Work Department individually and it has been agreed that Bluebird Care can best meet that individual's needs. The service does not contract full 'rotas' with the Local Authority and this means that Bluebird Care are in control of the delivery of the service and the timing of the visits. There was very strong evidence that this approach empowered and enabled the service to deliver a high quality service.

When a request was received for the service, a senior staff member visited to complete an assessment of need. The assessments and care plans we looked at were detailed and gave a clear picture of that individuals care and support needs. Customers confirmed that the assessment was accurate and met their needs, this included the preferred times of visits. This assessment was reviewed 4 -6 weeks after the service started and customers asked if it was meeting their needs and what could be improved upon.

Time keeping and consistency was a key strength of this service. The staff team and customers we met with told us that there was a high level of consistency in the staff who visit. All customers (or families) are provided with weekly work schedules with details of the carers' visiting and the expected time of the visit. We have reported under Statement 1.1on the methods used by the service to communicate with relatives and carers. As a result of this evidence and further discussion we recognised that the frontline staff and management team valued the importance of customers and families knowing which staff to expect and at what time.

We looked at a sample of seven customers care plans. There was specific detail in the plans that informed the reader about that individual, their personal interests, their background and the things that were important to them now. The plans provided clear direction to the staff to enable them to provide care and support in a consistent manner. The way that the plans were written provided excellent examples of person centred care planning, they focused on the outcomes individuals wanted and how these could be achieved.

We concluded that these plans were informed by the needs of the individual, focused, accessible and clear to follow and most importantly shaped by what the individual wanted to achieve by having the support and care in place. As example, in one plan the detail about the quality of care to be offered was of real worth. This included information about the customers' preferences, including positioning in bed, how they liked to prepare for using the shower and reference was made to room temperature. Likes and dislikes recorded included preferred cosmetics brands and nice detail about the use of perfume.

Through assessment and care planning we could evidence that the service understood the importance of being informed of customers' needs and wishes. As example, where appropriate they discussed with customers their 'end of life' wishes and there was documentation in place to support this. The service could also demonstrate and evidence the support systems (including legal) required when customers lacked the capacity to make informed decisions.

Staff were aware of the importance of focusing on individuals strengths and encouraging people to remain active and maintain hobbies and interests. One member of staff gave an example of spending time encouraging a customer to increase their mobility - and over time they have built up how far they can walk; importantly they have significantly increased their confidence. Another customer was supported to be involved in the 'Race for Life'. This aspect of the service is vital to promote people's independence and prevent isolation, enabling people to remain involved in community life.

From the files we sampled, we saw that customers' care and support needs had been reviewed on a six monthly basis. Plans were regularly updated to reflect any changes identified and agreed at the review stage.

There was evidence that care staff recognised changes in customers health or general behaviour, reported this to management and where appropriate, other professionals then provided support and assessment. The service could demonstrate how they responded to concerns about customers' well-being and the action taken.

From the evidence sampled, we found the performance of the service was excellent in relation to this statement.

Areas for improvement

In their self-assessment the service identified continued training for staff in dementia support as a priority for meeting customers' health and well-being needs.

They also identified the importance of customers eating and drinking well - and aimed to promote the support they could provide. We saw that is some situations (mainly when requested by families) that the service recorded customers food and fluid intake. We discussed with the manager occasions when more detailed fluid

recording may be required, the manager told us that more specific healthcare assessment tools were available in these circumstances.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 6 - Excellent

Statement 2

We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

Service strengths

To assess this statement we met with frontline care staff, office based staff and customers, examined staff files and evaluated the Induction training. We concluded that the service demonstrated an excellent staff recruitment process which met the standards for safer recruitment in social care.

We sampled 4 staff files and this showed us that the service had followed a robust structure for safe staff recruitment. This process included:

- * Application forms fully completed.
- * Formal interviews, which were recorded.
- * Copies of relevant qualifications and previous training records.
- * Evidence of employment history.
- * Two employment references.
- * One character reference.
- * Photographic identity checks.
- * PVG (Protection of Vulnerable Group) checks.
- * System in place for updating staffs PVG checks.
- * Evidence of registration with relevant professional bodies i.e. SSSC (a previous recommendation).
- * Equal Opportunities monitoring form.
- * Evidence of eligibility to work in the United Kingdom.
- * Recruitment files were audited and 'signed off' when the individual was ready to begin working with customers.

Management told us that they were very selective when recruiting staff. They informed us that the wanted to recruit staff with a good value base who were interested in developing personally and professionally and who would want to contribute to shaping the service and the future of social care. The staff team that we met - across the organisation - demonstrated these values and beliefs and this is reported on further under Statement 3.3.

Staff knew that there was a robust selection process and strongly disagreed that 'anyone can be a carer'. Staff knew that they were observed closely during Induction training and that management were assessing if individuals could meet the expected standards in terms of their values, course work and on-going learning and development.

We met with 3 members of frontline staff who had started with Bluebird Care within the last 3-4 months. They told us that their induction to the service consisted initially of 5 days office based training followed by a period of working alongside an experienced care worker.

Staff told us that their Induction training included:

- * Relevant legislation and policies including the National Care Standards and the role of the Care Inspectorate. Staff told us that 'role play' featured throughout the week and staff had to be an 'inspector' and comment on the quality of care they observed.
- * Adult Support and Protection training 'tell someone'.
- * Load management theory and client handling techniques' staff gave us examples of how they had all been the 'customer' and had been hoisted or assisted to move and they told us how this made them feel.
- * Dementia awareness.
- * First Aid.
- * Continence Awareness.

Staff we met confirmed that they could not work with customers until their PVG check had been returned, this meant that Customers protection and well being was promoted.

Staff understood that their practice would be reviewed throughout a 12 week probationary period and, that additional training and support, as well as an extension to this timeframe could be arranged. This meant that staff should not be supporting customers when they felt under confident or did not have the appropriate skills.

Staff were aware that their practice would be monitored by senior staff through 'spot checks' and, that their ongoing development and standards would be discussed through supervision and appraisal. The new staff had been told to contact management with any concerns and felt confident that they could.

Staff told us:

'The training was really good, but reality is different - everyone is individual and we must remember that - I asked for some extra support, it was no problem'.

'I've had a weekly meeting and my practice observed - so far so good'.

'I'm totally blown away in comparison to other companies, the manager knows her stuff and I'm really impressed'.

'We were very aware of being in the clients shoes - we even had sessions on practical communication - nothing was rushed - there was good time allocated'.

'There is a good selection process and a good standard of staff'.

'The on call is very good - they are interested in my welfare and the clients'.

'Staff here have real skill and the standard of practice is good'.

'The management, the support and the training are all a real strength'.

From the evidence sampled, we found the performance of the service was excellent in relation to this statement.

Areas for improvement

The service has previously had customer input with staff training and recruitment but no customers were currently involved. This is an area that the service told us would be re-assessed and customers informed of the available opportunities.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths

To assess this statement we met with new and experienced staff, met with customers, considered the feedback from families, examined staff records and evaluated the training systems. From the evidence sampled, we found the performance of the service was excellent in relation to this statement.

When we met staff at Bluebird Care (Edinburgh) we met a very strong, motivated, professional and skilled staff team who work together to benefit the customer and ultimately the organisation. Staff at all levels recognised the part that they play in delivering a high quality service and we found that staff are motivated and enthusiastic about the future of the care service.

The Registered manager has responsibility for both the Edinburgh and Glasgow South branches of Bluebird. Since joining the organisation in January 13 they have

developed partnership working with the SSSC and Scottish Care. This close working has enabled to service to lead in new developments in the care sector. An example of this is the 'Stepping into Leadership' programme promoted by the SSSC. This programme encourages and enables effective leadership at all levels within care teams - with staff recognising the small changes that they make contribute to improved outcomes for customers and overall changes in the organisation.

Staff told us about how introducing this ethos has changed things on a daily basis. Office based staff gave examples of the frontline care staff being more confident, making more independent decisions and being less dependent upon office staff for solutions. In one case, a staff member was insistent that a customer required hospital admission and this was met with resistance from health professionals, the staff member was insistent that something was 'not right' about the customer - insisting on the hospital admission proved to be most appropriate. Other examples included staff contacting professionals involved with customers and asking for a visit etc. - then informing management of what they had done and the reasons it was required. On other occasions staff had been more confident in suggesting changes to the care package - or the way the care is approached - as they are confident that this will improve the outcomes.

The service had a comprehensive training plan in place to further support staff in meeting the needs of those using the service. Training was delivered by senior staff in the service with recognised 'train the trainers' qualifications. Staff that we met with confirmed that there was training available on a regular basis. Several staff told us that the training was of a very high standard but that is was flexible, frequently reviewed and adapted to meet the needs of customers or changes in the care sector. The mandatory training required to meet the needs of adults and older people was in place and this was enhanced by specific training to meet customers' needs. The service regularly worked alongside health professionals and contacts with specialists meant that regular training was provided in more complex areas including motor neurone disease, multiple sclerosis and Parkinson's disease.

The service invited customers and families into the service to inform them of the training and development available to staff. This included demonstrating some of the manual handling training that was delivered. This was a good example of best practice which informed the customers of the knowledge and skills to expect from the care staff.

The service had given real consideration to staff having the knowledge and skills to support people living with dementia. The service worked with Alzheimer's Scotland and delivered 'Coping with Dementia' training to all staff. This training is linked to the Promoting Excellence in Dementia framework promoted by the SSSC.

At the time of the Inspection, 8 staff had attended accredited training through Stirling University and this opportunity would be available to more staff in the team. One of

the supervisors gave an example of a carer contacting the office for advice. The customer had a diagnosis of dementia, on the day of the visit the customer had not opened their eyes or communicated, the carer was unsure how to encourage them to take their prescribed medication. The coordinator suggested that music or song may relax the customer - the coordinator encouraged the carer to sing to the customer - and the coordinator also did so via the phone. After some time, the customer was relaxed, opened their eyes and engaged with the carer who was then able to provide the care and support required. This was an excellent example of using learned knowledge to improve the outcomes and relationships for both the customer and the carer.

It is a legal requirement that by 2020, 'care at home' support staff, complete a Scottish Vocational Qualification (SVQ) in order to register with the regulatory body for the Scottish Social Services workforce (SSSC). The management and staff were committed to ensuring staff met this requirement and we could evidence that staff across the organisation were undertaking SVQ courses appropriate to their role. Staff we met with confirmed this and commended the company for promoting and encouraging staff development.

All staff we met with had a clear understanding of their roles, responsibilities and of the professional standards expected from them. They confirmed the structure in place for regular team meetings, supervision and appraisals. We considered supervision and appraisal records during the inspection. These confirmed that there were regular opportunities for reflective discussion on practice as well as the opportunity to discuss changes in customers' needs, and developments in the overall service.

We saw several examples of staff development being encouraged and nurtured. The Directors of the company strongly believed that being within the care sector is a career choice with a development path available. We saw evidence that the staff team were recognised for their professionalism and dedication. The value the company placed upon the care staff was also recognised by the customers.

Customers told us:

'They obviously vet their staff very carefully'.

'Staff are very considerate and cautious about confidentiality'.

'Staff say they have very good training'.

'No difficulties, time keeping is very good'.

Staff told Us:

'Stepping into leadership has brought the team together - we are all on a level

playing field.'

'I've had good support from the directors'.

'We are encouraged to keep up to date'.

'We strive to provide the best standard of care'.

'Leadership is really encouraged, we have attended conferences, it allows you to see things further'.

'We are always asked our opinion - as example, where should we place job adverts'.

'There is a high standard of manual handling practice'.

'I used to think I was too old for more study, but 'stepping into leadership' has encouraged and motivated me'.

'There are exciting things ahead as we plan to become a more specialised service'.

'I feel privileged to work here'.

'You are definitely encouraged to think outside the box'.

From the evidence sampled, we found the performance of the service was excellent in relation to this statement.

Areas for improvement

In their self-assessment the service identified SSSC registration of the workforce as their main area for progression.

Staff and documentation confirmed that staff had their practice observed regularly. However, one staff member felt that this should be more regular. The management agreed that individuals had different support needs and told us that this matter would be raised through staff meetings and supervisions.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths

The methods used by the service to involve customers in assessing and improving all aspects of the service, including management and leadership are detailed in Quality Statement 1.1.

Areas for improvement

The Areas for Improvement identified for this statement are included in Theme 1 Statement 1 Areas for Improvement.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service strengths

The service used a variety of ways to assess the quality of the service they provide and identify where improvements or developments were needed, including:

As reported under Statement 3.3, the service had a plan in place to manage staff supervision, appraisals and observations of staff practice. There were regular opportunities for individual staff to meet with office based staff (including the directors). Staff told us this was very positive, as it meant that they had regular opportunities to feedback to all staff involved in the company.

The high level of informal and formal support enabled staff and management to reflect on the staff members practice and identify further training or support required. The supervisors and coordinators we met with gave several examples of offering staff additional training or support as required - and then told us how this enhanced the

quality of the service for the customer and improved the confidence and knowledge of the staff team.

There are regular reviews and contacts with customers (and their relatives) at which time their views on the service are sought. This means that those using the service can identify changes required, comment on the quality of the staff and the service and set further goals. We also saw that the senior team use that opportunity to audit the care plans and update documents such as risk assessments. Staff confirmed that if they contacted the management with concerns about customers - that reviews did happen and they shared examples of changes made.

Auditing systems were also in place to measure the standards provided by the service, this included monitoring staff practice, monitoring of staffs recordings and the checking of care plans and personnel files. The role of 'support supervisor' had recently been introduced. As part of that role, the supervisor audited record keeping including recording of medication administration. We saw that when areas for improvement were identified that all staff were written to or individuals contacted directly.

Since the last Inspection the service has introduced a system called 'I Connect' that alerts the management if the staff are late for planned visit. The management told us this allows them to contact staff to check if there are difficulties and then inform the next customer if required. If a customer does not require their service the managers can inform staff via the mobile phone. Staff are informed of work schedules and care plan changes through the phone system and staff provided very positive feedback about the way that information was shared. Staff also told us that this system gave them re-assurance as lone workers.

The service had employed a 'support coordinator' to specifically monitor this system and evaluate how this was meeting the customers and organisation's needs. Staff and management told us that this had enhanced the service for customers, they could identify quickly if changes were required - such as additional travel time, additional time for care visits or changes to the staff team. Customers and families also had a way to measure that they were receiving the agreed lengths and times of visits. The service also had staff in place to support frontline care staff and monitor 'I Connect' out of hours.

Under relevant statements we have reported on the partnership working between Bluebird and organisations including the United Kingdom Home Care Association (UKHCA) and Scottish Care. The management told us that the company benefits from access to the services they provide including training resources, leading policies, best practice and legal advice. We could evidence how this partnership supports the development of a robust quality service.

Bluebird Care (Edinburgh) have been recognised as one of the top care companies

through nominations and awards recognising the standard of care they deliver to customers and the standard of training and support provided to the staff team.

This year the company have entered the 2014 SSSC Care Accolades. This ceremony celebrates and promotes excellent practice and workforce development in social services. The company has focused on the way that 'Stepping into Leadership' has empowered staff, changed the way they measure the quality of the staff team and encouraged staff to focus more on the outcomes for customers and families. We concluded that by promoting their own practice the service has recognised how innovation and development enhance the overall quality of the service for both the customers and staff team.

Staff told Us:

'They are here for their employees and that is not just work related'.

'It is very organised; there is a big focus on contact with the customer'.

From the evidence sampled, we found the performance of the service was very good in relation to this statement.

Areas for improvement

During feedback we discussed ways that the service could improve how they statistically evaluate information that could lead on to further action being planned. As example, in the February and August customer surveys, some similar areas for improvement were identified. We saw evidence of the ways that the service responded to individual customers - but could not measure easily if this approach was improving this aspect of the service for other customers. This was also relevant in other areas including staff feedback and questionnaires.

We discussed with the Directors and Registered Manager how more statistical evaluation of progress made/areas for improvement would enhance the 'Improvement Plan' for the service.

The service told us that that they are committed to ensuring the quality assurance and audit systems in place are relevant and effective as the service continues to develop. This will be followed up at the next inspection.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

| Inspection report continued | |
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4 Other information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

No Additional Information.

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

| Quality of Care and Support - 5 - Very Good | | | |
|--|---------------|--|--|
| Statement 1 | 5 - Very Good | | |
| Statement 3 | 6 - Excellent | | |
| Quality of Staffing - 6 - Excellent | | | |
| Statement 2 | 6 - Excellent | | |
| Statement 3 | 6 - Excellent | | |
| Quality of Management and Leadership - 5 - Very Good | | | |
| Statement 1 | 5 - Very Good | | |
| Statement 4 | 5 - Very Good | | |

6 Inspection and grading history

| Date | Туре | Gradings | |
|-------------|-------------|---|---|
| 6 Mar 2013 | Unannounced | Care and support Staffing Management and Leadership | Not Assessed 5 - Very Good 5 - Very Good |
| 28 Sep 2012 | Unannounced | Care and support Staffing Management and Leadership | 4 - Good 2 - Weak 2 - Weak |
| 7 Oct 2010 | Announced | Care and support Staffing Management and Leadership | 6 - Excellent Not Assessed Not Assessed |
| 20 Aug 2009 | Announced | Care and support Staffing Management and Leadership | 5 - Very Good 5 - Very Good 5 - Very Good |

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

- که بایت سد ریم رونابز رگید روا رولکش رگید رپ شرازگ تعاشا هی

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

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