

Four Dozen Limited

# Bluebird Care (Portsmouth)

## Inspection report

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## Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

Bluebird Care (Portsmouth) is a domiciliary care agency. It provides care to people living in their own houses and flats in the community. The inspection took place on 21 and 22 March 2018 and was announced. We gave the provider two working days' notice to ensure people and staff we needed to speak with were available.

Bluebird Care UK is a national franchise. A franchise is when a franchisee (the provider) has bought the right to sell a specific company's (the franchisor's) products in a particular area using the company's name. At the time of the inspection visit Bluebird Care (Portsmouth) provided care and support for up to 37 people living in their own homes. Approximately forty five per cent of the care packages were commissioned by social services, the remaining care packages were privately funded

The service's registered manager had very recently left the employment of Bluebird Care (Portsmouth). The owner confirmed they were actively recruiting to fill the position and hoped to have the position filled as soon as possible. There were robust contingency plans in place to ensure the service was well managed in the interim period. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Relatives and people we spoke with were very satisfied with the service provided by Bluebird Care (Portsmouth). We received positive feedback from the local authority and health care professionals that were involved with the service, comments included, "Bluebird Care was always a first call, they respond quickly to all requests in an honest and professional manner."

People told us they felt safe with the care staff and staff knew the correct procedures on how to respond and report potential abuse. People said staff treated them with respect and dignity and were friendly, caring and professional.

Staff were given enough time to provide effective care and support to people and told us they felt very well supported by the manager and the management team. There was a robust recruitment process for staff which ensured people were cared and supported by staff who had been safely recruited.

Staff received regular training and supervision which ensured they were provided with the relevant skills and support to develop their role and provide effective care and support for people in their own homes.

Medicines were managed safely.

People's rights were protected because staff and management had a working knowledge of the Mental Capacity Act 2005.

Staff understood people's care plans and provided individual support and care. People and staff told us communication within the company was good. Staff said there was always someone to speak to if they needed further advice and guidance. Staff said they felt well supported and appreciated the open and honest culture and style of management.

There were robust quality assurance systems and a range of policies and procedures to enable people to receive safe, effective care and support in their own homes.

The service actively engaged and supported the local community. They had implemented a variety of events, incentives and schemes to benefit a range of people and help them improve their health and well-being. They had a range of policies and procedures to ensure all people and staff benefited from the best possible support and care.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

Good ●

The service was safe.

Medicines were managed safely and risk assessments were carried out to ensure that people and staff were protected from avoidable harm.

Systems were in place to protect people from harm and abuse. Staff knew how to recognise and report any concerns.

Care workers were recruited safely and there were sufficient staff with the right skills and knowledge to meet people's needs.

### Is the service effective?

Good ●

The service was effective.

People were supported by staff who were themselves supported through regular supervision and training.

People were supported to have access to healthcare as necessary.

People were supported to eat and drink if this was required

### Is the service caring?

Good ●

The service was caring.

Support was provided to people by staff who were kind, caring, friendly and compassionate.

Staff understood how to support people to maintain their dignity and treated people with respect.

People were kept informed about any changes to their service.

### Is the service responsive?

Good ●

The service was responsive.

People received the care they needed. Care and support plans

reflected people's individual needs and were regularly reviewed and updated.

The service had a complaints policy. People knew how and who to complain to if needed.

People's views were sought.

### **Is the service well-led?**

The service was well led.

There was a positive, supportive culture. People and staff were confident to report any concerns to the management team and felt valued and supported.

There were robust systems in place to monitor, assess and improve the quality and safety of the service provided.

The service engaged and supported the local community and had formed good working relationships with Health and Social Care professionals

**Good** ●

# Bluebird Care (Portsmouth)

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 21 and 22 March 2018 and included visits and phone calls to people and their relatives who use the service. We gave two working days' notice of our visit to ensure the people we needed to talk with would be available. The inspection was conducted by two Care Quality Commission inspectors.

Before the inspection the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We reviewed the PIR and other information we held about the service; this included incidents they had notified us about. We also looked at the information we had received from notifications made to us by the service. Additionally, we contacted the local authority commissioning teams and five Health Care professionals to obtain their views of the service.

We spoke with eight people on the telephone and visited and spoke with three people who received support from the service. We spoke with five office staff which included the owners of the service, the HR and Quality Director and the Care and Operations Director. We also met and spoke with two care staff and spoke to a further two care staff on the telephone. We reviewed in depth, four people's care and medicine records in the office and with their permission, the records for three of these people that were kept in their home. We also saw records about how the service was managed. These included three staff recruitment, training and supervision records, staff rotas, staff training records, accident and incident records, complaints, audits and quality assurance records as well as a range of the provider's policies and procedures.

## Is the service safe?

### Our findings

Everyone we spoke with gave positive views on the service. People told us they felt safe with their care workers who they found to be friendly and professional at all times. One person told us, "They have never let me down, if they are running a little late they always call me to let me know, they are friendly and kind, literally I can't fault them, they have made my life so much easier." Another person said, "I can't believe how good they are, they are wonderful." One person said, "They are very good, very helpful, always on time, they even got to me in the snow. They are always there for me."

People were protected against the risks of potential abuse. There were detailed policies and procedures in place to help keep people safe from abuse. Staff spoke knowledgeably about the signs that may indicate a person was at risk from potential abuse. Staff told us, and records showed, they had received safeguarding adult's awareness training which was refreshed at the required intervals. Staff demonstrated an understanding of how to keep people safe and their responsibilities for reporting accidents, incidents or concerns. Records showed the correct procedures had been followed when the service reported various safeguarding concerns.

When people had accidents, incidents or near misses these were recorded. The quality manager completed a detailed review and analysis of these records to look for developing trends. Resulting actions were shared with staff to ensure people received their on-going care and support in a safe way.

The provider had a system in place to check and review when people's equipment such as hoists, pressure mattresses and mobility aids required servicing. This helped ensure people's safety and reduce the risk of injury.

Detailed risk assessments were in place to support people to remain safe whilst retaining as much independence as possible. Records showed people's home environment had been assessed to ensure people and staff were protected from avoidable risk. Where people required support to mobilise, for example to move from their bed to their chair with the use of a hoist, clear detailed guidance was available for staff to ensure the person was supported safely and comfortably.

There were arrangements in place to keep people safe in an emergency. There was an on call system for people who used the service and staff to contact in emergencies or where they needed additional support. We asked people if they knew how to contact the office if needed. One person replied, "Oh yes, that's easy the number is right here. I have phoned them once and they sorted my problem straight away."

We reviewed the services contingency plan which was in place to manage any emergencies. The previous weeks' bad weather had led to this plan being put into place. Staff explained how they had ensured people received their care and support throughout the time the snow was around. The service had already reviewed and analysed their performance during the severe weather and how it had impacted on their ability to deliver care and support to people. Clear actions and suggestions had been made and shared with staff to ensure any learning from this specific event would be put in place to reduce future potential risks.

Suggestions included hiring 4x4 vehicles and implementing walking rounds as well as practical suggestions such as a supply of salt, shovels and extra supplies of hot food and water.

People told us they were enough staff with the right skills and knowledge to support and meet their needs. People said care workers were almost always on time, if care staff were a little delayed they said they received a phone call letting them know they were on their way. One person told us, "They have been very good actually, they have never not turned up and they are never late." Another person told us, "If they are going to be late they call me straight away, last year one call was running late and they called me regularly to let me know what was happening. The office staff even called me the next day to explain why that call had been late."

Where possible people received their care from a consistent small team of care staff that they had got to know well. One person said, "I get different carers visiting me, but I don't mind that, they are all very good, I'm quite happy with the service." People told us and records showed that visit rotas were sent out to people each week. These showed which staff would visit and the times and length of the visits. The majority of people said this system worked well and was clearly understood. Two people stated they had experienced some problems with their rotas but they had raised this with the office staff and they knew the problems were being investigated. The service was piloting a new electronic software programme on behalf of Bluebird Care UK and said there had been some early problems with the accuracy of the rotas. They were working to address the anomalies and were keeping people informed of the outcomes.

Staff told us they were given realistic travel times to ensure they reached their visits to people on time. Lengths of visits started at thirty minutes, staff said they were given sufficient time during their visits to give people quality support and care. People told us care staff did not rush them and always stayed for the full length of their visit. One person told us, "They do everything I ask them, if they have any spare time they always ask what I would like doing, and get on with it straight away." And, "They never leave before their time." Another person said, "I find them all very friendly, they take time to get to know how I like things done and I can have a chat with them, they are very, very good."

There were robust recruitment policies and procedures in place. We looked at the recruitment files for three recently recruited members of staff and found that the relevant checks had been completed before staff started working at the service. These checks included up to date criminal record checks, photographic confirmation of identity, full employment histories, fitness to work statements, interview notes and previous employment references. This made sure that people were protected as far as possible from individuals who were known to be unsuitable to work in the care industry.

People's medicines were managed and administered safely. Staff were trained in administering medicines and their training was updated periodically to ensure they remained competent to administer medicines. Staff had regular spot checks completed on them which included medicine administration and infection control procedures.

People's Medicine Administration Records (MARs) were electronically generated and colour coded for ease. Where people had prescribed creams, there were clear instructions for staff on how to apply these. One person told us, "They are really good with my creams, they always make sure they are used and they are nice and gentle with them." People's MARs contained sufficient detail and were complete.

There was a system for staff to follow if people were having 'PRN' as needed medicines, such as pain reducing tablets. This meant the amount of 'PRN' medicine people received was recorded to help keep people safe.



People's allergies were recorded and if people needed time specific medicines, for example such as medicines for managing the symptoms of Parkinson's disease there was a system in place to ensure visits were scheduled to enable these medicines to be administered to people at the correct time.

Staff told us they were supplied with their personal protective equipment such as gloves and aprons to ensure they were able to care and support people safely. Spot check observations conducted on staff covered the appropriate use of PPE and their understanding of infection control processes. People and relatives confirmed care staff always wore their personal protective equipment which ensured the risk of cross infection was minimised.

## Is the service effective?

### Our findings

People spoke positively about the care staff that provided their care and support. One person said, "I've had three different care agencies, these are easily the best agency...everyone chips in to help, even from the office". And, "Any changes in the roster they consult us and accommodate our wishes. They don't have to but sometimes they will help us a bit more, they go a bit over and above, would rate them 10 out of 10." Another person said, "They all know the care routine well, we've never had a bad one...would give them 20 out of 10!"

We received positive written feedback from health professionals who had dealings with staff from the service. Their comments included, "My experience of working with Bluebird Portsmouth has been very positive. They are always quick to respond to emails and have always been very helpful and friendly on the phone. They are able to offer timely start dates for new packages of care and arrange changes in current client packages." And, "They respond quickly to all requests in an honest and professional manner. Any concerns or issues received a considered response and on several occasions have amended their timetables to accommodate clients requested times.

People were supported by staff who had received a range of training to develop the skills and knowledge they required. Staff told us they completed a four day induction training programme which led to the care certificate, a nationally recognised induction qualification. Staff told us they had found the training supplied by Bluebird Care Portsmouth to be thorough, practical and of a good quality. Staff confirmed they shadowed more experienced staff for a while before they started to care and support people on their own. One person confirmed this, they told us, "If a new carer starts, they always come in to us first with someone we already know."

Training was provided by the service in a practical one to one setting as well as through the use of computer sessions provided by an independent training provider. One person told us, "Their training goes above and beyond. A previous agency we had, the staff were not at all well trained." Another person told us, "They employ the right staff."

One member of staff told us, "The training has been very good, it was useful and delivered well which meant we all got the same messages and it was pitched at the right level. I particularly enjoyed the practical training, this covered how to use the hoist correctly, basic life support and first aid procedures."

There was a clear system which showed what training courses staff had completed and which courses were scheduled for the future. Staff told us about the leadership programme the service was providing for staff which hoped to enhance their personal development for career progression.

Records showed some staff had participated in a 'Dementia Experience Workshop' run by the provider at their training hub. Staff had found the experience extremely valuable, with all the experiences contributing immensely to their understanding of what it is like to live with dementia. Staff had written their experiences of the workshop in a book for people to read. Staff comments included, "It was amazing, It brought home to

me how people living with dementia feel and what they must go through. Scary." And, "The virtual technique gave experience of how little people can hear us and see us around them. Also, how the dementia umbrella covers their whole personality. It makes us change our way of looking after them. It gave a very good practical knowledge...just thoroughly enjoyed the course."

The providers training schedule was up to date with all staff either having completed their training or dates allocated for training courses already booked. Training completed by staff included safeguarding, medicine management, equality and diversity, DoLS and The Mental Capacity Act 2005, infection control, moving and handling and fluids and nutrition.

Additional training was encouraged to enable staff to support people with specific health needs such as administering nebuliser's and use of percutaneous endoscopic gastrostomy (PEG). A PEG is a feeding tube that is passed into a person's stomach through their abdominal wall. It is used for people who may experience difficulty swallowing their food safely.

Staff told us they felt very well supported by the management team. Staff spoke knowledgeably about their roles and showed genuine commitment and interest in the people they supported and cared for. Staff received regular one to one supervision sessions which they said they found useful and helpful. Staff said they could seek advice and guidance from any of the staff and they were always given full support to carry out their role effectively. One member of staff told us, "I have been fully supported, everyone is very professional and helpful. Any concerns or issues I have they are dealt with straight away. They all work so hard to make sure everything is right for both the clients and the staff."

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

People's rights were protected because the staff acted in accordance with the MCA. Staff had a good awareness of the MCA and how it affected their work and had all received training in The Mental Capacity Act 2005. People and their relatives were involved in care planning and their consent was sought to confirm they agreed with the care and support provided.

People were supported with their health care needs and any changes in their health were discussed with them and a referral to their GP or other health care professionals such as occupational therapists was made if required. If people were at risk of becoming dehydrated or malnourished there was a system in place to monitor their food and fluid intakes to help ensure they received adequate nutrition. We received written feedback from a healthcare professional, which stated, "The carers were very skilled with providing support and were able to develop very good communication with [person] and were able to anticipate their care needs. They showed knowledge and skills to maintain safety when supporting them to eat to prevent choking."

## Is the service caring?

### Our findings

Every person we spoke with gave positive feedback regarding the staff and service provided by Bluebird Care Portsmouth. One person said, "They are all lovely people" and "You can have a good laugh and a joke with them, they never make me feel awkward." Another person told us, "All the guys and girls that come in are outstanding." And, "They are not just good, they are excellent."

The provider ran an initiative called 'A little bit of sparkle'. This was a programme that allowed care staff to nominate a person each month to have additional support, up to a couple of hours at no cost to them and which would increase their sense of well-being. This could cover a wide range of topics such as, supporting people to access the community, companionship visits and daily living skills such as shopping and visiting the barbers. One person told us the provider had taken them on a trip to London. They told us they had enjoyed it immensely and they had found it to be, "Wonderful". Another person had had support to help them with their overgrown garden.

Staff comments demonstrated they treated people with respect and dignity. Staff spoke knowledgeably about how people preferred to communicate and how they respected people's individual styles of communicating. One member of staff said, "I always listen carefully to how people say they want things done. I then let them choose how they want to be supported, so they feel comfortable with me." Staff told us they always made sure people's curtains and doors were closed when they supported them with their care needs. If people needed to be hoisted to move from their bed or chair, staff told us they ensured people's clothes were arranged appropriately to maintain their dignity.

Staff knew people well and understood how they wanted their care and support to be given. We reviewed people's visit schedules that were sent to them on a weekly basis. The schedules showed regular daily visits that were generally carried out by a small team of care staff. Generally, people told us they received their care and support from the same small staff team so they always knew the person that was supporting them. People told us that all the staff were friendly, kind and caring and they got to know the staff well due to the consistency of the staff teams visiting them. People confirmed new care staff were introduced to them by a known member of staff before commencing their care.

People's wishes were respected with the gender of care staff that supported them. They confirmed the care staff respected their privacy at all times and always asked their opinion on how they preferred their support to be given. One person told us their views had been listened to and acted upon when they had asked for a particular team of care staff. They told us, "The service has much improved over the last year or so. If I didn't have support I would struggle. In the past, before this owner took over, they didn't always respect my choice, now they try their hardest to make sure I have the care staff I like. They treat me respectfully and I feel involved with my support. They have been brilliant; they are the only care agency that have understood my condition."

People's records included people's personal histories, background information and likes and dislikes. This meant care staff would have specific knowledge about people and be able to talk about their hobbies and

interests with them.

Staff and people told us communication within the company was good. Staff meetings were held regularly and copies of the minutes were made available for all staff. This ensured staff who had not been able to attend the meeting were kept informed of all actions agreed.

Records showed and people told us that they were consulted about how they wanted their care and support to be provided. They said some office staff came out and saw them at times and they had completed questionnaires on the service they received from the carers.

## Is the service responsive?

### Our findings

We received positive written feedback from a selection of healthcare professionals and local authority commissioning officers. Their comments included, "Bluebird Care provide Portsmouth City Council with domiciliary care at a good level. They are always flexible when assisting with packages of care and try to accommodate as and when they can." And, "Bluebird are responsive. Members of the team at Bluebird continue to keep up good communications with us and have formed good working relationships."

A healthcare professional had written in to thank the team for a particularly complex package of care they had delivered, they stated "The care that was provided by your team was above the norm, due to the skills and care [person] received they were able to be at home longer than I would have expected, many thanks once again for your care and support."

One person told us, "I'm quite happy and content with them. They do everything very well and do everything I ask of them." People told us they were always kept informed if staff had been held up in traffic or were going to be a little late. One relative told us how useful they had found the service, staff and visit rotas they said, "It's meant such a lot having them help me, I could never manage on my own, they are all very friendly and very good. The rota's are very efficient and always make sense to me so I know who is coming when."

Before people started to receive a service from Bluebird Care (Portsmouth) people's needs were assessed. This meant the service could be sure they had staff with the right knowledge, skills and experience to provide people with safe and effective care and support. The provider had 'Five Golden Rules' for each person which asked what five things were important to them that were not related to care needs. Once completed this enabled staff to get to know people well and discuss topics that were important to them. People told us they had been involved in compiling their care and support records. This ensured care records contained personalised information that enabled care staff to care for people as they preferred.

During our visits to people we reviewed their care plans which were kept in their home. People confirmed that staff updated their care records when their care needs changed. Care plans were clearly written, detailed and gave good explanations for care staff regarding how people would like their care and support to be given. For example one person's care records stated, "I can wash independently, but will require support to wash my underarms, back and in-between my toes. Then I will require a cup of coffee, 3x teaspoons of coffee with one third water and a small amount of milk."

Care plans also gave clear instructions for staff when they entered people's homes, for example, "When you arrive you can park on my driveway. Upon arrival use the key safe to let yourself in, calling out to me to let me know you are here." If people had specific health needs in relation to moving and handling, clear, detailed information was included in their care plans to ensure staff mobilised the person safely and in the way they preferred. Daily records were detailed, written in a personalised way and included how people were feeling and what they had done during the day and what they had eaten and drunk.

Where people needed additional equipment and checks to maintain their health and wellbeing we saw

these were in place. Where people were at risk of developing pressure sores we saw they had access to the relevant pressure relieving cushions and mattresses to prevent such risks occurring. Some people wore safety pendants to alert people if they fell or had an emergency; we saw clear prompts were included in care plans for staff to make sure people's pendants were in place or in an area where people could reach them easily.

We looked at how the provider complied with the Accessible Information Standard. The Accessible Information Standard is a framework put in place from August 2016 making it a legal requirement for all providers to ensure people with a disability or sensory loss can access and understand information they are given. Staff spoke knowledgeably about the different ways people communicated. They told us how they read people's body language to determine if they were in pain. Staff explained they allowed people to speak at their own pace, did not rush them and checked they had understood them correctly.

The provider had recently introduced an electronic care planning and monitoring system. The system ensured all staff actions were recorded as they happened. This meant if staff were running late the system would send an alert to the office staff so that preventative action could be taken to ensure people received their specific care and support. Staff told us they had found the system to be really useful and allowed the service to react quickly to any unforeseen events. Care staff had the electronic system on their handsets which enabled them to feedback concerns or changes to people's care immediately. This meant the provider was able to offer a prompt service to people. If they wished people using the service could also access the system and ask questions of care staff or update any changes to their care. One person we spoke to said they had found the system to be, "Extremely useful".

People told us they knew the procedure if they needed to complain. One person told us, "This company are very, very good, they always make sure everything is done right. The agency always phone me if there are any concerns and keep me informed regarding [relative]. I have never had to complain. I would be straight on to them if I did, but I know they would sort any problems straight away. They have been fantastic."

The provider's complaints procedure gave clear advice and timescales for people to let them know what to expect if they had cause to complain. Written feedback from a local authority commissioning officer stated, "We do not receive complaints for the service, compliments are received from Social Workers and communication with Bluebird Care Portsmouth is always positive." The provider had received one formal complaint since they had taken over the business. This had been investigated and actioned in accordance with the provider's complaint policy.

People and their relatives were given the opportunity to comment on the level of service provided by Bluebird Care (Portsmouth) through a variety of ways, such as questionnaires, surveys and internet sites and reviews. Once analysed and reviewed any queries or weakness areas were followed up and actioned by the provider. The provider had completed a summary feedback report that showed people had expressed positive views about the service they received. Comments included, "Excellent support and provision of care once minor glitches sorted out" and "Wonderful service" and "Without exception Bluebird, in terms of both its operations and care workers, has been exemplary".

The provider had a system in place to ensure people were protected from discrimination. Staff spoke knowledgeably regarding the provider's equality and diversity policy that ensured people and staff were treated equally and fairly.

## Is the service well-led?

### Our findings

The service had an open, honest, professional and positive culture. People told us they felt the service was well managed with a clear management structure. One person said, "They have been very good. I know who to contact if I need to and I can phone at any time, they are always there to help."

The service's registered manager had very recently left the employment of Bluebird Care (Portsmouth). The owner confirmed they were actively recruiting to fill the position and hoped to have the position filled as soon as possible. There were robust contingency plans in place to ensure the service was well managed in the interim period.

Staff told us they enjoyed their roles and had been very well supported throughout their time working at Bluebird Care Portsmouth. Staff said, "They are always there for me if I need any support, it's been really good," Another member of staff told us, "I just love it, I started work in the care service because I wanted to make a difference for people. I have been very well supported with everything. If there are any issues they act on them straightaway. They're looking forward to making this the best agency in the area."

Staff and people told us they felt valued and listened to, they talked warmly of their care staff and the management team and said they enjoyed seeing them when they visited. Staff told us communication within the service was good. They spoke positively of the new software systems that had recently been implemented and told us they were working well and ensured communication was accurate and effective.

The provider had completed two staff surveys since they had taken over the business in March 2017. These had been split between existing staff who were experienced in working for Bluebird Care Portsmouth and new trainee staff. The survey was detailed and had resulted in staff highlighting a number of areas where additional training was required. The provider had reacted positively and quickly and had implemented further specific training courses for staff which had included; Stroke awareness, PEG, Epilepsy, autism and running the Dementia Experience day, which staff had found invaluable. Following the staff survey the provider had implemented the Leadership development programme and arranged for staff to take up vocational training programmes within Health and Social Care.

Throughout the inspection, staff showed passion and commitment for the service and the people it provided care for. They showed us what changes they had made and explained what made them proud about the service.

The provider had built links with the local community through attendance at a variety of community engagement events. These events included: a Zipwire Challenge fundraiser, a Tea Dance and a community advice event. They were also members of Portsmouth Dementia Action Group. The events had been well received. They provided free advice and a chance for people to access the community and have valuable social time meeting and getting to know other people in the local area.

The provider compiled a 'Bluebird Care Portsmouth Newsletter' that gave local information and



forthcoming events and news. This was distributed to people who used the service which enabled them to keep up to date with events and any changes in the service.

Senior management told us they greatly valued their staff team. All practice was underpinned by Bluebird Care Portsmouth's core values of: compassion, reliability, respect, dignity, teamwork and humour. The core values had been put forward by the staff and reflected the values staff felt were most important in ensuring people received the best care and support. Staff were recognised and rewarded for good practice with a variety of incentives, such as carer of the month, Bluebird Care Innovation Award and Employee of the Year. Incentive benefits included, flowers, chocolate and monetary bonuses to thank them for going the extra mile in their roles to ensure customers remained safe and supported.

There was a range of quality assurance systems in place to monitor and where necessary improve the quality of service being delivered. People's experience of care was monitored through completion of regular questionnaires, and spot checks on the way the care staff provided care and support.

Staff were knowledgeable about the providers whistleblowing policy, which was in line with current legislation.

There was a robust system of audits in place to ensure a quality service was maintained. Examples of audits included, incidents and accidents, staff supervisions and performance, environmental risks in people's homes and medicines. The audits gave an overview of the service and enabled any trends to be identified and actions taken to address any shortfalls. The provider audited their systems and processes against The National Institute for Health and Care Excellence (NICE). NICE provide national guidance and advice to improve health and social care.