

Blake UK Care Services Limited

Bridlington Lodge

Inspection report

126 Cardigan Road
Bridlington
North Humberside
YO15 3LR

Tel: 01262676611
Website: www.bridlingtonlodge.co.uk

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Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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Is the service well-led?	Inspected but not rated
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Summary of findings

Overall summary

Bridlington Lodge is a residential care home providing personal care for up to 20 young adults or older people some of which may be living with dementia. At the time of our inspection there were 16 people living at the service.

People's experience of using this service and what we found

People were happy and felt safe living at the service. People were relaxed in the company of their care workers. The majority of relatives made positive comments about people's safety and how the service was managed. Care workers understood how to prevent infectious diseases and were proactive in managing infection control.

The registered manager and care workers understood their responsibilities and had received training to enable them to identify and respond appropriately to safeguarding concerns. Risk assessments identified areas of risk and detailed the measures in place to reduce them. Environmental risk assessments were reviewed to maintain people's safety and equipment serviced in line with legal requirements. We observed care workers were able to meet people's needs in a timely manner. Incidents had been recorded in detail and managed appropriately.

Within the context of the COVID-19 infection risk, people were supported to have maximum choice and control of their lives and care workers supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported best practice.

Care workers felt the registered manager was approachable and supportive. They were confident about using the whistle blowing processes in place. The registered manager understood their regulatory responsibilities. The provider sought feedback from people and their relatives or advocates to ensure their views were considered. The registered manager engaged regularly with external health professionals to ensure people received the right support when needed. Regular audits were being completed to drive improvements in the service.

For more details, please see the full report which is on the Care Quality Commission (CQC) website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was requires improvement (published 16 May 2019) and there were multiple breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

The criminal investigation (referred to in the report of 16 May 2019) was concluded with no action taken.

Why we inspected

We undertook this targeted inspection due to concerns we had received. The complaint highlighted concerns in relation to the management and recording of safeguarding concerns and other incidents, care worker and service user engagement, checks of equipment, management of infection prevention and control practices around continence care. During the inspection we checked whether the service was compliant in relation to Regulation 12 (Safe Care and Treatment) and Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Bridlington Lodge

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. This was a targeted inspection to check whether the provider had met the requirements of Regulation 12 (Safe care and treatment) and Regulation 17 (Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 in relation to some specific concerns about the management of incidents, maintenance and safe use of equipment and infection control practices. As part of this inspection we looked at the infection control and prevention measures in place.

Inspection team

The inspection site visit was carried out by two inspectors.

Service and service type

Bridlington Lodge Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave a short period of notice due to the current COVID-19 pandemic.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with four people who used the service about their experience of the care provided. We spoke with three care workers and the registered manager. We reviewed a range of records in relation to the safety and governance of the service. This included four people's care records, including monitoring records and handover notes. We sampled recent audits and records relating to one care worker.

After the inspection

We spoke with ten relatives and a further three care workers including the activities co-ordinator, a senior carer and care assistant. The provider sent further information to us after the site visit which we reviewed as part of this inspection.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question, we had specific concerns about.

The purpose of this inspection in relation to this key question, was to check on specific concerns about the management of safeguarding concerns and incident management, staffing and recruitment, checks of equipment used and infection prevention and control practices within the service. We will assess all of the key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Monitoring systems were in place and identified risks to people's safety. These had been assessed and guidelines were in place for care workers to follow.
- Equipment used to ensure people's safety was in working order. For example, door sensors and sensor mats to alert care workers that a person at high risk of falls may be mobile. Care workers completed regular welfare checks for people assessed as high risk.
- Risk assessments had been updated to include detailed guidance to mitigate risks to people. These included recommendations from external health professionals.
- Lessons had been learnt following accidents and incidents to minimise risks to people. Records provided factually detailed information and people had been reassessed when needed and actions taken were clearly detailed.
- Care workers understood the need for strict infection control measures to ensure everyone's safety. They told us the registered manager regularly discussed any changes to government guidance for COVID-19 and they were able to read through this if needed.
- Risk management plans detailed good infection control practices. For example, routine checks were carried out to identify whether anyone in the service had symptoms of the virus. People were supported or prompted by care workers to adopt good personal hygiene and socially distance when this was possible.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe at the service. One person told us, "I feel safe, the staff are lovely."
- Procedures were in place for care workers to report incidents of a safeguarding nature to the appropriate external agencies.

- Care workers had received safeguarding training. They could describe the actions they would take if they witnessed or suspected any type of abuse or harm.

Staffing and recruitment

- Recruitment practices were robust. Checks had been carried out to ensure people were suitable to work within a care setting.
- The provider had disciplinary procedures in place. The registered manager advised no one had received a disciplinary within the last six-month period.
- Staff felt supported by the registered manager. Staff told us, "(registered manager) is brilliant, if they can help us in any way they do, really good support. I have a three-monthly supervision and annual appraisal."
- We observed care workers were able to meet people's needs in a timely manner. The majority of people we spoke with were happy with the current staffing levels. Rotas showed that staffing was consistent and reviewed regularly. One relative advised, "I thought there was enough staff and they don't have a big turnover of staff."
- The registered manager carried out observations to ensure staff were confident and competent in their role.

Preventing and controlling infection

- The provider ensured that stocks of personal protective equipment were in place and staff were using these in line with best practice guidance.
- Infection risks to people using the service are being thoroughly assessed and managed.
- Working arrangements and procedures in relation to COVID-19 are clear and accessible to staff, people who use the service, their supporters, and visitors to the service.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question, we had specific concerns about.

The purpose of this inspection in relation to this key question, was to look to see if the provider had managed incidents within the service appropriately, was aware of their regulatory requirements and continually learnt lessons to improve the quality of the service. We will assess all of the key question at the next comprehensive inspection of the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care.

At our last inspection the provider had failed to operate effective systems and processes to ensure risks to people were assessed, monitored and reduced. People had been at risk of avoidable harm. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Systems and processes were in place to mitigate risk to people. Existing risk assessments had been updated to include more details and new assessments put in place. Care workers told us, "Care records provide us with all the information to support people and keep them safe."
- Audits were completed regularly to identify any faults with equipment. Records showed timely action had been taken to address any maintenance or equipment issues.
- The registered manager demonstrated continuous learning. Incidents and accidents were shared with staff for learning purposes and staff felt able to raise suggestions which improved practices. For example, sensor mats were taken to be cleaned and checked every morning when people had left their rooms.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- People, their relatives and care workers on the whole spoke positively about the service and management support they received. A relative advised, "The registered manager is very approachable, I have no worries." Staff advised, "(Name of registered manager) is a very open manager. Always there. She even goes in on a weekend sometimes. Always there when we need her. Seniors are lovely, they have been carers and been promoted so know what role's like."
- Regular discussions take place with relatives and people to ensure they are aware of any updates or changes. Care workers told us verbal handovers were completed and throughout the day any issues were

reported to the senior carers to update the electronic systems ready for the next shift.

- Opportunities to reflect on practice and lessons learned were embedded in the service. For example, care workers told us information about incidents were shared with them, "We talk about how it happened and how it can be avoided in the future."
- Quality assurance audits were regularly completed to continually improve the service. Care workers told us verbal handovers were completed and throughout the day, any issues were reported to the senior care workers to update the electronic systems ready for the next shift.