

Maria Mallaband Limited

Bridge House Care Home

Inspection report

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service caring?

Good 

Is the service well-led?

Requires Improvement 

Summary of findings

Overall summary

About the service

Bridge House is a residential care home providing personal care to 10 people aged 65 and over at the time of the inspection. They are also registered to provide personal care to people in their own homes, however, this registered activity was not being completed. The service can support up to 30 people. Bridge House accommodates people in one adapted building over two floors. At the time of the inspection all people were living on the ground floor apart from one person who had chosen to remain on the first floor.

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

Improvement had been made to the home overall since the last inspection.

Accidents and incidents analysis was a lot more consistent and a falls analysis had been introduced. There were plans to introduce other analysis tools relevant to the remaining incidents. We made a recommendation in relation to this.

Quality audits had improved and the management team were positive about how they were going to sustain this progress. A recommendation was made in relation to this.

People were supported by caring staff. The staffing team had settled and returned to work since the last inspection. Staff felt confident that there were enough staff to meet people's needs. People told us that they were supported well with their medicines.

People were kept safe from the risk of infection and staff knew how to report safeguarding concerns if required. People were treated with respect by staff that had undertaken equality and diversity training and applied this into their day to day role.

Staff and management had worked well with other health and social care professionals since the last inspection to drive improvement. People and staff felt involved with the running of the home. Communication with relatives had improved.

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

Rating at last inspection (and update)

The last rating for this service was inadequate (published 26 March 2021).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. The provider was also served with two warning notices regarding safe care and treatment and good governance of the home. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

This service has been in Special Measures since 26 March 2021. During this inspection the provider demonstrated that improvements have been made. The service is no longer rated as inadequate overall or in any of the key questions. Therefore, this service is no longer in Special Measures.

Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

We carried out an unannounced comprehensive inspection of this service on 18 January 2021. Several breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. We were also required to check whether the Warning Notices we previously served in relation to Regulations 12 and 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met on specific concerns we had about safe care and treatment and good governance at Bridge House. This report only covers our findings in relation to the Key Questions Safe, Caring and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from inadequate to requires improvement. This is based on the findings at this inspection. We have found evidence that the provider needs to make improvement. Please see the Safe and Well-Led sections of this report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Bridge House Care Home on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection 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?

Requires Improvement ●

The service was not always safe.

Details are in our safe findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service well-led?

Requires Improvement ●

The service was not always well-led.

Details are in our well-Led findings below.

Bridge House Care Home

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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was carried out by two inspectors.

Service and service type

Bridge House 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 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

This inspection was unannounced.

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority, their quality assurance team and professionals who work with the service. 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 six members of staff including the regional director, deputy manager, senior care workers, care workers, cleaning staff and maintenance staff.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records, rotas, minutes of recent meetings with staff and residents. We spoke with one professional who regularly visits the service. We also spoke with one relative and two further staff members about their experience of the home and the care provided.



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 inadequate. At this inspection this key question has now improved to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

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

At our last inspection a lack of proper recording of people's change in care needs, risk assessments and management as well as a lack of correct infection control procedures placed people at risk of harm. 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.

- At our previous inspection the analysis of accidents and incidents was not consistent. At this inspection we found that a new falls trend analysis had been introduced with graphs to show progress and what actions had been taken to reduce falls, for example a referral to the occupational therapist and fluid observations.
- The management team had also introduced a 24-hour post fall observation log. This included body maps of injuries and monitoring of any ongoing risks.
- The registered manager confirmed they were looking to introduce the same level of analysis for unexplained injuries. This would support the management team and staff to identify any trends or patterns and make relevant notifications or referrals to health and social care professionals if necessary.

We recommend the provider introduce the same level of analysis for all accidents and incidents that has been introduced for falls.

- People and relatives told us that staff at the home managed people's individual risks well. One relative said, "They are very good at monitoring [person's] risks, if anything changes they will call me and update me."
- People were kept safe from individual risks. We saw detailed risk assessments had been introduced to all care plans we reviewed. This included nutritional risk assessments and oral health assessments.
- Risks to people were managed well and reviewed regularly. Evidence of this was seen in care plans and staff spoke to us about how they would deal with any changes to people's risks. One staff member said, "I would notify the management team straight away if I noticed any new risks, record it and ensure that an assessment was done as quickly as possible."
- At our previous inspection staff had not been clear in their understanding of current government guidance and how to correctly don and doff personal protective equipment (PPE). During our observations staff were

confident in how to correctly wear their PPE.

- Since our last inspection staff had received training in relation to PPE and all areas of infection control by external trainers. Staff spoke positively about this training, "I think it really helped us understand all the changing guidance around PPE and infection control during the pandemic."
- We were assured that the provider was preventing visitors from catching and spreading infections. All residents and health and social care professionals we spoke with detailed the extensive testing for visitors government guidance that was being followed correctly.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Staffing and recruitment

At our last inspection the number of staff deployed as well as the lack of staff with adequate knowledge of the home and the care needs of the people living there had impacted the care provided. This was a breach of regulation 18 (Staffing) of The Health and Social Care act 2008 (Regulated Activities) Regulation 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- People told us there were enough staff to meet their needs. One person said, "Oh, a lot better (when comparing staffing levels to January 2021), they (staff) just seem so much more relaxed and they have time to stop and have a chat, which is nice."
- Relatives also provided positive feedback when asked about staffing levels. One relative said, "The staff are great, they not only keep [relative] safe, they really care about spending extra, quality time with them, I would definitely say they have enough staff."
- Staff told us that staffing levels had dramatically improved since January 2021. One staff member said, "That was an awful time, there just wasn't any staff that hadn't tested positive (for COVID-19). So nobody could cover shifts. It's so much better now, there's a lot more staff and always cover if anything happens."
- The registered manager followed safe recruitment processes. This included interviews, previous employment reference checks and checks with the Disclosure and Barring Service (DBS). This informed the registered manager if a potential employee was known to the police.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living at Bridge House. One person said, "I feel very safe here, it's secure and the staff are very good."
- Relatives also confirmed this message. One relative said, "I know [relative] is safe and that is so important to me, the staff are great, and they do everything to keep [relative] safe."
- Staff had continued to receive safeguarding training and confirmed they felt confident to raise any safeguarding concerns. There was a safeguarding policy in place with clear guidance for staff to follow.

Using medicines safely

- People told us staff supported them with their medicines when they needed them. One relative said, "It's such a comfort knowing that [relative] is getting their medication when they need them. Before [relative] moved to Bridge House they were always being forgotten".
- Staff received medicine training and the management team completed regular competency checks.
- Since our last inspection a digital medicine administration system had been introduced. This sent alerts to the management team if any errors occurred so they could follow up any concerns in a timely way.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were supported by caring staff. One person said, "They (staff) are very kind".
- Staff told us how important it was to be compassionate and treat people with respect. One staff member said, "I see all of the residents like they are my family. So for that reason I treat them how I would want my family treated".
- Staff received equality and diversity training and there was a policy in place at the home for staff to follow.

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- We saw evidence of people and relatives, where appropriate being involved in reviews of their care. The management team had reached out to relatives to discover more personalised details about people that could be incorporated into care plans.
- People told us that staff were very respectful regarding their privacy. One person said, "Yes, they knock on the door (before they enter the room)."
- Staff told us how their priority was to ensure a person continued to keep their dignity. One staff member said, "It's about being respectful and taking it at their (resident's) pace. Especially with things like personal care, we need to be absolutely sure people are comfortable."
- Relatives told us about how staff had encouraged people to become more independent. One relative said, "It's almost as if [relative] has improved since they moved in. [Relative] is just thriving and that's a testament to the staff and all the work they do."

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 inadequate. At this inspection this key question has now improved to requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

At our last inspection there was a lack of oversight and effective audits resulting in a lack of effective governance at the service. This was a continued 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.

- The provider and the registered manager had worked together with health and social care professionals in an open and transparent manner since the last inspection. One professional said, "They seem to really want to make the improvements, learn from the past and get it right, it's really positive."
- Improvement had been made to the quality audits that were in place and meaningful updates and actions had been set and completed.
- The management team were keen to build on improvement that had been made. They said, "We just want to continue our improvement and ensure it is sustainable to continue providing a high standard of care."

These changes were at an early stage so not yet embedded into every day practise and needed time to be sustained.

- Relatives provided positive feedback in relation to the management communication. One relative said, "Even if it isn't the best news, like [relative] has had a fall, they will always call straight away".
- Staff and managers were clear about what their roles and responsibilities were. The newly registered manager was keen to keep striving to provide the best care possible. They said, "My ultimate goal is to get this to an outstanding home, providing outstanding care".

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People told us although the home had improved it was very quiet and lacked a "busy" atmosphere. The regional manager said, "We want to take a practical, safe approach to admissions so we get it right and then

slowly the atmosphere will return to the home".

- People and relatives commented on the registered manager not always being visible in the home. One person said, "I see a lot of [deputy manager], [registered manager] seems to spend a lot of time in the office, but I also know there's a lot for her to sort out".
- People and relatives had previously raised concerns about lack of communication with the home. Relatives that were spoken with confirmed communication had improved and this was evidenced in care plans in a communication log that had been introduced.
- People had been involved in resident meetings where they had the opportunity to put forward their ideas and suggest changes.
- Staff told us they felt included in the running of the home. One staff member said, "[Registered manager's] door is always open. We can make suggestions and [registered manager] is always open to new ideas or any new ways to improve".

Continuous learning and improving care; Working in partnership with others

- A business improvement plan had been introduced since the last inspection. This had created actions with estimated completion dates and ongoing actions to ensure all areas of the care home were covered.
- The staff at the home had benefitted from partnership working since the last inspection. For example, the community nursing team had attended and provided face to face training for all staff in donning and doffing PPE.
- The management team had worked closely with social care professionals to embed improvements following the last inspection. This included social care professionals attending the home and requesting assurances from the management team. One social care professional said, "It has been a pleasure to work with them and help them improve."