

HC-One Limited

Bridgewater Park Care Home

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Bridgewater Park Care Home is a care home providing personal care and accommodation for up to 63 people, some of whom may be living with dementia. At the time of the inspection 42 people were living at the service.

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

People were supported to stay safe. There were clear processes in place for managing risk and risk assessments were person centred and reviewed regularly. There was an open culture of learning from accidents and incidents, which were regularly reviewed to identify themes and trends.

There was enough competent staff to care for people safely and staff had the right mix of skills to ensure safe practice. Recruitment systems were robust and ensured the right staff were employed to keep people safe.

Staff followed clear policies and procedures for infection prevention and control and were trained and understood their role and responsibilities for maintaining high standards of cleanliness. The provider had an action plan in place to continue with the planned refurbishment.

Effective safeguarding systems were in place. Safeguarding concerns were managed consistently and promptly. All staff had an awareness and understanding of abuse and felt comfortable raising concerns about their own or other people's safety.

Medicines were managed safely. People received their medication as required and staff were competent and trained in the administration of medication.

The provider had effective governance systems in place. Risks were identified through audits and action plans were produced that monitored the services performance and used the information to drive improvements.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

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

Rating at last inspection

The last rating for this service was requires improvement (published 22 September 2022). At our last inspection we recommended the provider made improvements in refurbishment of the premises, staffing levels and risk management. At this inspection we found the provider had made improvements in these

areas.

Why we inspected

We carried out an unannounced inspection of this service on 4 August 2022. We undertook this focused inspection to check the service had followed their action plan and to confirm improvements were made. This report only covers our findings in relation to the Key Questions safe and well-led which contain those improvements.

We looked at infection prevention and control measure 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.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

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

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Bridgewater Park 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 Health and Social Care Act 2008.

Inspection team

The inspection was completed by 3 inspectors. An Expert by Experience also made calls to relatives the following day. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Bridgewater Park is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Bridgewater Park is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

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

During the inspection

We spoke with 5 people who used the service and 9 relatives to ask about their experience of care provided. We also spoke with the area director, the registered manager and 9 members of staff. We reviewed a range of records. This included 3 people's care records and a range of medicine records. We looked at 3 staff files in relation to recruitment and supervision. We reviewed a variety of records relating to the management of the service.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection we recommended the provider reviewed all risk assessments and care plans to ensure risk was captured and sufficient guidance provided to staff on how to manage risk. The provider had made improvements.

- Risks to people's safety and welfare were assessed appropriately.
- Risks associated with people's care had been identified and plans were in place to minimise risk occurring. Staff told us they contained enough information to care for someone safely.
- Personal emergency evacuation plans were available and detailed the level of support each person would require in the event of an emergency evacuation.
- The environment and equipment were safe and well maintained and regular checks were recorded.

Staffing and recruitment

At our last inspection we recommended the provider engaged people and relatives in a review of staffing levels within the service and acted where needed. The provider had made improvements.

- There were enough staff to ensure people received safe care. We observed staff providing support and engaging with people in a meaningful way.
- Following the last inspection staffing levels had continued to improve. Staffing levels were reviewed regularly, and the service was staffed in line with the dependency tool. Relatives told us there were enough staff around to help when needed.
- The provider had a system in place to recruit safely. This included full employment checks before staff started working in the service.

Preventing and controlling infection

At our last inspection we recommended the provider continued the planned refurbishment of the service to ensure it maintained a clean environment for people to reside. The provider had made improvements.

- We were somewhat assured that the provider was promoting safety through the layout and hygiene practices of the premises. Shared bathrooms and toilets did not have a cleaning schedule in place after each use. The registered manager responded immediately and put a schedule in place. The provider was working through the refurbishment plan to ensure they had an appropriate environment for people to live in.

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.

Visiting in care homes

People were supported to meet with their visitors in line with current government guidance. Visitors to the service were encouraged, whilst staff ensured appropriate precautions were followed to help prevent the spread of infection.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People were protected from the risk of abuse. Staff were trained to help them to identify any safeguarding concerns.
- People felt safe at the service. One person said, "Absolutely I feel safe, the night staff will pop their head in and check that I am alright."
- The registered manager had a process in place to review all accidents and incidents, they were responded to appropriately and lessons were learned to drive improvements.

Using medicines safely

- Medicines were managed safely. Instructions for medicines to be given at specific times were available for staff. This reduced the risk of people experiencing adverse side effects from the medicines not working as intended.
- People who were prescribed 'as and when' medication had a protocol in place and staff had written why it was required and how much was administered.
- Staff were trained and supported in their role to administer medicines. Records showed staff had their competencies checked annually. Staff told us they received annual refresher training for medication.

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 for themselves. The MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The provider had governance processes in place that were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support.
- The registered manager had the skills, knowledge, and experience to perform their role and a clear understanding of people's needs and oversight of the service they managed. Relatives told us the service was well managed.
- Supervisions and team meetings were used to discuss issues or concerns and drive improvements in the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The provider engaged with people receiving care, their relatives, and staff. A relative said, "They always inform me when they [Person's name] are having a review, I have gone in every time."
- Staff had regular team meetings and told us they could participate and felt supported. A staff member said, "They are useful, and you can participate in them."
- The service regularly worked in partnership with other local health professionals to ensure people received ongoing support to meet their needs.

Promoting a positive culture that is person-centred, open, inclusive, and empowering, which achieves good outcomes for people

- The service had an open and honest culture. Staff told us it was a good place to work and were able to raise concerns with the registered manager. A staff member said, "If we have any questions, they [registered manager] are always happy to help."
- People and their relatives spoke positively about the service. Comments included, "The atmosphere is A1 all of the time," and "Staff look after us and are very kind."

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

- The provider understood their responsibility to inform people and relevant others in the event something went wrong with people's care. If things did go wrong, apologies were given to people, lessons were learned, and these were used to improve the service.
- Staff were aware of the providers whistle-blowing policy and knew how they could use this to raise

concerns.