

Samkar Limited

Bridgeway Care Home

Inspection report

Gamull Lane
Ribbleton
Preston
PR2 6TQ

Tel: 01772379393

Date of inspection visit:
29 June 2021
30 June 2021

Date of publication:
18 August 2021

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

Bridgeway Care Home is a residential care home providing personal and nursing care up for to 29 people living with dementia, learning disabilities, physical disabilities and/or sensory impairment. At the time of our inspection there were 24 people living there. Accommodation is provided over two floors with several communal areas.

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

Where accidents and incidents had occurred, some records lacked detail in recording what actions were taken or if lessons had been learned to prevent incidents happening again. We have made a recommendation about completing the records in full, detailing any learning and all the actions taken.

The provider, who is also the registered manager, and staff team worked closely with other agencies and healthcare professionals to make sure people had good care. The quality and safety of the service was regularly monitored and areas which could be improved were identified. However, the audit processes and systems for monitoring used were not always utilised effectively in gathering information. For example, trends and themes were difficult to identify. We have made a recommendation about recording more detail in the audit processes.

Safeguarding systems were in place to protect people from the risk of abuse or unsafe care. Staff were aware of the procedures and had received training on it and knew what action to take. Staff had been recruited in a safe way. The provider made sure sufficient numbers of staff were on duty throughout the day and night.

People received their medicines safely and as prescribed. People's needs and risks had been assessed and people received the level of support they required. We looked at infection prevention and control measures under the safe key question. We were assured the infection prevention and control practises were satisfactory.

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. People and their families had been fully involved, where relevant, in planning and reviewing the care and support provided.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports Care Quality Commission (CQC) to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

Based on our review of key questions safe and well-led the service was able to demonstrate how they were

meeting some of the underpinning principles of right support, right care, right culture.

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 good (published 20 June 2018).

Why we inspected

We received concerns in relation to people's nursing care needs. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection. We found no evidence during this inspection that people were at risk of harm from this concern.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Bridgeway 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?

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.

Bridgeway 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

The inspection team consisted of two inspectors and an Expert by Experience. 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

Bridgeway 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 who is also the provider registered with the Care Quality Commission. This means that they 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 reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with four people who used the service and five relatives about their experience of the care provided. We spoke with seven members of staff including the provider / registered manager, the registered manager from another of the providers homes, registered nurse, care workers and ancillary staff.

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

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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

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

- The staff had identified and managed risks to people's safety. Any potential risks were recorded in the care plans and gave guidance to staff about the actions to take to ensure the safety of people they were supporting.
- The provider and senior staff reviewed accidents and incidents to ensure appropriate actions were taken. However, the records used were not always completed in full. This made it difficult to establish appropriate actions had always been taken and whether lessons had been learned.

We recommend the provider reviews systems and processes to ensure lessons learned from accidents and incidents are clearly recorded and reviewed.

Systems and processes to safeguard people from the risk of abuse

- People were safe and protected from abuse. Staff understood their responsibilities around protecting people from abuse. We saw, where necessary, appropriate referrals had been made to the local safeguarding team.
- People told us they thought the service was safe. One relative told us they thought the service was, "100 percent safe." Another relative said, "I have never seen any evidence, no indication to see that my relative is unsafe. The [staff] are very good."

Staffing and recruitment

- The provider had recruited staff in a safe manner and completed necessary checks of suitability to ensure people were fit to work with vulnerable people.
- The provider continually assessed staffing levels to ensure there were enough staff available to support people. One person told us, "Whenever I visit there is always staff around. I'm not worried, the staff come when asked to."

Using medicines safely

- People received their medicines when they should and as they had been prescribed. Staff who administered medicines had undertaken appropriate training.
- The provider had audit systems in place to check people had received their medicines safely.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.

- 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.

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.

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

- The provider had recently registered as the manager for the service to ensure continuity while recruiting for a permanent registered manager. They were supported by another manager from another home owned by the provider.
- People spoke very positively about how the home was managed and were complimentary about the provider and the company's supporting manager. One person told us, "Yes it's well managed my relative has a good routine, plenty of activities going on and the communication with [name] supporting registered manager is spot on."
- The provider used quality assurance systems to monitor the quality and safety of the service. However, some documentation used was not always detailed enough or completed effectively. This meant trends and themes might not be easily recognised.

We recommend the provider ensures information collected during auditing processes is effectively recorded and analysed.

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

- Staff consistently placed people at the heart of the service, understood the importance of maintaining an inclusive culture and a belief in getting the best from people. One person told us about their rehabilitation progress since coming into the home which was described as exceptional in reaching their outcomes for independence.
- The provider and staff interacted with people in a manner that was positive and very respectful and were focused on doing their best for people they supported. One person said, "I think they are amazing, a great team." A relative said, "I would recommend the service 100 percent."

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 responsibilities under the duty of candour. We had been notified of significant events which had occurred in the home. The notifications showed appropriate actions had been taken in response to incidents, including sharing information with appropriate authorities when incidents had occurred.

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

- Staff told us they felt valued and were supported to develop in their work and staff morale was good.
- People told us they had been involved in regular reviews of their care needs and felt fully involved.

- Staff worked effectively in partnership with health care professionals from multidisciplinary teams to achieve good outcomes for people. A recent visiting professional told the provider, "I truly believed your ethos, you have a lovely home and it was quite clear to me how passionate you and your team are in caring for your residents."