

Lotus Care (Bridge House) Limited

# Bridge House Residential Home

## Inspection report

Bridge House Care Home  
Topping Fold Road  
Bury  
BL9 7NQ

Tel: 01617641736

Date of inspection visit:  
05 October 2022  
20 October 2022

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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

Bridge House is a residential care home providing personal and support for up to 30 people, some of whom live with dementia. Accommodation is provided over two floors, accessed via a passenger lift. All bedrooms are single with en-suite facilities. At the time of the inspection there were 30 people living at the home.

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

People and their visitors spoke positively about the care and support provided. People told us they were actively encouraged to follow activities of their own choosing. Activity staff provided a range of opportunities for people. Staff were said to be kind and respectful, this was supported by our observations.

Management systems were in place to monitor and review the standard of care and support provided. The views of people had been sought and acted upon. Any complaints and concerns were recorded and responded to, where necessary information was shared with relevant parties. No issues were raised with us by external agencies we contacted.

Sufficient numbers of staff were available throughout the day and night. Recruitment checks had been carried out when appointing new staff. Staff spoken with felt the team worked well together and were supported by the registered manager. A range of training and development opportunities were in place to support the team.

Care plans and risk assessments were available to guide staff on the care and support people wanted and needed. 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's prescribed medication was managed safely. The service benefitted from good support in meeting the health care and medication needs of people from the local GP and supplying pharmacist.

We found the home to be clean and tidy. Internal and external safety checks were completed to the equipment and premises to help keep people safe. Redecoration was planned to enhance areas of the home.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 5 December 2019).

### Why we inspected

We received concerns in relation to the management of the service and the recruitment of staff. As a result,

we undertook a focused inspection to review the key questions of safe and well-led only.

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.

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 remained unchanged. We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Bridge House Residential Home on our website at [www.cqc.org.uk](http://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.

# Bridge House Residential 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.

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 was carried out by one inspector 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

Bridge House 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. Bridge House is a care home without 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

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers 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 used all this information to plan our inspection.

#### During the inspection

We spoke with 10 people who used the service and two visitors. We also spoke with seven members of staff including the area manager, registered manager, care staff, kitchen staff, housekeeping and activity staff. We also spoke with a visiting nurse.

During the inspection visit we looked at the management of people's medicines and reviewed support plans. We also looked at areas of health and safety, infection control and staff recruitment. Additional evidence, sent to us electronically, was reviewed remotely. These included; policies and procedures as well as information to evidence management and oversight 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 good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

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

- The service had safeguarding procedures in place for the recording and reporting of concerns. The registered manager liaised with relevant agencies, including the local authority and CQC, where necessary.
- All the people we spoke with said that they felt safe living at Bridge House and staff attended to their needs when they needed them to. We were told, "I feel very safe here, I am happy to be here, and all the girls are nice. The staff look after me well," and "I tell them what I want, and I feel very safe and looked after."
- Records showed training in safeguarding adults was provided. Staff spoken with confirmed training had been completed and were confident in raising any concerns with the registered manager.
- Audits were completed to help monitor any safeguarding concerns and accidents and incidents. These helped to identify any themes or patterns so that appropriate action could be taken to reduce the risk of reoccurrence.

Assessing risk, safety monitoring and management

- People we spoke with felt staff understood what support they wanted and needed. Areas of potential risk had been assessed and planned for with information to guide staff on the safe delivery of care and support.
- Additional records were completed to monitor people's health and well-being. This helped to identify any changes in need and where additional support may be required.
- Maintenance staff monitored areas such as fire safety, water temperatures and window restrictors so people were kept safe and potential risks were identified and acted upon.
- Regular servicing of equipment and mains supplies, such as gas and electric circuits, were completed to check they were in good working order. Any action identified was addressed.
- An updated legionella risk assessment was required. The registered manager confirmed a date for this to be carried out. On completion this was to be shared with CQC and the local authority.

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.
- People were consulted about their care and support. This was reflected in people's care records. Where people were not able to make decisions for themselves, we saw decisions were made in their 'best interest' involving relevant people.
- We saw staff speaking with people respectfully and asking permission to support them.

#### Staffing and recruitment

- Appropriate recruitment checks were carried out when appointing new staff. This included a Disclosure and Barring Service check (DBS). A DBS check provides information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- A review of rotas showed sufficient numbers of staff were available. People we spoke with felt they received the support they wanted and needed. We were told, "The carers are nice and helpful. They are brilliant, always got the time of day for you," and "The staff here are brilliant, always helpful and very, very nice. They sit down and chat with you. Just ask and speak to staff and they give you advice they are very kind."
- On-going training and support were provided. In addition to the programme of e-learning, additional face to face training had been planned covering fire safety, dementia care, first aid and moving and handling.
- Staff told us the team worked well together. Their comments included; "We've got some good staff, hard workers and morale is on the up," and "The work is manageable; we have enough staff around and we're well supported."

#### Using medicines safely

- People's prescribed medicines, including controlled drugs, were managed safely.
- Additional records were completed in relation to the application of topical creams, patches, thickeners and PRN (when required) medicines. Records provided guidance for staff about when and how these should be administered safely.
- The service benefitted from good support in meeting the health care and medication needs of people from the local GP and supplying pharmacist.
- Staff responsible for the administration of medication had completed relevant training. The registered manager completed regular audits and checks to make sure people 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 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 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.

#### Visiting care homes



- People were encouraged and supported to meet with family and friends. A number of people said they were able to go out with family members shopping or for a meal or other social event. Visitors were seen coming and going. Visitors told us: "I'm able to see her [relative] and see they are okay" and "I'm really happy and wouldn't wish for him to be anywhere else." One visitor said during COVID lockdown the home had introduced a WhatsApp group for family members, which they found invaluable and very beneficial.

# 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 good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted 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; Continuous learning and improving care

- The registered manager had been in post six months and was aware of her legal responsibilities and ensured relevant parties, such as CQC and the local authority were kept informed.
- A range of checks to monitor and review the service were completed by the senior management team. Action plans were in place and kept under review where improvements were needed, these included improvements to the environment and staff training.
- Staff we spoke with understood their role and responsibilities and felt supported in their work by the new registered manager. Staff told us, "[Registered manager] is great, approachable. It's been a change for the better," and "[Registered manager] is a breath of fresh air, she's come in with a positive attitude."
- People were also happy with the management and support arrangements. People said, "It's very well run. I would find it hard to find fault, the staff are upskilled at what they do," and "[Registered manager] is brilliant, always got the time of day for you."
- We checked the provider's website and saw the rating awarded at the previous inspection was displayed, as required by law. Information was also displayed within the home.

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

- Opportunities were made available for people and their visitors to feedback on the service provided. Feedback from people had included, menu ideas, different activities and trips, the introduction of a tuck shop and help with household tasks.
- We saw where these suggestions had been acted upon. One person told us how they felt they had a sense of purpose as they assisted kitchen staff, setting tables and clearing the dining room after meals.
- All the people we spoke with knew who the registered manager was and felt relaxed and able to speak to her or any other member of staff if they had any concerns. We were told, "Nothing to complain about, they do everything I ask them to do," and "If I had any concerns, I would be happy to say so, but I don't have any."
- From our observations and feedback received we found the home provided a friendly and supportive atmosphere.

Working in partnership with others

- The registered manager said the service had good support from the local GP and supplying pharmacist, which helped to ensure people's changing needs were effectively met.
- The registered manager worked with the local authority commissioning and safeguarding teams to ensure people received their agreed plan of care in a safe and well managed way.
- A visiting nurse said they were aware there has been some staff and manager changes. They felt this had improved over the last couple of months. Adding, "There's no issues regarding staff, very helpful and inform us if support is needed for a person."