

Blackberry Hill Limited

# Bridgeside Lodge Care Centre

## Inspection report

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Date of inspection visit:  
21 September 2023

Date of publication:  
27 October 2023

## Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

### About the service

Bridgeside Lodge Care Centre is a residential care home that provides long-term specialist nursing care for up to 64 adults. The home supports elderly people, some of whom have dementia, and younger people, aged 18-65, who have acquired neurological conditions including spinal injuries. On the day of our inspection there were 61 people living in the home.

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

People who lived at this home received exceptionally high-quality, personalised care and support from an extremely well-led service.

The atmosphere and premises were exceptionally welcoming, positive and exceptionally well maintained. Feedback from people who used the service, their relatives, healthcare professionals and staff was consistently and overwhelmingly positive the home exceeded people's expectations.

People and their relatives praised the staff for their exceptional care and kindness. Staff were engaging and considerate, and treated people with the utmost respect.

Staff were extremely committed to providing care that was compassionate and provided the best outcomes for people. The managers and staff team had a strong approach to providing individualised care, that promoted people's dignity.

There was a positive culture and staff were very proud to work for the provider. Staff were empowered to achieve the best outcomes for people through an extremely supportive teamwork approach to their work.

The management team provided strong leadership and proactively considered how they could continuously enhance the service. There was clear leadership and visions and values for the service, that ensured people were at the heart of everything they did.

Staffing levels were sufficient to meet people's needs safely, Risks to people had been fully assessed and mitigated to help keep people safe.

Recruitment practices were safe and relevant checks had been completed before staff worked at the service.

The managers of the service actively sought the views of people and their relatives about the running of the service and they dealt promptly with any concerns that people raised

Medicines were administered safely to people and staff following safe infection prevention.control practices. Where incidents occurred, the provider had a system in place to review and learn from these to prevent

reoccurrence.

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](http://www.cqc.org.uk)

Rating at last inspection

At the last inspection we rated this service Outstanding. The report was published on 5 December 2017

Why we inspected

This inspection was prompted by a review of the information we held about this service. This report only covers our findings in relation to the Key Questions Safe, and Well Led. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

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?

The service was safe.

Details are in our safe findings below

Good ●

### Is the service well-led?

The service was exceptionally well-led.

Details are in our well-Led findings below

Outstanding ☆

# Bridgeside Lodge Care Centre

## **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 2 adult social care inspectors, and 1 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

Bridgeside Lodge 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.. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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

## Notice of inspection

The inspection was unannounced. We visited the location's service on 21 September 2023.

## What we did before the inspection

Before our inspection, we reviewed the information we held about the service which included statutory notifications and safeguarding and the Provider Information Return (PIR). The PIR is a form that asks the provider to give some key information about the service, what the service does 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 the registered manager, 3 care staff, 2 nurses and 3 visiting health care professionals, We also spoke to 3 people who used the service and 12 relatives. We spent time observing care to help us understand the experience of people who could not talk with us. We looked at 4 people's care records and 3 staff records including safe recruitment and supervision; we also looked at various documents relating to the management of the service.

Following our visit we received feedback from 3 health care professionals who worked with the service and received further information from the registered manager, which included provider audits and survey results.

# 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.

Systems and processes to safeguard people from the risk of abuse; Assessing risk, safety monitoring and management.

- People were safe and protected from avoidable harm. Legal requirements were met.
- Comments from people included "Yes, my relative is very safe in this home. Security is good and staff are observant and can spot when someone is in trouble and help." And "my mother has lived in this home for about 12 months now, and prior to coming here, it was a constant worry for us, she was always having falls. But here, staff are good at persuading her to use the Zimmer frame and handrails around the building. Her care is safe now."
- The service had systems in place to protect people from abuse and avoidable harm. Staff knew what to do and who to report if to they had any concerns about people's safety.
- Staff had completed safeguarding training and staff we spoke with were able to demonstrate how they recognised signs of abuse and poor practice. Staff told us they were able to raise any concerns to the management team and were confident actions would be taken.
- The registered manager had a robust approach to managing safeguarding incidents and followed the provider's policies for reporting such incidents to the local authority safeguarding team.
- Staff assessed all potential risks to people and put guidance in place so that the risks were minimised. Risk assessments were developed that maximised people's independence and ability to remain in control of their life.
- Risk assessments covered preventing falls, nutrition, gastrostomy, skin integrity, Continence and chocking.
- A health care professional told us "The management and the team are open minded and can take positives risks due to the relationships they have with professionals, residents, and relatives. This allows their residents to live the lives they want."
- Clinical staff were very knowledgeable in wound care and care staff knew the importance of regular repositioning of people. We also found people who spent most of their time in bed were on pressure relieving equipment that automatically adjusted according to the person's weight.
- The service employed a team of maintenance people who ensured that the building was kept safe and in good decorative order.
- Regular checks of the building and equipment took place, including fire safety equipment.
- Fire drills were regularly held, and people had individual personal evacuation plans in place to guide staff in the event of a fire.
- People had individual emergency evacuation plans (PEEPS) which highlighted the level of support they required to evacuate the building safely

### Staffing and recruitment

- There were enough staff to keep people safe and meet their individual needs. We observed that people

were attended to in a timely unrushed manner. The registered manager used a dependency tool to determine staffing levels required.

- A person using the service told us "Yes, there are always lots of staff on duty. Weekends are always well staffed, too."
- Staff had been recruited in a safe way. Appropriate checks were made of an applicant's work references, full employment history, relevant qualifications and of the Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Most staff had worked in the service for many years and therefore provided continuity in care and there was no use of agency staff.
- People were very complimentary about the staff. Comments included, "The Carers are wonderful and he smiles at them more than me. I feel very comfortable leaving him here if I get upset they reassure me, there is always enough of staff and this gives me f give me comfort."

#### Using medicines safely

- Accurate records for the receipt, administration and disposal of medicines were kept. There were written protocols to guide staff on the administration of medicines prescribed 'as and when' required'.
- Staff who administered medicines had been trained to do so and the registered manager completed regular competency checks to ensure staff administering medication did so safely.
- Medicines were stored safely
- People received their medication safely and at the right time. A staff member said, "No one gives out medication unless they are trained to do so."
- Medicines were clearly recorded within people's medication administration records.
- Regular audits of medication administration took place to ensure continuous safety.

#### Ensuring consent to care and treatment in line with law and guidance.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act 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 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 MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The service was working within the principles of the MCA.
- Mental capacity assessments (MCA) were completed for people. These had followed best practice and current guidelines. MCA's were decision specific, such as, can someone consent to bed rails being used, or do they consent to remaining at the care home. It was clear if a person was able to understand, retain, weigh up and communicate their decision. When someone was not able to do this, a best interest checklist was completed with all relevant relatives and healthcare professionals.
- Staff empowered people to make their own decisions about their care wherever possible.
- We heard staff asking people for their consent before assisting them and offering people choices about how and where to spend their day
- Staff knew about people's capacity to make decisions and were able to communicate with people well in a variety of ways to support this.
- Staff demonstrated best practice around assessing mental capacity, supporting decision making and best



interest decision making.

- Staff confirmed that they had undertaken training in relation to the MCA.

#### 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.

#### Visiting in care homes

- The provider's approach to visiting followed the latest government guidance in relation to visiting in care homes

#### Learning lessons when things go wrong

- The service had an electronic system in place to monitor incidents and understood how to use them as learning opportunities to try and prevent future occurrences.
- The registered manager explained that following any incident or accident, a review would be undertaken so that any learning or improvements could be considered to prevent any re-occurrences.

# 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 Outstanding. At this inspection this key question has remained the same

This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred 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

- The delivery of high-quality, person-centred care was built on a culture that fully involved and valued people as partners in their care. This created a homely environment and excellent outcomes for people.
- Without exception, everyone we spoke to during the inspection told us they were welcomed and valued. There was an overwhelming sense of inclusion, and this was the foundation the service was built upon. A relative commented, "It's the culture which makes Bridgeside Lodge outstanding."
- The registered manager, management team and staff worked exceptionally hard and had established a service that promoted an extremely positive and inclusive culture where person-centred care was at the heart of their ethos.
- Healthcare professionals provided excellent feedback about the culture of the home, staff and quality of care staff provided. Comments included "Over the years of unannounced visits to Bridgeside Lodge, I must admit the home and staff has been faultless.", "Bridgeside Lodge staff are transparent and are willing to welcome co-production way of working together to mitigate planning with health and social care professionals." And X"(registered manager) is an inspirational leader, her leadership and management are key to that, she knows everyone in the home as well as visitors, she is in total control, but at the same time she allows her staff team to grow and develop."
- The management team were dedicated and determined to ensure people were at the heart of the service. Staff all told us they enjoyed and appreciated working in the service, how remarkably caring and friendly it was and how they were motivated by providing the best support for people. Comments from people, staff and relatives included. "I'm happy with the care that my relative receives. I feel so lucky that she is there. I have peace of mind and know that she gets such good care." "The Management of this home is excellent. The communication from them is so good, I wasn't really prepared for it. I get calls about the smallest incident", "I love this home. My mum was reluctant to go at first, but she loves it now, too. Staff are brilliant"and "I'm very impressed with Bridgeside Lodge, because they are looking after a huge range of abilities and ages, and everyone gets along well together."and "I love everything about my job it's so rewarding and a wonderful place to work."
- The management team's ethos was ensuring the highest level of staff wellbeing for the benefit of those they supported
- The registered manager had set up a number of initiatives to provide culturally appropriate care. This included staff learning mandarin phrases for a resident who was unable to communicate in English and

offering culturally appropriate meals for Muslim, Caribbean, and Jewish residents.

- Staff felt fully engaged in the service and told us staff meetings were regular and they felt they could raise issues and new ways of working and were listened to and valued. A member of staff told us "They really listen to us and act very quickly if we have any concerns including our personal life"
- A survey was carried out with relatives and people whom used the service in December 2022 which showed extremely high levels of satisfaction

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 management of the service was outstanding. The management team were incredibly clear of their roles and responsibilities and led the service to have a person centred ethos that promoted positive outcomes for people.
- Highly effective and robust governance systems supported the provision of high-quality person-centred care and support. A quality assurance system of scheduled audits was in place. This included regular checks of all areas including health and safety and medicines audits. Actions were identified for any shortfalls found. The staff had the skills, knowledge, and experience to perform their roles. They were passionate and worked effectively together and shared the same vision to ensure they achieved positive outcomes for people.
- The registered manager was highly regarded by people, healthcare professionals and relatives. Without exception, we received extremely positive feedback, which included, "The home manager is very diverse in knowledge with the mind-set of a good outcomes for her residents, families and staff." "The Manager and staff are amazing. They know everyone in the home and their relatives," and "Management is excellent and are always available to talk to."
- The registered manager demonstrated full awareness of the duty of candour. They described the duty of candour as being transparent when things went wrong. The duty of candour was considered for any safeguarding matters and incidents and records confirmed these were completed and documented.
- The registered manager understood their regulatory requirements, they were knowledgeable on regulations and legislation. They understood their duty to notify CQC of events in the service, records confirmed this had been done appropriately.

Working in partnership with others; continuous learning and improving care

- The registered manager had linked up with various community organisations. This included Spitz musicians who provide for live music sessions with residents. The Spitz took up residency at Bridgeside Lodge, providing music during palliative care and end of life and also playing at residents' funerals. The Spitz have also facilitated visits from local primary schools and therapy dogs.
- Members of the management team and staff had been involved in a number of innovative projects and high level research, including research with Dental Public Health with University College London. , More recently with Queen Mary University of London on how Electronic Health Records can be used to enhance practices in care .
- The home has also participated in Islington councils' clean air project and had won an award for providing outstanding Dignity in care.
- The registered manager had won an award for outstanding contribution to social care from the chief nursing officer in the Local authority.
- There was an exceptionally robust quality assurance process in place to cover all aspects of care delivery, day to day running of the service and daily checks were embedded into staff practice. Any areas identified for improvement were actioned and reviewed again to check the actions were appropriate. Findings of audits and lessons to be learned were shared with staff to ensure they were working towards a common goal and to minimise reoccurrence following an incident or complaint.

- The registered manager had a good overview of outcomes of audits which were recorded and had oversight of action plans so they could be completed in a timely way.
- The service worked with the NCL (North Central London) and NHS England in developing staff to be future nurses by starting their journey as nursing associates.
- Records showed people were supported to access services in the community including GPs, the local clinical commissioning group (CCG) and specialist professionals to promote people's health and wellbeing when required.
- Information showed the service worked closely with others. For example, the Local Authority and other healthcare professionals and services to support the delivery of quality care provision.