

# Bridge Care Residential Limited

# Burn Brae Lodge

## Inspection report

Prospect Hill  
Corbridge  
Northumberland  
NE45 5RU

Tel: 01434632022  
Website: [www.burnbraelodge.co.uk](http://www.burnbraelodge.co.uk)

Date of inspection visit:  
12 January 2021  
20 January 2021

Date of publication:  
17 February 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

Burn Brae Lodge is a residential care home providing personal care to up to 31 people. At the time of the inspection there were four people at the home.

The home is a large adapted detached building set in its own grounds. The accommodation for people is on ground and first floor levels.

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

People and relatives said the home was a safe place to live. They made many positive comments about the caring nature and attentiveness of staff.

Medicines were managed in the right way.

Infection control procedures were in place and all staff had training in this. The provider had kept up to date with the latest national guidance about infection control and personal protective equipment (PPE).

People and relatives praised the management style of the provider and manager and described them as open and approachable.

People and relatives valued the way the staff had kept them well-informed throughout the pandemic and recent outbreak. The culture of the home is one of an extended family.

The home had good working relationships with local health and social care agencies to support the needs and well-being of the people who live there.

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 October 2017).

### Why we inspected

We received concerns in relation to cleanliness and safe working arrangements in the home during the recent outbreak of COVID-19. As a result, we undertook a focused inspection to review the key questions of Safe and Well-led.

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 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 coronavirus and other infection outbreaks effectively.

#### 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?**

The service was safe.

Details are in our safe findings below.

**Good** ●

### **Is the service well-led?**

The service was well-led.

Details are in our well-led findings below.

**Good** ●

# Burn Brae Lodge

## 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 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.

#### Service and service type

Burn Brae Lodge 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 provider was also the registered as manager 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

We gave the home two hours' notice. This supported the home and us to manage any potential risks associated with COVID-19.

#### What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and health professionals who work with the service. We used this information to plan our inspection.

#### During the inspection

We spoke with one person who used the service and three relatives by telephone about their experience of the care provided. We spoke with the provider, manager and a senior care worker.

We reviewed a range of records. This included care records and medication records. We reviewed records relating to the management of the service, including policies and procedures.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at premises check records and policies. We spoke with health professionals who regularly visit 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 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

- The provider continued to have safeguarding systems in place to protect the people who lived at the home.
- People and relatives said the home was a safe place to live. Their comments included, "I feel safe with them (staff). They are very caring" and "I think she feels safe – staff are lovely with them."

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

- The provider continued to carry out assessments of risk to people and to the premises to make sure the home was a safe place to live and work.
- The provider undertook regular checks of the premises, such as hot water temperatures.
- The provider had been carrying out a refurbishment of the home prior to the outbreak, including new wood-effect flooring throughout the home. Some areas of the home were starting to look worn with many areas of chipped paintwork.

Staffing and recruitment

- There were sufficient staff to support people. During the recent outbreak, the service had been supported by the local authority and agency staff to maintain safe staffing levels until home staff could return to work.
- People and relatives said there were enough staff and they were attentive. Their comments included, "They are always checking I'm ok" and "Staffing levels seem ok. They always make time [for me and my family member] even when they're busy".
- The home continued to use safe recruitment practices when appointing new staff.

Preventing and controlling infection

- The service followed the latest national guidelines relating to the prevention and control of infection. Arrangements were in place for people to follow shielding and social distancing rules.
- Staff were using personal protective equipment (such as aprons and gloves) effectively and safely. There were aprons, masks and gloves readily accessible for staff around the building. One staff member was the designated infection control lead for the service who checked hygiene practices.
- There was a good cleaning schedule in place, but some contact points, such as handrails, were not always impervious so would be more difficult to keep clean. After the inspection, the provider commenced a refurbishment plan to address the areas where paintwork was worn.

Using medicines safely

- Medicines were managed in a safe way. People and relatives had no concerns with the way medicines

were administered.

- Medicines records were clear and up to date. A record was also kept if when people were given 'when required' medicines, such as simple pain relief, and whether these had been effective.
- Staff had training and competency checks in medicines management.



# 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 good. At this inspection this key question has now remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Working in partnership with others

- People received support that was personalised to meet their individual needs. People and relatives commented, "I lead my own life and then they help me when I want it" and "[My family member] is happy with the service and we are more than happy with it."
- Relatives and most staff felt there was a "family-orientated" atmosphere in the home.
- The service had good working relationships with external health and social care agencies. One healthcare professional said, "I have good contact with the home. They always ask if they need anything and they always make appropriate referrals."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The views of people and relatives were sought. They told us management staff were approachable and they would be able to "suggest or raise anything" and would be "confident in their response".
- Relatives said the provider and staff were "very good at keeping us informed" and up to date with the latest guidance.

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; Continuous learning and improving care

- The provider understood their responsibility to be honest if things went wrong. There was open and appropriate communication with relatives and care professionals.
- Relatives were keen to express their praise for staff. They strongly expressed that the recent coronavirus outbreak at the home was "an inevitable consequence of the pandemic" and not the fault of staff.

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

- The provider continued to carry out routine audits of the service to check its quality and safety.
- The provider had made changes in the home wherever possible in light of the pandemic. For example, installing a washbasin at the front entrance and creating a screened visitors' room to allow safe visiting prior to the current lockdown.