

Bridge View House Nursing Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
31 July 2023

Service provided by:
Tayside Care Limited

Service provider number:
SP2005007567

Service no:
CS2003010712

About the service

Bridge View House Nursing Home is a care home service for older people provided by Sanctuary Care Limited. The home provides care for a maximum of 43 older people. Bridge View House is located to the west of the city centre in Dundee. The home consists of the original two storey house and extensions. There are attractive views over the River Tay from the front of the house.

About the inspection

This was an unannounced inspection which took place on 15 and 26 July 2023. The inspection was carried out by two inspectors from the Care Inspectorate and an inspection volunteer. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with ten people using the service and four of their family/friends/representative
- spoke with eight staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- People told us staff were kind and we saw nice interactions between staff and the people living in the home.
- Staff were welcoming, courteous and friendly.
- Controlled drug management needed to be improved.
- The quality of meals needed to improve to ensure people enjoy a nutritious diet.
- Staff were well recruited and trained.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	3 - Adequate
How good is our leadership?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

3 - Adequate

We evaluated how well people's health and wellbeing was supported. We made an overall evaluation of adequate, as there were some strengths, but these just outweighed the weaknesses.

People experienced care and support with compassion because there were warm, encouraging positive relationships between staff and people living in the care home. People were supported by staff who clearly knew them well; people told us that these relationships were important to them.

People's rights were respected, legal arrangements were clearly documented, and people could participate in monthly meetings.

The home has a regular programme of group activities in place. The home had established links with a local nursery. The children come to visit once a fortnight and this intergenerational event was valued by those who attend. Staff to support activities are not available over seven days, and it was not clear from records how people are supported to engage with meaningful activities when activities staff are unavailable. We noted that there were a significant number of people who did not join in with the group activities and we have asked the provider to consider how they ensure that everyone has regular opportunities to participate in activities meaningful to them. **An area for improvement is made.**

The garden now has a pleasant accessible patio and garden room for people to enjoy and this is well used, providing people with the opportunity to get outside and enjoy some fresh air.

People should benefit from care plans that are reviewed and monitored regularly. Care plans were informed by a range of recognised assessment tools which helped to maintain and improve people's health and wellbeing. This information had been monitored regularly and we saw that appropriate referrals had been made to other health professionals if required and that their advice and guidance was reflected in relevant care plans. The service has changed to an electronic care planning system in the past month. Care plans appeared to be personalised and regularly updated as people's needs and preferences changed.

People should expect to be given support with eating and drinking in a dignified way and have their personal preferences respected. Mealtimes appeared to be a calm, pleasant part of the day. People were encouraged and enabled to eat their meals independently with just the right level of support from staff, where needed. However, we observed most people returning their evening meal as they did not enjoy what was served, other people said they had made a special order and the kitchen had not cooked what had been asked for. When asked about the quality of meals some people commented: "the food needs to be better", "sometimes the food is nice and other times I don't like it", "I was given omelette twice today because they don't have any baked potatoes". People should be able to enjoy meals that are nutritious, well cooked, well presented and that meet their choices and expectations. **A requirement is made.**

The service uses a computerised medication administration record (MAR). This system provides in-built safeguards and alerts the service when medication should be re-ordered by the service. The senior staff and managers have all received training with the new system. The manager has regularly checked the medication practice of staff and recorded the findings. We looked at a sample of people's MARs and established that staff had given the correct medication to people at the stated times. We concluded that people could be confident that the staff who supported them to take their medication safely had the correct knowledge and training.

However, examination of the controlled drugs identified the stock level of one controlled drug did not accurately reflect the balance in the register. We were able to identify this was a record keeping error and not a missed administration. The controlled drugs register must always be an accurate reflection of the balance of drugs in the home: the manager acknowledged this was poor practice and agreed to address this issue. **A requirement is made.**

Overall, we found the home was clean and tidy. Housekeeping and domestic staff had good awareness of the requirement for enhanced cleaning and laundry management. We viewed people's rooms and found them to be fresh and clean. The service has a comprehensive prevention and protection plan in place and everyone we spoke with said that the care home was kept clean and tidy.

Requirements

1. By 27 August 2023, you must ensure that service users are provided with nutritious meals, snacks and drinks in accordance with their nutritional preferences.

This is in order to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I can choose to suitably presented and healthy meals and snacks, including fresh fruit and vegetable, and participate in menu planning.' (HSCS 1.33)

2. By 27 August 2023, the provider must ensure that medication is managed in a manner that protects the health and wellbeing of service users.

To achieve this, the provider must:

- ensure management of controlled drugs is in line with best practice guidance.

This is in order to comply with Regulation 3, Regulation 4(1)(a) and Regulation 4 (1)(b) and Regulation 4(1)(b) and Regulation 5(2)(b) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24)

Areas for improvement

1. To promote opportunities for daily meaningful activities for all people who use the service, the provider should review the way in which these are planned and facilitated. Account should be taken of the abilities and preferences of each person. Participation in activities should be recorded and evaluated in an outcome focused manner, to review if the activity was a success for the person. Outcomes should be regularly evaluated to ensure they continue to meet each person's needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I can choose to have an active life and participate in a range of recreational, social, creative, physical, and learning activities every day, both indoors and outdoors.' (HSCS 1.25)

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate. We identified some strengths but these just outweighed weaknesses. Whilst strengths may still have a positive impact, the likelihood of achieving positive experiences and outcomes for people was significantly reduced because improvement was needed in key areas.

People should expect to benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes in place.

The manager had a comprehensive suite of quality assurance tools. There were systems in place to audit a range of areas including analysis of accidents and incidents, staff training needs, medication and reviewing care plans. This helped staff to identify trends and take prompt action to prevent reoccurrence.

Daily flash meetings took place in the home with all departments represented; a minute of these was not always taken, however, the manager gave assurances this would be addressed. Staff meetings were held regularly. This meant that communication was effective within the service.

The manager had oversight of staff training which was up to date. Robust recruitment processes were in place. There was a clear complaints procedure available to all stakeholders and recent complaints had been dealt with to effective resolution. A well-structured development plan is in place for the service. This was informed by input from stakeholders, ensuring people's experiences were being evaluated and feedback acted on.

Safe systems were in place to safeguard people's finances.

All staff spoken to were complimentary about the management team and advised that they found them supportive and approachable. Relatives told us that they felt comfortable and confident giving feedback or raising concerns, because they knew that the management team welcomed this and were willing to work in partnership.

The manager demonstrated a good understanding about what was working and what improvements were needed. There was a commitment to development and improvement, taking feedback from the inspection forward, and ensuring that people receive a high standard of care.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate

How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate

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