

Bridge View House Nursing Home Care Home Service

55 Magdalen Yard Road Dundee DD1 4LQ

Telephone: 01382 566802

Type of inspection: Unannounced

Inspection completed on: 16 February 2018

Service provided by:

Tayside Care Limited

Service provider number:

SP2005007567

Care service number:

CS2003010712



About the service we inspected

Bridge View House Nursing Home is a care home service for older people provided by Tayside Care Limited. The home provides 24-hour care for a maximum of 42 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 a two-storey extension to the back. There are attractive views over the River Tay from the front of the house. The care home's aims and objectives state that it aims to "provide individual nursing care in a relaxed and homely environment, where privacy and dignity will be respected."

How we inspected the service

We wrote this report following an unannounced inspection. This was carried out by two inspectors and an inspection volunteer. The inspection took place on:

Tuesday, 13 February 2018 between 10:00am and 3:30pm Friday, 16 February 2018 between 9:45am and 12:15pm

Feedback was given to the provider, manager and a representative form Dundee City Council contracts department at the end of the inspection.

During the inspection we spoke with: residents, relatives/visitors, the manager, registered nurses and care staff. We looked at:

- the action plan developed following the last inspection and upheld complaint investigation
- residents' assessments, personal plans, risk assessments and reviews
- medication records and processes
- the environment

We also spent time observing staff practices and how staff interacted with the residents.

Taking the views of people using the service into account

We spoke informally with residents during the inspection visits. Comments received were generally positive.

Comments included:

"It's just fine here, no complaints."

"I'm happy and feel safe."

"Everything is good, I like it here."

"I'm happy, I like the food."

"The entertainment is good."

"On the whole everything is fine."

"I'm really happy and contented with everything."

We observed that the residents were relaxed, calm and freely moving about the home. They responded positively to staff interaction and assistance.

Further views of residents were commented on in our previous inspection report dated 9 August 2017. This should be read in conjunction with this report.

Taking carers' views into account

We spoke with five relatives during the inspection visits. Comments received were mixed about the quality of care given. Some of the relatives were very unhappy about a number of issues, including the provision of chiropody services. The manager was aware of the issues raised and stated she was dealing with these and hoped to resolve the situation to the satisfaction of all.

Further comments included;

- "My parent is well cared for, the staff are very good."
- "During a period of illness the staff were very good with my parent."
- "Can't fault them."

Further views of relatives were commented on in our previous inspection report dated 9 August 2017. This should be read in conjunction with this report.

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

Requirement 1

The provider must ensure the health and wellbeing of service users. To achieve this, the provider must:

- review medication storage and administration procedures to ensure that the administration of medication follows best practice guidance and medication is administered within the prescribed timescale.

- refresher training should be provided, which includes evidence of competency.

This is in order to comply with:

SSI 2011/210 Regulation 4(1)(a) - a requirement to make proper provision for health and welfare of service users and Regulation 15(b) - Staffing.

This requirement was made on 29 March 2016.

Action taken on previous requirement

We continued to evidence a number of missing entries in the Medication Administration Recording Sheets (MARS). Although medication training had been carried out, staff were still not adhering to best practice guidance. The manager acknowledged this was not good practice and agreed to address immediately.

Not met

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Requirement 2

The provider must make proper provision for the health, welfare and safety of service users. In order to achieve this the provider must ensure;

Staff carry out all dressing changes within timescales set in treatment plans and ensure all wound assessments are kept up to date.

This is in order to comply with:

SSI 2011/210 Regulation 4(1)(a) - a requirement to make proper provision for health and welfare of service users

This requirement was made on 9 August 2017.

Action taken on previous requirement

There was no-one with any wounds in the care home during the inspection, therefore we could not assess this requirement. This will remain in place and be followed up at the next inspection visit.

Not met

Requirement 3

The provider must make proper provision for the health, welfare and safety of service users. In order to achieve this the provider must ensure;

Staff complete all relevant weight monitoring/recording tools in the service users' care files as directed by the provider's policy and procedure documentation. This will enable effective monitoring and evaluation of care.

This is in order to comply with:

SSI 2011/210 Regulation 4(1)(a) - a requirement to make proper provision for health and welfare of service users

This requirement was made on 9 August 2017.

Action taken on previous requirement

In some of the care files we examined, weekly weighing of residents had been identified, however, this was not being carried out routinely. In order to effectively monitor and evaluate residents' nutritional wellbeing the service must improve their practice.

Not met

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

Recommendation 1

All documentation should be accurate, complete and clear. The quality of documentation should be monitored by senior staff and, where it is considered to be poor, action should be taken to bring about improvement.

National Care Standards for Care Homes for Older People: Standard 5 - Management and staffing.

This recommendation was made on 9 August 2017.

Action taken on previous recommendation

We continued to find issues with record keeping and overall monitoring by senior staff. The manager acknowledges this is not good enough and will address.

This recommendation remains outstanding.

Recommendation 2

Where a person has an identified need in their personal plan for an aspect of their care to be monitored, staff should have a clear audit trail showing how this is being achieved.

National Care Standards for Care Homes for Older People: Standard 5 - Management and staffing. National Care Standards for Care Homes for Older People: Standard 6 - Supporting arrangements.

This recommendation was made on 9 August 2017.

Action taken on previous recommendation

As detailed under recommendation 1, monitoring and auditing of care delivery must improve to ensure residents' wellbeing is being monitored and maintained.

This recommendation remains outstanding.

Recommendation 3

The following recommendation arose as a result of a complaint:

The provider should ensure that staff have appropriate training on reflective writing. In addition, the provider should access specialist support to ensure all relevant staff have the working knowledge and skill required to support the named person through the difficulties associated with his dementia.

National Care Standards for Care Homes for Older People: Standard 5 - Management and staffing arrangements Standard 14 - Keeping well - Healthcare

This recommendation was made on 2 February 2018.

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Action taken on previous recommendation

Meetings have taken place with the community mental health team. Plans are in place for training to be delivered to staff to improve their knowledge, skills and record keeping, particularly when supporting any resident with dementia. Progress in this will be monitored at the next inspection visit.

This recommendation remains outstanding.

Complaints

There has been one upheld complaint since the previous inspection. Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Туре	Gradings	
9 Aug 2017	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 4 - Good 3 - Adequate 3 - Adequate
28 Feb 2017	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 4 - Good 3 - Adequate 3 - Adequate
29 Mar 2016	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
20 Feb 2015	Unannounced	Care and support Environment	4 - Good 4 - Good

Date	Туре	Gradings	
		Staffing	4 - Good
		Management and leadership	4 - Good
26 Mar 2014	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
6 Feb 2013	Unannounced	Care and support	Not assessed
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	4 - Good
26 Oct 2012	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	Not assessed
		Management and leadership	Not assessed
10 Nov 2011	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	Not assessed
28 Apr 2011	Unannounced	Care and support	 2 - Weak
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	Not assessed
18 Nov 2010	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
21 Jul 2010	Announced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
29 Mar 2010	Unannounced	Care and support	2 - Weak
		Environment	Not assessed

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Date	Туре	Gradings	
		Staffing Management and leadership	3 - Adequate Not assessed
6 Oct 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 3 - Adequate Not assessed
31 Mar 2009	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed 4 - Good
15 Dec 2008	Announced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good

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