Bonchester Bridge Care Centre
Care Home Service

Bonchester Bridge
Hawick
TD9 8JQ

Telephone: 01450 860 241

Type of inspection:
Unannounced

Completed on:
29 August 2019

Service provider by:
St Philips Care Limited

Service provider number:
SP2003003516

Service no:
CS2003015517
Bonchester Bridge Care Centre has been registered since 2003.

Bonchester Bridge Care Centre is part of the St. Philips Care Group, a national care company. The care home accommodates up to 24 older people in a large, converted country house. It is situated on the edge of the small village of Bonchester Bridge, approximately seven miles from the local Borders towns of Hawick and Jedburgh.

The service is set out across three different levels within the main building of the care service. All levels are accessed via stairs or a lift. The communal areas are all situated on the ground floor. This includes two large sitting rooms, one specifically for residents that smoke and two smaller sitting areas for those that prefer a quiet area to sit. There is also a large airy dining room with lots of natural light where some activities also take place.

Aims and objectives of Bonchester Bridge Centre include fulfilment; “Residents should expect their quality of life to be enhanced by admission to this centre, by the provision of a safe, manageable and comfortable environment. Residents should expect stimulation and encouragement to pursue their lives to the maximum chosen physical, intellectual, emotional and social capacity”

For this inspection, we received views from six of the 23 people using the service. One hundred percent said that they felt safe and valued. Eighty five percent felt listened to and accepted. People spoke highly about the staff that supported them and this was reflected in the questionnaires. One hundred percent either agreed or strongly agreed that staff get on well with the people they support and were able to get help from staff when they needed it.

We received two evaluations from relatives that highlighted that they felt happy with the care and support the service provided for their relative. This was an unexpected low return, however this coincided with a recent quality assurance questionnaire St Phillips had just completed prior to our inspection. These questionnaires also reflected positive outcomes for the people who live at Bonchester Bridge Care Centre.

From this inspection we evaluated this service as:

<table>
<thead>
<tr>
<th>How well do we support people’s wellbeing?</th>
<th>5 - Very Good</th>
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</thead>
<tbody>
<tr>
<td>How good is our leadership?</td>
<td>not assessed</td>
</tr>
<tr>
<td>How good is our staffing?</td>
<td>not assessed</td>
</tr>
<tr>
<td>How good is our setting?</td>
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</tr>
<tr>
<td>How well is our care and support planned?</td>
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Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing? 5 - Very Good

There were very good caring interactions from a staff team that demonstrated the principles of the Health and Social Care Standards. People experienced care and support which demonstrated dignity and respect. Staff supported residents with warmth and genuine concern. The staff took time for residents to be as independent as possible making the most of their skills and not rushing them. The residents appeared interested in the activities in the lounge and laughter and friendships were evident in the group.

There was a very good programme of activities that people could choose to involve themselves in. The programme had a balance of one to one activity as well as in social groups. Activities that were available for people to attend included chair exercises, puzzles, quizzes and pamper activities which included nail care and foot spas. Since the last inspection the service have got their vehicle repaired, this enables people to go out to local cafes, go for lunch and visit areas of interest around the borders. The service held a coffee afternoon which was well attended by the local community, which demonstrated good community involvement.

We discussed with the manager how these activities could be evaluated more. This evidences how people continue to enjoy these events and highlights positive outcomes for people. It can also be used to evidence when people begin to get bored or uninterested in these events and encouraged to participate in other activities.

Residents meetings where a little infrequent, we discussed this with the manager to see how this can be taken forward to happen a little more often.

The care team had a very good overview and knowledge of people’s health needs. This ensured confidence with residents and their families/carers that the staff team could respond promptly to any changing health needs and be reassured that these could be dealt with promptly. Health assessments were completed on a regular basis. There was good links with the GP and other visiting professionals who we met during our inspection. The staff team were very responsive in ensuring that the plans that visiting health professionals put in place were followed to ensure good health care outcomes for each person.

People benefited from a comprehensive medicine management system. Medication that was given on occasion had clear protocols in place. Senior carers had completed additional training with the local pharmacy to ensure that their medication knowledge was the most up to date and reflected best practice. There was also regular medication audits both by the service and the local pharmacy to highlight any errors or discrepancies. This ensures that the service can be responsive to any issues highlighted and work on these to minimise risk of further error.

People could choose from well-presented meals which were prepared by the service’s cook. Meals, snacks and drinks reflected their cultural and dietary needs and were made from fresh produce including fresh fruit and vegetables. The people we observed appeared to enjoy the food and drinks and especially the home baking that was provided to them in an unhurried relaxed atmosphere. People benefited from access to a range of specialist cutlery and aids should they need it. Staff also provided extra support should people need it to ensure they maintained a healthy diet.
How good is our leadership?

This key question was not assessed.

How good is our staff team?

This key question was not assessed.

How good is our setting?

This key question was not assessed.

How well is our care and support planned?  

5 - Very Good

The service uses person centred software which is a digital care planning system that enables staff to be able to document peoples progress as and when it happens. This ensures that the information that is documented about people is as current and up to date as it can be.

Care plans contained very good assessments where people’s choices and preferences were documented. However, there was still some small areas where specific choices for people could be reflected a little clearer. Staff were able to be led well by what was written within the care plan to meet the health and social care needs of the people they support. Staff were aware of people’s needs and did their utmost to meet these with kindness and care.

The information we observed in the care plans showed how staff achieved outcomes for people. This meant that how people’s preferences and choices were being met were evaluated and information from the evaluation was updated in the care plan.

People benefited from care plans which were regularly reviewed, evaluated and updated involving relevant professionals and take account of best practice. There was prompts from the digital system should these fall behind. Peoples relatives/carers/friends and other professionals took part in regular reviews. However, these were a little behind due to the appointment of a new manager. The service was very responsive and was working with families to get these up to date. This ensured that the relevant people were being kept updated with the individual’s well-being and could be involved in their care.

Where people were unable to make choices or decisions, supporting legal documentation was in place. This ensured that staff were clear about their responsibilities in supporting people with any decisions, by involving friends and family or advocacy services.

Anticipatory care and ensuring that people are helped to live well right to the end of their life is important. The service had clear plans in place to reflect this. These plans detailed peoples wishes and preferences should an emergency or unexpected event happen. This ensured that the staff team knew what to do or who to contact should a persons health deteriorate quickly.
### 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

<table>
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<tr>
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<th>5 - Very Good</th>
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</thead>
<tbody>
<tr>
<td>1.1 People experience compassion, dignity and respect</td>
<td>5 - Very Good</td>
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<tr>
<td>1.2 People get the most out of life</td>
<td>5 - Very Good</td>
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<tr>
<td>1.3 People’s health benefits from their care and support</td>
<td>5 - Very Good</td>
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| How well is our care and support planned?                                                                  | 5 - Very Good |
| 5.1 Assessment and care planning reflects people’s planning needs and wishes                              | 5 - Very Good |
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أ mundagásapózx ése praksanáttí aná férmat ànd anñana vàyay pàowya vàyay.

پ کی اشامت بر رخوست کرکنپ داک گلکسی اورگنیزیشن مین فرتنم کی پاکتی بے۔

बेँकही 'के डिए पुस्तकाधृत एवं कुल्लू अठे तेंडला क्रामवाद विवेकश्य रे।

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