

3 Bridges Care Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
8 March 2023

Service provided by:
Northcare (Scotland) Ltd

Service provider number:
SP2003002314

Service no:
CS2012307106

About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services can be found on our website at www.careinspectorate.com

This service registered with the Care Inspectorate on 6 June 2012.

3 Bridges Care Home is registered for 72 older people, 36 of whom are people who have been diagnosed as living with dementia and 36 who are frail older people. The provider is Northcare (Scotland) Ltd. The home is located in the southside of Glasgow, near local amenities including shops and is served with good public transport routes.

The care home is purpose-built with accommodation on two storeys which is divided into four self-contained units. Each unit contains a lounge/dining room and kitchen. All bedrooms are spacious singles with en-suite shower facilities. The home has an attractive enclosed garden for people who use the service.

The aims and objectives of the service are to "provide care, in a safe and secure environment, where service users are supported to achieve independence, enabled to make choices and encouraged to work in partnership with staff to maximise their quality of life".

Relatives were incredibly positive about the care and support provided:

"My Dad is well looked after, and care for well".

"The staff know my mum really well, and she really enjoys living here".

"Home has been fantastic- made the transition so smooth for my mum".

"Overall care is very good- staff are kind and responsive".

"Going very well- they have done a wonderful job". "Absolutely great home- staff are marvellous".

About the inspection

The inspection which took place on 7 and 8 of March 2023. The inspection was carried out by two inspectors from the Care Inspectorate. 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 15 people using the service and 12 of their family/friends/representatives.
- Spoke with 11 staff and management.
- Observed practice and daily life.
- Reviewed documents.
- Spoke with 2 visiting professionals.

There were 68 people using the service at the time of inspection.

Key messages

Effective quality assurance systems supported managers to monitor and maintain high standards of care.

People benefited from a well presented and maintained living environment.

People were supported to keep as well as they could and to get the most out of life. Quality staff training and development supported high standards of practice.

The management team were working to improve consistency of support planning.

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?	5 - Very Good
How good is our leadership?	5 - Very Good

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

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Residents and their relatives told us that compassionate staff delivered care that was person centred and respectful. Staff were kind and sensitive in their interactions with people. This contributed to people feeling safe and valued.

People using the service told us:

"I like it here, I have lots of friends which is nice".

" I like it where I am, and I can do art and go outside and do Art".

" I have never had it so easy in my life, I love it here, the staff are great".

"I feel safe here".

Staff knew people's routines, preferences, and needs. This helped staff work consistently to ensure that people received the support that was right for them.

Risk Assessment tools helped identify areas of risk. This included risk of falls, unplanned weight loss, dehydration, and skin breakdown. Personal plans were in place to help reduce risks and promote positive health outcomes. However, the quality of information varied therefore we have repeated a previous area of improvement. See area of improvement 1.

Mealtimes were calm and well organised, and people were supported with hand hygiene prior to eating. Staff were attentive to people's needs. Meals were well presented and appetising. Most people commented that they liked the food and confirmed choices were offered. Feedback was used to inform menu changes. This helped ensure ongoing satisfaction with meal arrangements.

People could be confident that their medication was well managed. Medication audits checked medication was given in accordance with the prescribers' instruction. A person-centred approach to medication administration meant that people received their medication in private.

Staff used effective approaches to calm and reassure people who experienced stress and distress. The service should develop personal plans and protocols to support people who may experience episodes of stress and distress.

Staff benefited from a robust training programme. The provider planned to build upon recent dementia training, facilitated by the services specialist dementia nurse. This will help ensure staff have the skills and knowledge to promote positive experiences and outcomes for people living with dementia.

Staff were responsive to changes in people's health and sought support from health partners where appropriate. This helped ensure that people received the right support when they needed it.

People benefited from social interaction, meaningful activity, and fresh air. People spoke positively about activities they enjoyed including, Yoga, Art and one to one time with staff. There was a well-appointed hairdressers and an attractive garden area. A putting green and small animals encouraged people to use the outside space. Visits and family celebrations were supported which helped keep people get the most out of life.

People could be assured that they were living in a clean, tidy and pleasant environment. Staff adhered to current infection prevention and control guidance and personal protective equipment (PPE) was used appropriately. However, a lack of clinical waste bins in some areas of the home could cause confusion when disposing of used PPE. This was addressed during the inspection.

Areas for improvement

1. The service provider should ensure care plans are in place which reflect the current needs of the person who uses the service and provide clear guidance on strategies and approaches to be used by staff to meet residents' identified needs.

This ensures that support is consistent with the Health and Social Care Standards:

How good is our leadership?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People commented positively about the strong management and leadership in the service. The manager was accessible and approachable, and people felt confident any issues raised would be responded to.

People benefit from a culture of continuous improvement with robust quality assurance processes. Effective quality audits ensured the manager had a clear overview of standards across all areas of the service. Audits, observation of practice and feedback from people who use and work in the service gave information about what was working well and where further improvements were needed. For example accident audits attempted to identify trends and any risk reduction measures needed. Audits of moving and assisting practice gave assurance that staff followed best practice guidance when supporting people. This approach supported positive outcomes for people who live in 3 Bridges.

The manager communicated well with the staff team. Staff were well supported through regular one to one sessions and team meetings. This gave staff the opportunity to reflect on their practice and set and work towards individual goals. This meant staff were able to inform positive changes in the service. This approach improved staff morale as staff felt listened to and valued. The role of a mental health first aider demonstrated the provider placed value on the wellbeing of the staff group.

The management team actively sought the views of people who use the services and their relatives. Relative meetings were about to be reinstated to support ongoing communication and involvement in the development of the service.

The management team employed safe recruitment practices and supported new staff through a robust induction and training programme. This meant that staff were adequately prepared for their role. Effective oversight of staff training and development needs ensured the staff team had the skills and knowledge to meet people's needs.

Quality assurance systems informed a service development plan. Identified improvements were aligned to the expected outcomes identified in the quality framework. This demonstrated a rights-based focus and meant people were kept at the heart of improvements.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The service provider should ensure care plans are in place which reflect the current needs of each resident and provide clear guidance on strategies and approaches to be used by staff to meet residents' identified needs

This ensures that support is consistent with the Health and Social Care Standards: 1.15 My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.

This area for improvement was made on 1 August 2019.

Action taken since then

We concluded that personal plans could be further developed. We found improvements in how care reviews were structured, however, there was work to be done to ensure the documents are completed consistently.

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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
1.4 People experience meaningful contact that meets their outcomes, needs and wishes	5 - Very Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	5 - Very Good
How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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