



Inspection Report on

Brompton Lodge limited

**54 Rhos Road
Rhos On Sea
Colwyn Bay
LL28 4RY**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

10/10/2024

Welsh Government © Crown copyright 2024.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gov.uk You must reproduce our material accurately and not use it in a misleading context.

About Brompton Lodge limited

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Brompton Lodge Residential home Ltd
Registered places	34
Language of the service	English
Previous Care Inspectorate Wales inspection	21 January 2024
Does this service promote Welsh language and culture?	This service is making a significant effort to promote the use of the Welsh language and culture or is working towards being a bilingual service.

Summary

The provider has good governance arrangements and quality assurance processes in place to ensure people are supported to achieve their desired well-being outcomes. The Responsible Individual (RI) works closely with the manager and visits regularly as part of their oversight of the service. The provider values feedback from staff, people and their relatives and uses this to inform developments in the service. New staff are recruited safely, and staff are well supported by the manager via supervision, and annual appraisals.

The home is warm, welcoming, well maintained and decorated in a homely way. People told us they like living here, they feel safe and well supported by care staff. The manager ensures detailed personalised plans for people's care include appropriate risk assessments and are reviewed regularly with input from people and their families. People can choose to spend time in a variety of communal spaces or their own rooms. Care staff are kind, attentive and well trained. They treat people with dignity and respect and know people well.

Well-being

The service promotes people's physical and mental well-being and people are able to make decisions in their day-to-day care. There is a homely atmosphere that gives people a sense of belonging. People have meaningful interactions with others and value the relationships they have built. Care workers have a good understanding of people's needs. They encourage people to maintain a healthy, varied diet and act upon any health concerns. Safe medication systems ensure people consistently receive their prescribed medicines.

People's individual care and support needs are recognised and understood. A range of assessments and personal plans guide care workers in promoting people's physical and mental well-being. These are updated following changes in people's needs and any new advice given by health and social care professionals. Daily recordings show people receive the care and support they need, in line with their personal plans. There are effective systems for recording and monitoring people's care. People have positive interactions with staff and can take part in activities they enjoy. The service promotes a good standard of hygiene and infection control to reduce risks of cross infection.

People live in a clean and comfortable accommodation. They have access to a garden and spacious lounge and dining area. Communal and private rooms are homely and generally well furnished. Equipment is regularly serviced to ensure it is safe for use. Environmental safety measures are in place and routine health and safety checks are carried out. All staff complete mandatory health and safety training. The RI assesses the premises during visits and makes sure works are carried out as needed.

Systems are in place to help protect people from harm. Staff are visible and attentive to people's needs. Equipment is in place, as needed, to promote people's safety and comfort. Staff complete training in relation to safeguarding vulnerable adults. They are familiar with and know how to access the service's policies and procedures. Care staff respond promptly to people's calls for assistance. They receive mandatory and specialist training that supports them in their roles. Staff recruitment processes are robust. The service follows Deprivation of Liberty Safeguards (DoLS) procedures to ensure any restrictions people face are lawful and in their best interests.

Care and Support

People's needs are carefully assessed before they move into the home. Information from health services and professionals is reviewed as part of this process. People are involved in developing and reviewing personal plans, which outline in detail their preferences, routines and desired goals. Risk assessments identify the strategies for managing risks to people's safety and well-being. They help guide care staff in meeting all aspects of an individual's care safely. The service provider has invested in an electronic care system and all care records are stored in the system. Care staff are visible within communal areas and people told us they receive frequent checks when spending time in their rooms. Electronic records confirm care workers carry out safety checks routinely.

People receive good quality care and support from a team of care staff who are familiar with their individual needs and wishes. We saw people interacting well with care staff and other residents. There was much laughter and cheerful conversation that helped create a relaxed, homely atmosphere. Care staff respect people as individuals and support them to achieve their own goals as set out within their personal plans. These are regularly reviewed to make sure they remain appropriate.

People have regular and meaningful interactions with care staff. People told us they are happy in their home; we saw them relaxing in their own rooms or smiling and laughing as they spent time with others. People have access to a call bell, and we saw care staff attending to people quickly when called. The activities person is enthusiastic and encourages people to engage in an array of activities. One person told us how much they enjoyed the recent art and craft session and showed us their work. Collages which have been created by the residents are proudly displayed in the corridor and some been donated to a local school. We saw several crafts people have created around the home in their rooms.

People are complimentary about the quality and range of food and drink on offer. All meals are homemade with locally sourced produce. People have a say in what meals are provided as menus are discussed with residents. We saw people eating in various places, as desired and appropriate support given when needed. Where appropriate care staff keep clear records of what people eat and drink. People experience a varied, balanced diet overall. People's weight is regularly monitored, and the manager completes monthly audits so any concerns about their nutrition can be acted upon quickly.

The service stores people's medicines securely and monitors storage temperatures daily to make sure they are appropriate. The manager carries out monthly medication audits and random spot checks so that any issues can be identified and dealt with quickly. Records show people receive the right medication at the right time.

Environment

Brompton Lodge is a well presented home with suitable adaptations and facilities. Communal and private rooms are spacious, homely with good quality furnishings. The home has suitable arrangements for storing and accessing confidential information. People have easy access to an interesting secure garden that offers stimulation. A visible path helps people move freely and safely around their garden. They can also relax in the various seating areas and enjoy the numerous plants and flowers. People told us they love looking out of their window and how they help the gardener. People have access to items that are important to them within their individual rooms, which they have personalised to varying degrees.

The home promotes a good standard of hygiene and infection control. A recent food hygiene rating of 5 (very good) in 2024. Private and communal rooms are clean and tidy, and people told us their rooms are cleaned daily. Domestic staff take pride in their work and told us they are happy and feel very well supported, they have everything they need which makes their workload manageable. There are appropriate facilities for hand washing and disposing of general and clinical waste. There is enough personal protective equipment (PPE) available, and all staff have completed training in relation to infection control. A recent external infection control audit was very positive. The external laundry room is very organised, immaculate and staff ensure clean and dirty items are handled separately.

The home is secure and properly maintained. Staff use the necessary equipment to keep people safe as they go about their daily routines. Records confirm that equipment is regularly serviced, as recommended. We observed staff responding to call bells within reasonable time, and people confirmed care staff are very helpful, and nothing is too much trouble. Management carries out monthly servicing checks to ensure equipment and facilities are properly maintained. Fire safety is taken extremely seriously. Fire safety equipment is regularly monitored and serviced. The recent fire risk assessment completed by an external company shows there are no actions and recommendations needed. Moving and handling equipment has also been serviced within recommended timeframes. We found all parts of the home to be tidy and free from hazards.

Leadership and Management

There are systems in place to ensure the service runs smoothly. People using the service told us the manager is approachable and willing to resolve any issues they may have. There is good communication among the team and care workers are kept informed about people's well-being through daily handovers and individual care recordings. Accidents and incidents are recorded and acted upon appropriately and an array of audits are in place such as personal plans, falls, weights, medication and infection control. The RI visits the service regularly and completes a detailed three-monthly report which monitors the standards of care in the service. We found action had been taken following these visits to improve people's experiences. The service's latest six-monthly quality of care review requires more information, and the manager agreed to develop the next report.

Care workers receive the training and support they need to carry out their roles. They complete a range of mandatory and specialist training, which includes moving and handling, nutrition, dementia care and safeguarding vulnerable adults. Care staff told us they feel comfortable approaching the management team and are confident they would address any issues. Care staff receive formal supervision every three months which allows them to reflect on their performance and discuss any training needs. The manager meets with the RI regularly however, there is no record of their formal supervision meetings. We were provided with reassurance this will be addressed. Staff meetings are held regularly which provides care staff the opportunity to contribute to the service's performance.

People using the service receive good continuity of care from a stable team of experienced care staff and the necessary checks are carried out to ensure care staff are suitable for their role. Staff Disclosure and Barring Service (DBS) checks have been renewed within the last three years and the relevant recruitment checks have been completed prior to new staff starting their role. Care staff know people's individual needs and preferences well, and how best to support them. People told us they feel able to talk to any of the staff and enjoy sharing light-hearted conversations and jokes with them. Care staff told us they feel staffing levels are appropriate for meeting the care and support needs of the people they support. Care staff spoke with pride about the difference they have made to people's lives due to the supportive relationships they have built. This was also evident from the feedback people gave us during the day.

Summary of Non-Compliance	
Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A
66	The provider does not have adequate or effective systems and processes in place to enable proper oversight of the management, quality, safety, effectiveness, and compliance of the service.	Achieved

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A
29	There are people living in the home who lack mental capacity to consent to the locked exit. A DoLS has been approved for only one person. Where people lack mental capacity to consent, the provider must ensure any decision to restrict any person's liberty is based on a best interest agreement and a lawful authority is in place.	Achieved

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

Date Published 20/11/2024