Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Brigadoon Care Home

Brigadoon Residential Home, 24-26, Bryniau Road, Llandudno, LL30 2EZ

01492877310

www.brigadooncarehome.com

The inspection visit took place on 30/06/2026

Service Information:

Operated by:	Shaivaa Care Limited
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care
Registered places:	11
Main language(s):	English
Promotion of Welsh language and culture:	The provider makes an effort to promote the use of the Welsh language and culture or is working towards a bilingual service.

Ratings:

Well-being	Good
Care & Support	Requires Improvement
Environment	Requires Significant Improvement
Leadership & Management	Requires Significant Improvement

Summary:

Brigadoon Care Home is a small, family-run service that provides a friendly and homely environment for people living here. The home is conveniently located close to local amenities in Llandudno.

People's wellbeing is good as they have many opportunities to socialise with others and do things they enjoy. People's care and support needs are accurately reflected in risk assessments and personal plans, which are kept under review. Medication systems and standards of hygiene and infection control are mainly good.

Care and support require improvement as the correct equipment is not in place and there is not enough staff to care for immobile people at night. People receive dignified and respectful care, with meaningful interactions with staff and their care is individually tailored to each person's own individual needs.

Environment requires significant improvement as the provider has failed to act on external professional advice and sustain compliance with the external condition of the grounds. The environment is homely, clean and well-maintained. People are also benefitting from an ongoing refurbishment and safety checks of the home.

Leadership and management require significant improvement. The Responsible Individual (RI) has not ensured that effective organisational arrangements, governance systems and oversight mechanisms are in place to support the safe and effective operation of the service. As a result, there are shortcomings in the provider's ability to monitor the quality of care, identify areas of concern and drive continuous improvement.

Findings:

Well-being — Good

People are supported to make choices about their daily lives and maintain routines that are important to them. We observed people choosing how and where they spend their time, where they eat their meals, and whether they wish to participate in activities. Records showed people can choose to eat in communal areas or in the privacy of their own bedrooms. People described the home as welcoming and told us they enjoyed living here. People praised the quality of the food and the friendliness of the staff. Care records and daily notes demonstrate staff have a good understanding of people's preferences and provide support in accordance with their wishes and individual needs. We saw people have opportunities to develop and maintain friendships, spending time together in communal areas talking, socialising and taking part in games and activities. However, there is not enough staff on duty at night or the correct equipment in place to meet the needs of people who are not mobile.

People are not always protected from abuse and neglect. Care staff told us they receive safeguarding training and are aware of local procedures to alert authorities if there are concerned about people's care. Staff recruitment procedures need improvement. Staff do not have the skills or equipment to ensure people who are not mobile are cared for in a safe manner. The RI monitors the quality of the service however has not rectified the issues found at this inspection which is placing people, staff and visitors at risk of harm.

People mainly live in accommodation that supports their wellbeing outcomes. We found the home to be clean, comfortable and homely, with spacious communal areas available for people to spend time in if they wish. People are encouraged to personalise their bedrooms with belongings and items that are important to them, helping to create a familiar and individualised living environment. The home has a dedicated dining area with attractively laid tables, providing a pleasant setting for mealtimes. However, improvements are required to ensure concerns relating to pest control are addressed in a timely manner. In addition, environmental audits need to be further developed and implemented effectively to identify, monitor and address any issues within the service at the earliest opportunity.

People are not able to receive a full service through the medium of Welsh. However, some care staff are able to use basic Welsh phrases to support communication. People benefit from continuity of care provided by a stable staff team who know them well and understand their individual needs and preferences.

Care & Support — Requires Improvement

People live in a service where their care and support needs are largely met. We reviewed a sample of personal plans and found these are developed in consultation with the person wherever possible. The plans include a personal profile, detailing the person's history, preferred routines, and the people, activities and events that are important to them. Personal plans are reviewed at least quarterly, or sooner if a person's needs change, to ensure they remain current and reflective of the support required. We saw evidence that people's needs are assessed prior to admission to determine whether the service can safely and effectively meet those needs. Core risk assessments are in place to promote people's safety and are subject to regular review.

People have good access to services that support their overall health and wellbeing. Records show people receive support from a range of healthcare professionals, including dietitians, general practitioners, district nurses, occupational therapists. Where people have specific care requirements, we saw these are not being delivered in line with relevant guidance, including the management of skin integrity. We found the provider does not have the required equipment and night care staff to safely support immobile people with their manual handling needs. In addition, there are insufficient staff on duty during the night to ensure people can be repositioned safely and in accordance with their assessed needs. Daily care records contain multiple entries demonstrating the support provided by care staff.

People are supported through effective medication management processes within the home. Medication Administration Records demonstrate medicines are administered appropriately and in line with people's prescriptions by staff who have received relevant training. However, improvements are required to ensure staff medication competencies are assessed and refreshed at regular intervals, and all transcribed Medication Administration Records are checked and signed by a second member of staff. Monthly medication audits are completed, and any issues identified are acted upon promptly and appropriately to help maintain safe medication practices.

People benefit from effective hygiene and infection prevention and control practices. The service does not employ designated domestic and laundry staff; care staff undertake cleaning duties each afternoon to help maintain a clean environment. People and staff spoke positively about the cleanliness of the home. We observed sufficient supplies of cleaning products and personal protective equipment. The service has achieved a Food Hygiene Rating of 5, the highest rating available, providing assurance that food hygiene standards are well maintained. Infection prevention and control training is due to be delivered in August 2026 through the provider's new training provider.

Environment

Requires Significant Improvement

People spoke very positively about their personal bedrooms, which we found to be comfortable, well-furnished and attractively decorated. Bedrooms reflect people's individual preferences and contain personal belongings and items of significance to them, helping to create a familiar and homely environment. Rooms are arranged in accordance with people's wishes and needs, supporting their comfort, independence and wellbeing. People also have access to outdoor space, including a small garden and a large patio area at the rear of the property. Staff told us these areas are used during warmer weather for celebrations, social events and planned activities, providing opportunities for people to spend time outdoors and engage with others.

People live in an environment where required maintenance is carried out, and safety checks of equipment and appliances are arranged appropriately. We observed staff check our identity before granting access to the home and ensure we signed the visitors' book, helping to protect people from unauthorised access to the service. Records show servicing and safety checks, including gas and electrical safety inspections, are completed as required. Fire safety arrangements are in place, with regular checks undertaken to ensure fire alarm systems, and firefighting equipment remain effective and in good working order. Personal Emergency Evacuation Plans are readily accessible. We noted staffs fire safety and health, and safety training had recently expired. The provider advised training has been scheduled for August 2026.

People are not consistently provided with an environment that is promoted through effective quality assurance and maintenance systems. We observed the carport area contained foliage and the clinical waste bins were overflowing. These issues had the potential to attract vermin and are of particular concern given the ongoing vermin problem affecting the premises. The provider has not taken timely action to address recommendations made by the pest control contractor. As a result, opportunities to effectively manage and reduce the risk posed by vermin has not been fully implemented. In addition, the external lean-to shed continues to require improvement. Despite the inspectors raising previous concerns having been identified in this area, sufficient progress has not been made to ensure this area is maintained to an acceptable standard. This is placing people's health and well-being at risk, and we have therefore issued a priority action notice. The provider must take immediate action to address this issue.

Leadership & Management

Requires Significant Improvement

Arrangements for the oversight and governance of the service require strengthening to ensure effective quality assurance and continuous improvement. The director is acting as interim manager and is working towards the required management qualification. The RI and interim manager and deputy manager are present in the home on most days and provide direct support to people when required. The RI produces a three-monthly report detailing their findings. The provider also seeks feedback from people, relatives and staff and produces a six-monthly quality of care review reports. However, these reports do not demonstrate a robust analysis of complaints, audits, incidents or notifications. As a result, there is limited evidence of lessons being learned or actions being identified to drive service improvements.

The systems for monitoring and improving the quality of the service are not sufficiently effective. A dependency assessment tool is not used to evaluate staffing levels when people's needs change, which limits the provider's ability to evidence staffing arrangements remain appropriate. In addition, compliance had not been sustained in relation to environmental matters. Recruitment practices do not consistently promote the safety and wellbeing of people living in the home. The regulator is not always informed of notifiable events and medication competencies are not carried out on a regular basis. This is placing people's health and well-being at risk, and we have therefore issued a priority action notice. The provider must take immediate action to address this issue.

People are not consistently supported by staff recruited through safe recruitment and vetting processes. The provider does not always obtain satisfactory references and application forms before staff commence employment, which does not fully support safe recruitment practices. Some staff mandatory training has expired. The provider informed us a new training provider has been commissioned and training for all staff is scheduled to take place in August 2026. Staff receive regular supervision, providing opportunities to reflect on their practice, discuss people's needs, review training requirements and consider their own wellbeing. Staff spoke positively about the working culture within the home and told us they had confidence in the current management arrangements and the quality of care being provided. However, improvements are required to ensure all staff receive annual appraisals.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

The table(s) below show the area(s) for priority action and/or those for improvement we have identified.

Summary of Areas for Improvement	Date identified
People's manual handling needs are not being managed safely, which places them at risk of harm and injury. This does not consistently protect, promote, or maintain people's safety and wellbeing.	30/06/26

Summary of areas for Priority Action	Date identified
The provider has not ensured effective arrangements are in place to identify and manage health and safety risks. This places people at risk of harm and does not promote or maintain their safety and wellbeing.	30/06/26
The Responsible Individual's oversight of the service is not effective in identifying and addressing issues relating to recruitment practices, manual handling, staffing arrangements, and environmental risks. As a result, people are exposed to avoidable risks and cannot be assured that their safety and wellbeing are consistently protected.	30/06/26

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