



Inspection Report on

Brondesbury Lodge

**Brondesbury Lodge
Heol Derw
Cardigan
SA43 1NH**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

23/05/2022

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About Brondesbury Lodge

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Brondesbury Lodge Limited
Registered places	32
Language of the service	Both
Previous Care Inspectorate Wales inspection	29 December 2019
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

A professional and established management team strives to develop people's care and support wherever possible. People receive a good service through a knowledgeable manager and a dedicated staff team. The Responsible Individual (RI) is engaged with the service and provides oversight of the service.

People's individual health and wellbeing are important to those providing the care and support. People living in the service and their relatives have corroborated this. Work is required to ensure individual needs of people and wellbeing outcomes are accurately documented and people and / or their representatives are involved in the assessment and review of their care.

The environment is safe and appropriate infection, prevention and control measures are in place in line with Public Health Wales guidance.

Well-being

People are satisfied with the care and support they receive. This is evidenced by the response to quality assurance surveys as well as feedback we received from those we spoke with and relatives. Whilst the normal activities taking place at Brondesbury were curtailed during the pandemic, the staff and activity coordinator have worked hard to ensure people's wellbeing is still promoted. Steps are underway to reintroduce a religious service on Sundays, outdoor activities and to re-establish the Friends of Brondesbury group. A garden party to celebrate the queen's jubilee was much appreciated by people, their relatives and friends. It is clear people's preferences are respected and the service is very much part of the community.

The Active Offer of the Welsh language is provided: this means being proactive in providing a service in Welsh without people having to ask for it. We heard conversations and singing in Welsh, information available in Welsh. People can receive care and support in the language of their choice.

Overall, people are safe and protected from abuse. However the safeguarding policy requires updating to ensure it is in line with current legislation and local safeguarding procedures. Care staff recognize their personal responsibilities in keeping people safe. Not all staff are aware of the All Wales safeguarding App and the contact telephone numbers of relevant bodies. They are aware of the whistleblowing procedure, although again the policy requires updating. There is a robust recruitment process.

People can choose how they spend their time. During our inspection we saw some people participating in activities whilst others choose to watch television. There are different areas where people can choose to sit and the small "green lounge" is due for refurbishment. The chef told us they are happy to cater for people's tastes and they knew people's likes and dislikes. However, there is no daily menu choice, displayed rather people can say if they did not like food at mealtimes. We observed people being offered alternatives after they had not eaten the main meal. The mealtime experience would be enhanced by asking beforehand in order that people are able to eat together at the same time. Social distancing restrictions at mealtimes has now stopped.

Overall care records reflect the needs and preferences of the people. However, more details are required about any specific support individuals need and how they and /or their representative are involved in the care planning and review process.

There is a well-established strong management team at Brondesbury. The manager is highly visible, and we observed her calm manner, and attention detail when supporting people. A recruitment campaign has resulted in a full complement of nursing and care workers. Ongoing induction, supervision and staff training is underway to ensure good standards are maintained.

Care and Support

Feedback from family members we spoke with is positive. Overall, they felt communication channels were good and the manager was responsive to requests. Staff were described as “friendly, caring”. Relatives we spoke with told us they were more than satisfied with the care and support provided and that it was “perfect”. They were looking forward to the planned garden party and the easing of visiting restrictions in line with the Social Care Transition Plan. Overall people whom we spoke with are satisfied with their care and support. They told us “They work hard”, and “I can’t fault them”.

The service promotes hygienic practices to reduce the risk of infection. On arrival, we were requested to show a valid Lateral Flow Test and we gave our contact details. Staff wear appropriate PPE and adhere to the current Public Health Wales (PHW) Guidance. The manager works with the Local Health Board to ensure the service is meeting its obligations around infection, prevention, and control measures. Policies and procedures are in place to support good practice. The RI and manager are introducing the latest Welsh Government Guidelines to support the transition to, as far as possible, pre pandemic normality.

Health and social care professionals are involved with people, and this is documented. Prompt referrals to healthcare professionals such as doctors and dieticians are made when necessary. Whilst reviews take place in a timely manner, findings are not always followed up. This was addressed with the manager at inspection. There are appropriate measures in place for the safe storage, administration and recording of medication. Care staff have a good understanding of safe medication procedures.

Sufficient staffing levels are in place to meet the care needs of people living at the service. The wellbeing and dignity of those choosing to live at Brondesbury is paramount to the management and care team. People we spoke with were complimentary about the care staff, and in particular the activity coordinator. We spoke with the activity coordinator and found her to be engaged, positive and keen to pursue wider activities know covid restrictions are easing. The activity coordinator plays a key role in keeping families in touch using technology. This is appreciated by family members we spoke with. We observed a small group participating in afternoon games and saw the exchanges to be light-hearted and enjoyed by those choosing to take part. Some staff are having further training and supervision to reinforce these values and ensure attention to detail. We overheard some task-based language and a lack of engagement when supporting people with their meals. This was discussed with the manager at the time who agreed to address these points at staff meetings and supervision.

Whilst people’s care documentation is in place, there is little evidence of people’s dislikes and likes informing those plans. Nor is there evidence information provided by relatives about their family being used to inform those plans. People’s personal care and support plans are not consistently signed by people or their representative to evidence their involvement. People’s participation in activities and wellbeing outcomes are not recorded. Relatives we spoke to are keen to learn more about how they can support their loved one further and would be happy to share knowledge further. This is important as this information helps give staff the knowledge and information to support people. These points will be followed up at next inspection.

Environment

People receive support in a homely environment. The home is safe, warm, and clean and people say they feel comfortable and happy living at Brondesbury. Bedrooms are spacious and personalised to reflect the occupant's taste and interests, with items such as ornaments, soft furnishings, and photos. Several of the rooms have lovely views of the garden and bird feeders. There is ongoing significant investment to the building to ensure it best meets people's needs. The installation of a summer house has been widely used and appreciated by family and friends during COVID visiting regulations. This means people's needs; wishes and dignity are supported by the layout and services available at the home.

People are safe from unauthorised visitors entering the building, as visitors have to ring the front doorbell before gaining entry and record their visits in the visitor's book when entering and leaving.

Clear infection control procedures are in place and care workers use gloves and aprons when providing personal care. A maintenance person is on site, undertaking legionella checks, fire safety checks and day-to-day issues. Fire exits are free of obstructions and maintenance records evidence fire alarm tests.

All COSHH (Control of Substances Hazardous to Health) materials are stored correctly, in line with the COSHH Regulations 2002.

Leadership and Management

There are governance arrangements in place. The RI undertakes Regulation 73 visits both virtually and physically at the service. CIW were provided with copies of reports that identify people and staff are spoken with as part of his visits to the service. The quality-of-care report identifies good practice and areas for improvement. There are a range of monitoring tools and audits undertaken by the manager. Actions required from these audits are acted upon and reviewed. The management team are supported by an efficient, well organised administrative assistant.

Staff told us they feel well supported and appreciated by the manager. “*The manager is approachable*” and “*she is firm but fair.*” Staff feel confident if they have a concern they can speak to the manager or a member of the senior team. Staff follow appropriate infection, prevention and control measures and can explain to us their responsibilities in reducing the spread of COVID-19.

Staff records show they receive an induction, receive regular supervision and an annual appraisal. Staff attend a range of mandatory and specific training and the service’s training matrix corroborated this. Care staff told us about the training they have attended and were able to demonstrate understanding of their role in the protection of individuals. Policies and procedures require updating to support staff. Staff recruitment records hold all the required information and checks. Pre-employment checks take place before new employees start work - these include reference checks, photo identification and Disclosure and Barring Service (DBS) checks. Whilst staff meetings have not been held as regularly as the manager would have wished during the pandemic, these are resuming. This will give care workers the opportunity to discuss their work and to keep up to date with developments in the service, and for the manager to reinforce the services expectations.

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

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. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement

Regulation	Summary	Status
12	3 policies require updating , reviewing , and further information	New

Date Published 19/07/2022