



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

23/01/2024

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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	19 January 2021
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People are happy in the home and enjoy living here. They praise the kindness and friendliness of staff and management, and they feel safe and secure in their home.

Various activities are arranged to entertain and stimulate people and hobbies are facilitated. People enjoy the quality of the food offered and take part in celebratory meals such as birthdays and other special occasions.

The home is comfortable, warm, and welcoming. Rooms are clean and bright. Bedrooms are personalised and things that matter to people are displayed on walls and shelves. Rooms are redecorated each time they are vacated so everyone can enjoy a new fresh environment. Three communal rooms offer a choice of somewhere for some people to sit in the day, while others may choose the privacy of their own room. A coded keypad ensures security in the home but also prevents people from leaving easily. The provider must ensure this is in people's best interests.

The provider must improve governance and oversight of the service and report on the findings of quality-of-care reviews. This will enable more prompt identification of areas for improvement.

Well-being

People have choice and control regarding the care and support they receive at the home. They choose whether to spend time in the lounge or in their own room. They choose whether to partake in activities. If people do not like the meal on offer, the cook will make them something else. People have choice about how, when and where they carry out their daily routines. People's preferred newspapers are delivered daily and they can also choose books to read from the home's library shelf.

People's physical, mental, and emotional well-being is looked after by care staff who know how they want to be supported and what makes them happy. Many of the care staff have worked at the home for years and know people well. Records help to inform staff about what matters to people. Currently, records such as care files are not regularly audited for quality, and we have asked the provider to address this. People engage in activities they enjoy when they want to, and staff employed specifically for activities helps keep them entertained. The service supports people to have their health needs met through appointments with their doctor, chiropractor, dental and audio specialists, and arranging visits from district nurses.

People are protected from abuse and neglect as staff receive training on this issue and there are policies and procedures to guide them. Staff feel able to speak with the manager at any time and share concerns if they have any. Handover meetings held at the beginning of every shift ensure staff get the most up to date information about people's wellbeing and any changes to their care.

The home provides homely, warm and comfortable accommodation. There are three communal areas to choose from where people can socialise and engage in the activities provided. Televisions and a radio provide additional entertainment and a library of books offers reading material. People have personalised rooms furnished to suit their needs and they are all nicely decorated and very clean. The home is kept secure with coded keypads on the entrance door but not all residents are able to use this.

Care and Support

People's personal plans contain sufficient, up to date, information to enable staff to carry out appropriate care that meets preferences. We saw relatives and health and social care professionals contribute to the care plans and these are reviewed every month. There are moving and handling plans and risk assessments to help ensure people carry out their activities safely.

People are provided with the care and support they need as their personal plans are up to date and they are consulted about their needs. We saw some elements of the care plan are person centred and record people's history, hobbies, and interests, what is important to them and their preferences regarding daily routines. Another document records each person's physical, emotional, and mental health needs. The aims and actions recorded are not always personalised, but the manager is looking to review care planning systems when the service moves to electronic record keeping in March 2024. We saw people carrying out activities important to them, such as reading newspapers and books, listening to their radio, colouring pictures in books. We also saw the activities organiser encouraging people to partake in a singalong and Bingo. People praise the food; one commented about *'putting on the pounds'* since coming to the home as *'the food here is so good'*. Visitors to people in the home come at any time. We spoke to one visitor who praised the staff, *'they are so kind and always around when you need them'*. People living in the home also praised the staff; *'staff are wonderful, especially their attitude towards people here.'*

The coded keypad on the entrance/exit door displays the number to use to open it. While some people may be able to use this lock, people living with dementia or visual impairment may struggle. Staff may assist people for whom leaving the home is no risk; they will unlock the door for them if they struggle. For those who may lack capacity to understand dangers, and are at greater risk if leaving the home, the provider must ensure the relevant lawful authority is sought to restrict their movement. They must take all steps to ensure such measures are in the best interest of those effected. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

People's physical, mental, and emotional well-being is looked after by care staff who know when to seek professional advice. Records evidence appointments are arranged with GPs, dentists, opticians, and district nurses visit the home. We saw people used walking aids to enhance their mobility and staff patiently supported people to move around the home. Equipment has been purchased to enhance people's comfort and safety, and some people have brought in their own items of furniture to aid them; we saw a person had their own reclining armchair.

Environment

The service provides care and support in an environment and location suitable to meet people's needs. There are two lounges and a dining room where people sit to take part in activities and socialise. Some people prefer to eat using over chair tables or in their own rooms. There are televisions in each sitting area and a radio to keep people occupied through the day. We saw people's bedrooms are warm, very homely, comfortable, and clean. Each room is furnished and decorated to people's taste and personalised with things that matter to them. Each time a room is vacated, it is redecorated with new curtains and pelmets, and we saw some new vanity units in the ensembles have been fitted. People can call for assistance by dialling 0 on the phone available to them in each room. The manager told us staff frequently check on anyone who is unable to use these. Signs around the building are not bilingual and the home does not currently provide an active offer of the Welsh language.

There are sufficient toilets, assisted bathrooms and shower facilities and a lift to take people between floors. We saw some specialist equipment in place for those needing it. Rooms are spacious and allow for bedroom furniture and seating for visitors. There are gardens for people to use in good weather. The kitchen is clean and well organised and relevant records are kept; the Food Standards Agency has awarded the kitchen a rating of 5 which is the best it can be. People living in the home like their rooms and feel it is their home.

The provider of the service ensures risks are reduced by making arrangements for safety checks. We saw certificates and records to evidence gas and electricity safety checks, and a fire log with dates various tests have taken place. Staff record any areas of repair and renewal in the 'maintenance book' and we saw these are ticked off when completed.

Leadership and Management

The provider has insufficient arrangements in place to ensure an effective oversight and governance of the service. There are no regular audits of policies, practices, and procedures. We found some records to be inaccurate, incomplete and not compliant with regulations and statutory guidance. We saw the provider has issued a satisfaction survey and collated the results but there is no report to show a biannual Quality of Care review has been completed; insufficient quality assurance has been carried out to evidence the full extent of what is working well in the service and where improvements could be made. More is needed to ensure effective oversight of the service. This is placing people's health and wellbeing at risk, and we have therefore issued a priority action notice. The provider must take immediate action to address this issue.

The service has a range of policies and procedures in place to help instruct staff and keep residents safe. Staff are aware of safeguarding procedures and those we spoke with confirm they can speak with the manager at any time. They said they would always feel comfortable in expressing their views and concerns. Staff also attend one to one supervision meetings with their manager to discuss work related issues and share their views. Staff told us they enjoy working at the home. One said, '*people living here always come first*' and, '*I never feel like I'm coming to work, it's like a family*'.

People are supported by appropriate numbers of staff. We saw rosters record which staff are on duty and ensure sufficient staff are present to meet people's current needs. Staff told us they have time to carry out their roles and responsibilities and have time to chat with people they support. Staff records show vetting procedures are in place to help ensure safe recruitment. We saw staff have annual training in moving and handling. Care staff have certificates of attendance to a one-day mandatory training session on a range of relevant topics and this is refreshed every six months. The manager is confident the information provided in this training day equips staff with the knowledge they need to work safely.

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
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.	New

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
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.	New

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Date Published 24/04/2024