



Inspection Report on

Bradshaw Manor Care Home

**Bradshaw Manor Care Home
2 Chester Street
Rhyl
LL18 3ER**

Date Inspection Completed

27/02/2025

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About Bradshaw Manor Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	BRADSHAW MANOR CARE LTD
Registered places	65
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection of the service since it was registered under the provider Bradshaw Manor Care Ltd.
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 with the care they receive in the home. They praise the care of the staff and the level of activities on offer. They feel listened to and are able to achieve their outcomes in their preferred manner. Personal plans are very comprehensive, and the instantaneous electronic recording system captures each element of care provision accurately at the point it is delivered, facilitating close monitoring, and checking that nothing is forgotten. People's choice and preferences are continually sought so the service knows it is providing what people want. Regular social events are arranged providing effective opportunities for people to link with their family and for the service to gain relatives views. The provider has invested in the environment following people's suggestions for more outdoor space. Existing space has been configured to provide secure sheltered seating areas where people can enjoy the sun. Staff are happy; they feel valued and supported and report how they look forward to coming to work. The management structure ensures the home is well led. Established roles of the home manager, the regional manager, and the RI (responsible individual for the service) ensure effective oversight of the service so the provider always knows what is working well and where improvements could be made.

Well-being

People have control over their day-to-day life; they speak for themselves and contribute to decisions about things that affect them. The RI visits the home every three months and speaks with people living here. People make suggestions about possible improvements, many of which are actioned. Two people living here are 'residents ambassadors' who represent the residents' views in meetings. A poster in each unit identifies who the ambassadors are. Surveys are carried out and there is a suggestion box in the foyer. Everyone has a comprehensive personal plan that identifies their likes dislikes and what is important to them. To ensure people have choice over their food, tasting sessions are arranged so people can sample proposed menus and express their preferences.

People's physical and mental health and wellbeing is monitored closely and actions taken to ensure their continued wellbeing and happiness. The new electronic personal care system is a highly effective way of recording engagement and ensuring all care is provided as and when it should be. Records show people's personal care has been delivered and their comfort has been checked every two hours, and which staff were responsible for this. If a person responds more positively with a particular member of the team, the manager can try to ensure this staff member is on hand to provide the care to that person. The service works in a way that helps ensure people are happy.

People are protected from abuse and neglect as staff are all trained on protecting vulnerable people. There are lots of opportunities for people to express their views, either in the residents' meetings or on a one to one basis with the activities co-ordinator, care staff, or the management team when they visit people in their rooms. There is a clear complaints procedure and people know how to raise concerns.

People continue to enjoy engaging with people in the local community. The home has fetes and local people attend; the Mayor is invited and the local carnival queen and school children come to entertain and visit people in the home. Care staff take people to the local pub which is within easy walking distance from the home and local shops for example to buy ingredients for cake making.

Care and Support

The service has accurate personal plans for each individual and these provide care staff with comprehensive detail on how needs are to be met. Prior to and on admission the service gathers information about the person to be accommodated from a range of sources. Plans include a 'what matters to me' document that outlines peoples background, their interests, likes and dislikes. Risk assessments ensure people are supported to carry out activities of daily living safely and effectively. Records show all plans and risk assessments are reviewed every month.

Everyone is provided with the quality of care they need and prefer as the service is designed in full consultation with the person and others involved in their care. Every month, every aspect of each person's care is fully reviewed, from the state of repair of everything in their room, to the completion of records pertaining to them, and their engagement with activities. This demonstrates the home is doing everything it can to ensure it is providing care, treatment and support that achieves good outcomes for each resident. A range of stimulating activity and entertainment is arranged by two staff employed to do this. Events are arranged to which people and their family are invited such as a pie and a pint or cheese and wine night. Once a month there is a themed meal of international cuisine such as a Greek meal, a Chinese meal or Italian. In one of the residents' meetings, one person asked for the return of the 'scaly safari'; reptiles and snakes have been brought into the home for people to see. We spoke with people living in the home and relatives who praise the quality of care provided and specifically the care staff. They said, *'They are excellent'* and *'they can't do enough, nothing is too much trouble'* and *'The best thing about this place is the staff'*.

People are supported well to access healthcare and other services to maintain their health and wellbeing. We saw referrals to the tissue viability nurse, occupational therapists and mental health services. Care plans are amended to reflect the professional's guidance, and any associated changes in care delivery are fed back to staff in daily meetings so they always provide the right support to help people achieve their outcomes on any given day. We saw good use of body maps to identify injuries or skin issues, and associated risk assessments for falls and skin integrity and use of mobility equipment. We saw proposed corrective actions identified in notifications to Care Inspectorate Wales have been carried out. People have good pressure care measures in place.

Environment

The service provides individuals with care and support in an environment that helps them achieve their outcomes. The home is situated where people can access public transport if they are able; there are shops, pubs and leisure facilities in the local area and a beach with a flat promenade close by for walks. The home has wide corridors to accommodate mobility equipment and is made up of separate units with homely lounges that allow people to spend time with those with whom they are most compatible. There are assisted baths and accessible wet rooms for people with reduced mobility, and accessible outside space to sit and enjoy the sunshine. The provider has invested in decoration, renewal of floors, fixtures and fittings and a thoughtful reconfiguration of the layout to suit people's preferences and current needs. Minutes of meeting show people are consulted about changes to the building. The corridor in the 'Memory Lane' unit was decorated in neutral colours with no distinguishing features to signpost people with memory problems and the provider was keen to address this immediately. It is now decorated with pictures of famous people of the past, more colour and fidget boards providing texture. Some rooms have been redecorated and the foyer in one unit was being painted on the day we visited. Minutes of a residents' meetings show people have asked for more outdoor space and this has been delivered. We saw work on a previous balcony floor has provided another accessible outside area. A conservatory has been taken down to provide further outside space for tables and chairs in a secure walled garden.

The provider has good methods of ensuring a safe environment and identifying and mitigating risks to health and safety. A three-monthly infection control audit is completed that looks at every aspect of potential contaminate and cross infection. A report shows effective measures are in place and areas for potential improvement are identified. Monthly audits of the whole environment, including standards of housekeeping and compliance with COSHH processes are carried out. We saw the auditor identified the need for new carpets and these were replaced in January. All safety checks are completed to ensure safety and compliance of electrical installation, lifts and equipment, water hygiene and temperatures and fire equipment. Fire alarms, fire exits, and emergency lighting are tested inhouse routinely. The service has designated senior staff as 'champions' who have the responsibility for key areas of health and safety as well as ensuring ongoing quality of care.

Leadership and Management

The provider has very effective arrangements to ensure the home runs smoothly and people are properly supported to achieve their outcomes. On an individual level, all aspects of a person's experience in the home are checked to ensure an effective service. Call bell response times are monitored and captured in a report to ensure they remain acceptable. Completion rates for staff training are monitored and reported on. A very in-depth breakdown of costs and savings for each of the providers services is reported on. There are weekly occupancy level checks and investments are prioritised and planned. The manager delegates tasks to senior staff, making use of their skills and interests by making them champions of specific topics relevant to wellbeing of people in the home.

Other ongoing quality assurance processes help ensure the service is compliant and continues to support people to achieve their outcomes. The electronic care records capture any support provided as it takes place. When staff provide the support, they instantly record details on handheld devices linked to the database. There are many systems in place to solicit peoples views on the service; monthly residents' meetings, surveys, suggestion box, evening events with family, feedback to and from the resident's ambassadors, all help to ensure the service has a clear view of what is working well and where improvements could be made. People told us how they raise any issues and suggestions and confirmed actions are taken. They feel they are listened to. The RI seeks people's views on a one on one basis when they visit the home every three months. The biannual quality of care review evidence what the service is doing well.

People are supported by appropriate numbers of staff who are properly vetted prior to employment and trained in a range of topics relevant to their work. Records show a high completion rate of the training by all staff, most of whom are qualified to NVQ standards. Staff told us they are well supported; records confirm regular one to one supervision sessions in which they can discuss their practice and career progression. The provider has reward schemes for staff where achievements are celebrated and recognised. Within Bradshaw Manor, staff are encouraged to vote for an 'employee of the month'; there are financial rewards for long service, recruitment incentives such as one-off payments, an employee assistance programme, culture and wellbeing workshops for staff and other support. Staff told us they feel valued; they *'love working here and look forward to coming to work.'*

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.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	
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Date Published 22/04/2025