

Inspection Report on

Brynawel

77 Brecon Road Abergavenny NP7 7RD

Date Inspection Completed 16 September 2021

16/09/2021



About Brynawel

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	PARKCARE HOMES (NO.2) LIMITED
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection of the service since registration under Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017.
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.'

Summary

Brynawel accommodates adults with mental health needs who require support to live in the community. The service promotes people's independence and support to take an active part in their own lives. People's personal plans centre on helping individuals develop skills and achieve their goals. People are supported to take everyday risks for their personal development. Individuals told us they are comfortable and settled. The manager is suitably experienced and registered with Social Care Wales. The staff team are trained to carry out their role and provide familiarity and consistency. We found staff are positive and engaged. A responsible individual (RI) has recently been appointed to oversee the service.

Well-being

Individuals make decisions that affect their daily lives. The service promotes people's independence and provides support with everyday living skills. Individuals are consulted about how they prefer to be supported. People's rights are respected. Regular reviews provide an opportunity for individuals to make their likes, preferences and aspirations known to others. People are supported to take risks as part of an independent lifestyle.

People can access services to maintain their general health and wellbeing. A range of healthcare services support individuals to meet their needs. Individuals have opportunities to take part in work, hobbies and leisure interests that reflect their personal choices. Individuals are supported to take an annual holiday. One person has a pet living with them. A vehicle is available for people who live at the service. During the pandemic, individuals were engaged in decorating and gardening projects. Contact with individual's friends and families were maintained.

People are safeguarded from harm. Accidents, incidents and complaints are monitored. Significant incidents are reported to the relevant agencies. Staff know individuals well and are trained in safeguarding protocols. Individuals are encouraged to report their concerns to others. Advocacy is available for people to share their views. The organisation has the necessary policies to support people. Sound recruitment practices are in place for the selection and vetting of staff.

Individuals live in a service, which supports them to achieve wellbeing. Individuals benefit from the location of the service, which is within walking distance of Abergavenny town centre. Systems are in place to ensure the environment is safe, secure and meets individual's needs. We saw arrangements to promote hygienic practices and manage the risk of infection.

Care and Support

People's personal plans centre on helping them to develop skills and achieve goals. Individuals are involved in the compilation of their plans. Each person is allocated a keyworker, a designated staff member who reviews their personal plan to find out how they are getting on. Reviews are completed under the supervision of the manager. Local authority placing plans were missing for the two people's documents we viewed Reviews of personal plans should take into account any change in an individual's needs and any reviews undertaken by the placing authority. Whilst, staff are familiar with people's needs, likes and preferences without the necessary local authority placing plans we were unable to establish if people's needs are being fully met. Also, documentary evidence to reflect the views and opinions of individuals during the review process could be enhanced. The service is moving towards an electronic document system. We have identified the lack of placing plans as an area of improvement.

People are encouraged to maintain a healthy lifestyle. Individuals shop and prepare their own meals. Healthcare professionals are involved in people's care. Risk assessments are in place that support individuals to carry out daily activities and safely visit the community. Individual personal evacuation plans (PEEPS) are in place for people in the event of an emergency. Following a recent event, the organisation provided support to residents and staff. In addition, a policy change was implemented to further safeguard individuals. We expect the policy is kept under review to prevent people's rights being discarded. During feedback we discussed this matter.

The service promotes hygienic practices and manages risk of infection. Policies and procedures are in place, which take into account current legislation and guidance. Checks to mitigate risks to people living and working at the service are in place. This includes daily temperature checks for people living and working at the service. Staff take part in regular testing. Enhanced cleaning schedules have been implemented to maintain standards at the service.

Medication arrangements have been strengthened. The manager has revised systems for those individuals capable of administrating their medications independently. This was in response to an external agency visit. In line with best practice guidance, the individual now completes a risk assessment and maintains a record of the medicines taken. Designated staff oversee the management of these arrangements.

Environment

People live in a clean, safe and well-maintained environment. The premises and facilities are suitable for the people living at Brynawel. The environment recognises and promotes people's individuality. We were invited to view two of the resident's bedrooms. An individual told us staff respect their privacy and dignity. Rooms are decorated to individual's personal taste and preference. We walked around the house and found it was clean, comfortable and well maintained. During lockdown, staff have supported residents with the decoration of the dining room and planting flowers and vegetables in the garden. Arrangements are in place to report and remedy faults. Environmental checks are on-going and repairs are managed promptly. We will consider the environment in more detail at our next inspection.

Leadership and Management

Governance arrangements, which support the smooth running of the service, are in place. During the visit, we found the manager was open and transparent. They promote an open door management style for residents and staff. The RI has carried out the required three monthly visit to the service since appointment. We viewed the report, which showed the performance of the service is monitored. Systems are in place which review progress and inform the development of the service. Satisfaction surveys have been delayed due to the pandemic. This is to be completed within the next few months.

The service has sound recruitment processes. There are suitable selection and vetting practices to enable the service provider to decide upon the appointment of staff. We viewed two staff files and found the necessary pre-employment checks have taken place. Employment histories are provided for applicants. Identification and references further support the individual fitness of staff to work at the service. The organisation has been proportionate in respect of gaining a reference for one employee. We expect the inclusion of an individual risk assessment to further safeguard residents.

The organisation uses a central induction for all newly appointed staff. Staff can access on line training to update their knowledge. As part of routine monitoring staff training compliance is routinely reviewed. In house trainers provide support with positive behaviour techniques. The majority of staff have completed a recognised care qualification. Regular staff supervision and team meetings are taking place to inform and update staff.

Areas for improvement and action at, or since, the previous inspection. Achieved

Areas for improvement and action at, or since, the previous ins	spection. Not Achieved
None	

Areas where priority action is required	
None	

Areas where improvement is required Individuals need to have an accurate and up to date plan of how their care is to provided to meet their needs. One that considers care and support plan prepared by placing authority.

The area(s) identified above require improvement but we have not issued a priority action notice on this occasion. This is because there is no immediate or significant risk for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection.

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