



Inspection Report on

Brynawel

Abergavenny

Date Inspection Completed

16/08/2023

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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	16 September 2021
Does this service promote Welsh language and culture?	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

People are happy living at Brynawel. The service encourages individuals to live as independently as they can. People have good relationships with their peers and staff who know them well, which provides a safe and stable atmosphere. People have regular access to healthcare services to maintain their health and wellbeing. People can access regular advocacy services to express their views and wishes. The manager is experienced having worked at the service for some time. Staff are suitably trained and developed to conduct their role. The service is currently without a Responsible Individual (RI). Care Inspectorate Wales (CIW) has received an application from an individual which is being considered.

Well-being

People have control over their lives and contribute to decisions that affect them. Individuals are supported to set individual goals to develop their skills. Risk assessments support individuals with positive risk taking. Staff are available to support people whenever they want or need assistance. The regular staff presence provides reassurance to people living at the service. People told us they receive, *“A good service and are happy living at Brynawel.”*

People’s voices are heard and listened to. Individuals told us they are consulted about all aspects of their care and support. People’s personal plans set out how individuals prefer to receive support. Staff encourage individuals to take an active part in their daily lives. People enjoy spending time together which has developed supportive friendships. One person said, *“were like a family, there is friendly banter between us”* and *“everyone gets on here, residents and staff.”*

People are encouraged to be healthy and active. Individuals are registered with local GP services. They are assisted to make routine healthcare appointments and supported to attend as and when necessary. To maintain people’s emotional health and wellbeing they have regular support from healthcare professionals attached to the company. Arrangements are in place to support individual’s management of medication. The service supports individuals to consider their physical health and encourages exercise as part of their daily routine.

People are informed how to make their concerns known. Residents are shown a presentation about how to recognise and report abuse when they move into the service. Safeguarding has been added as an agenda item to resident’s monthly meetings. Regular advocacy services are available for people to discuss their views and opinions.

People live in a home which supports them achieve their wellbeing. The location of the property benefits individuals who live here. It is a domestic property which is close to all the amenities in the local area and is safe, clean, and well maintained.

Care and Support

Service providers have an accurate and up to date plan of care for each person which is outcome focused. People's personal plans set out how individuals prefer to be supported. The service uses an electronic document system to record individuals care and support. Staff told us the system has improved the accuracy of individuals daily recordings making them more reflective of what is going on.

People's personal plans and risk assessments are routinely reviewed as part of a wider process to monitor their health and wellbeing. Individuals have a regular opportunity to discuss how they are getting on during monthly keyworker meetings. Individuals told us they are consulted about all aspects of their care and support. We reminded the manager that evidence of co-production is needed to show individuals engagement and reflect involvement in decisions that affect their lives.

People are supported with their personal development and to do things that matter to them. Individuals are supported with cooking, cleaning, and budgeting skills. Residents have asked to cook some communal meals so they can socialise with peers. Individuals are supported to maintain their hobbies and chosen interests. Staff support individuals to maintain relationships with their family. Some individuals regularly visit the local community to spend time with friends. Staff encourage individuals to join local sports groups to stay fit and meet new people. The staff set up a walking group to support individuals take advantage of the service's location. Staff accompany individuals on chosen day trips and holidays.

People are safe. Individuals are confident they can raise concerns with staff whenever they want to. Staff are trained how to deal with concerns about an individual's wellbeing. The manager reports incidents and events to the relevant agencies. Staff can access an independent whistleblowing service. There are safe medication arrangements in place with staff trained to support people with medication. Individuals are assessed before they can manage their own medications. Internal audits take place to ensure systems are secure.

People living in the service are treated with compassion, dignity and respect by a consistent and dedicated care team who know them very well. Staff have the necessary mix of skills to support people. Residents told us how the mix of gender of staff worked well together.

Environment

People live in an environment that is suitable for their needs. People told us there is sufficient space to spend time alone or communally with others. Everyone has a key to their bedroom which promotes ownership. The furniture, layout and décor are suitable for the service's intended use. Individuals are encouraged to keep possessions and decorate their room according to their personal taste. There are regular health and safety checks and maintenance audits conducted on the property. We saw a plan of remedial works to deal with on-going issues. The service recently received a Food Standards Agency rating of four which shows good food handling standards. People have a garden where they can sit out in the warmer weather.

Leadership and Management

There are satisfactory governance arrangements which support the running of the service. The manager is experienced and registered with Social Care Wales, the workforce regulator. They promote an open-door management style for both residents and staff. They are supported by a deputy manager and trained staff team. Staff told us managers are approachable and they feel supported.

The management team are approachable and visible in the running of the service with clear governance, auditing, and quality assurance arrangements in place. We saw the last quality of care report dated Jan-June 2023. The report contains analysis of the service and identifies areas for development and improvement. Currently there is no RI for the service. CIW has received an application from an individual which is being considered. The statement of purpose will need to be revised to reflect the changes to the organisational structure. It is expected this will be completed in line with the appointment of the new RI. The manager told us they have positive working relationship with commissioners.

There are satisfactory selection and vetting arrangements for staff. We examined newly appointed staff records and found the required recruitment checks had been completed. This included a disclosure and barring check (DBS) and satisfactory references from former employers. A copy of identification was retained to further demonstrate people's fitness to work at the service. Care workers are registered with Social Care Wales,

Staff are trained and developed to carry out their duties. We spoke with staff who told us they are able to access training to support them to carry out their duties and have regular opportunities for supervision. All staff receive an induction. Staff receive mandatory training to perform their roles.

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
15	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.	Achieved

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