



Inspection Report on

**Brookside Care Home
Brookside
Brecon
LD3 7UA**

Date Inspection Completed

28/09/2022

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About Brookside Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	BROOKSIDE CARE HOME Limited
Registered places	31
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People appear well cared for and happy at Brookside Care Home. Since 1st June 2022 there has been a change of ownership, the service has a new responsible individual (RI) and manager. There have been significant improvements during this time.

People are happy with the care they receive and speak highly of the staff who support them. Nurses and care workers have positive relationships with individuals living in the home and understand the needs of the people they care for. People's personal plans and risk assessments contain a good level of detail and guidance to keep people safe. People have access to health professionals as and when they require it. The service needs to increase the frequency of training offered to staff. Policies and procedures maintain the safety and well-being of people who live at the service. The provider must ensure all required fire procedures are followed. The management team are committed to the ongoing development and improvement of the service. The responsible individual (RI) has an oversight of the service and quality monitoring reviews are completed.

Well-being

People can be confident that their physical and emotional needs are being met. Staff provide care with warmth and kindness and have a clear understanding of the support needs of the people they care for. Care documentation within the service is informative and up to date. Care plans are person centred, detailed and clear to follow. Care staff and nurses have a very good knowledge of people and are therefore able to notice any changes quickly and respond promptly. People remain as healthy as they can be due to timely referrals to healthcare professionals and effective administration of medication. Healthy and nutritious meals consider people's dietary needs. People living in the home and their relatives told us they are very happy with the care provided at Brookside Care Home.

There are systems in place to protect people living in the home. Access to the home is for authorised persons only. Visitors are asked to sign when they enter and leave the property. Staff spoken with were aware of their responsibility to keep people safe. Staff access policies and procedures for clear guidance on the protection of vulnerable adults. Before starting employment, staff are subject to a robust recruitment process that suitably vets them.

There is a clear management structure for the service. We received positive feedback from the staff we spoke with, who told us they feel valued and supported. There have been improvements to the system for monitoring and auditing standards of support and the environment. The RI demonstrates an active presence at the home. There is a statement of purpose, which shows the home's vision, values and ethos. Staff told us "*I like working here,*" "*a big change for the better*" and "*I now feel 100% supported by the new owners.*"

Care and Support

People are provided with the care and support they need. The service completes personal plans and risk assessments which identify care needs and associated risks. To achieve positive outcomes for people living in the home personal plans and risk assessments have recently been reviewed and updated to ensure they are person centred. The nurses and care workers we spoke with have a very good knowledge of people, their needs and what is important to them. Staff confirmed that care records are easily available, and they are informed of any changes. We spoke with a visiting professional who told us they have no concerns and *“The staff know people’s needs well.”*

The service has systems in place for the management of medication. Medication stock is stored appropriately, and staff carry out the relevant temperature checks daily. At present people’s medication is stored in their bedrooms but the manager intends to change this and have a medication trolley centrally. We found no gaps in the medication administration records (MAR). Controlled medication is also appropriately stored and recorded. There is a medication policy in place containing guidance on the administration of ‘as required’ medication (PRN). People have access to healthcare and other services to maintain their health and well-being. Care staff arrange health appointments where necessary. A visiting GP told us they have no concerns regarding Brookside Care Home.

The service takes all reasonable steps to identify and prevent the possibility of abuse. Care workers recognise their personal responsibilities in keeping people safe and told us they would report any issues of concern. They are aware of the whistleblowing procedure, and said they were confident to approach the manager and RI if they needed to. There is a current safeguarding policy for all staff to access and follow. When asked if people were safe a relative confirmed *“absolutely safe”* and *“I’ve even been able to go on holiday since she’s been here.”*

People experience kindness and respect. Care staff treat people as individuals, they are very attentive and respond to people’s different needs with appropriate levels of prompting and support. People look relaxed and comfortable in the presence of staff. Staff speak in a friendly, caring and respectful way and people respond positively. We spoke with people using the service and they told us *“The staff are brilliant, can’t fault them, they can’t do enough for you,”* *“I am thriving here”* and *“they are kind and listen to me.”* A relative told us *“Staff are approachable and kind.”*

Environment

People are cared for in an environment that is being improved. The feedback provided by people living in the home and their representatives informed us “*whole home needs brightening up,*” “*needs decorating and bringing up to date*” and “*the garden could be very attractive but somewhat neglected recently.*” The RI and manager recognise this and have a plan in place for ongoing repairs and renewals. We saw that new flooring has been laid in some areas and there has been significant work completed to improve the electrics. There are several garden areas which management intend to improve in the spring. The laundry facilities are suitable to meet the needs of people living in the home. Substances hazardous to health are stored safely and communal areas are uncluttered and free from hazards. The kitchen is inspected by the Food Standards Agency and currently holds a rating of 5 (very good).

Confidentiality is maintained throughout the home. People are safe from unauthorised visitors entering the building, as all visitors must ring the front doorbell before gaining entry and are asked to record their visits in the visitor’s book when entering and leaving. Care records are stored safely in the nurse and residential office’s and are only available to authorised staff. Personnel records are securely stored in the manager’s office.

Leadership and Management

There are enough staff to provide care and support in a dignified and respectful manner. People told us that when they use the call bell staff come quickly. The staff rota reflected the staffing levels on the day of our inspection. Agency staff are used as required; regular staff are used to provide continuity for people. Nurses and care workers said although it is busy at times, they always have enough time to support residents appropriately. A new activity coordinator has been recruited and is due to start shortly, this will increase the activities and interactions available to people.

People receive support from staff who are knowledgeable however the frequency of training requires improvement. Discussions with staff evidence they have a good understanding around safeguarding and feel able to approach management with any concerns. Overall, staff have a good understanding of key policies and told us they feel skilled in carrying out their duties, receiving regular supervision. However, the training matrix we viewed did not evidence staff have completed core training, which is essential to ensure staff maintain safe practice. This was raised as an area of improvement at the last inspection. We have therefore issued a priority action notice to the service and the provider must take immediate action to address this issue.

The statement of purpose and service users guide accurately describe the current arrangements in place regarding the service's accommodation, referral and admission process, the type of care and support available and ways in which it is working towards providing a Welsh language service provision. There is regular communication between the manager and RI. We found people; family and professionals give positive feedback about the care provided.

The service provider is introducing procedures to identify and mitigate risks to health and safety. The manager is introducing a rolling programme of safety checks, servicing and maintenance of the home's equipment and facilities. Improvements are required to ensure effective and efficient fire procedures are in place to protect people. Records do not confirm weekly fire alarm tests or the required fire drills take place. The Fire policy also requires review. We expect the provider to take action to address this and we will follow this up at the next inspection.

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
36	Training should be given to staff in line with the company policies and procedures.	Not Achieved

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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57	The home's fire risk assessment has not been reviewed, fire checks not completed and fire drills not undertaken.	New
7	The statement of purpose should be available in an accessible format. The service should be run in accordance with the statement of purpose.	Achieved

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