



## Inspection Report on

**Brynawel House Alcohol and Drug Rehabilitation Centre Ltd**

**Brynawel  
Llanharry Road  
Pontyclun  
CF72 9RN**

**Date Inspection Completed**

23/02/2023

**Welsh Government © Crown copyright 2023.**

*You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: [psi@nationalarchives.gsi.gov.uk](mailto:psi@nationalarchives.gsi.gov.uk)*  
*You must reproduce our material accurately and not use it in a misleading context.*

# About Brynawel House Alcohol and Drug Rehabilitation Centre Ltd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Brynawel House Alcohol and Drug Rehabilitation Centre Ltd
Registered places	20
Language of the service	English
Previous Care Inspectorate Wales inspection	28 January 2022
Does this service provide the Welsh Language active offer?	Working towards: The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

## Summary

Brynawel provides therapeutic care and support to those people who require a holistic rehabilitation programme following detox from drugs or alcohol. Medically assisted detoxes are also provided in-house for those who meet the criteria. The service identifies all aspects of a person's physical and mental health, family and social connections and financial management to facilitate personal growth and a stable footing for returning to the community.

People who have used the service speak very highly of the whole experience, including the staff and the environment. Staff show strong values and all work to the same ethos. The manager and RI have excellent oversight of the service and are continuously driving improvement and progression of the service to make it the best it can be for the people that need it.

## Well-being

People feel respected and involved in all aspects of their support program. People can choose and describe their own goals and outcomes in aspects of their lives such as social, emotional and financial, alongside clinical outcomes identified by the nurse where required. People are encouraged, supported and motivated by skilled support staff. The service provides many opportunities for people to give feedback and staff are motivated to continually improve the care and support they are offering.

People can take part in a variety of organised group and individual talking therapy sessions, as well as art sessions and gardening as therapeutic activities. Brynawel has an open membership with the local leisure centre, which anyone staying at the service can use. Therapy dogs are also welcome, and a 'bring your dog to work' policy developed for staff who have pets suitable to visit. There is a minibus on site to take people on group trips, which is often driven by volunteers.

The service has systems in place to protect people from risk of harm or abuse. Staff complete mandatory training, and a comprehensive safeguarding policy offers guidance should it be needed. Staff are skilled at observing signs of self-neglect, abuse or poor physical and mental health and can seek advice on this as necessary.

The service is working towards the active offer of the Welsh language. At present, a translator is available should someone wish to have their pre-admission assessment in Welsh, however the RI advised that the long-term goal would be to have enough Welsh speaking staff to also provide therapy in Welsh, if that is the preferred language. The service offers to pay for language courses for any staff members who would like to learn Welsh. Documents can be translated on request.

## Care and Support

People are very happy with the support provided to them at Brynawel, and feel they are treated with dignity and respect. We spoke with both people currently staying at the service, and those that have completed their rehabilitation plans and moved back out into the community. One person who has completed their programme came back to volunteer at Brynawel and now is working there as a paid member of staff. A group of others are taking part in an 'Aftercare' project being run which includes training them as peer mentors.

People told us: *"Brynawel is a magical place, you don't ever want to completely part from it", "this place saved my life, I never thought I would ever get to be like this" and "I think we all feel the same, anything we can do to give back to this place"*.

Personal plans are thorough, detailed and person centred, clearly evidencing how and when action is to be taken to achieve people's outcomes. Risk assessments are also in place to identify each person's vulnerabilities and how to work with them on keeping themselves safe. Case notes can be inputted by all members of staff; health, therapy and recovery workers and so the care and support are holistic and cohesive. Review meetings are held frequently, along with self-assessed wellbeing checks, all of which shape the ongoing delivery of each individual's support programme.

People are supported to be as healthy as they can be. Since the last inspection, Brynawel has grown a multidisciplinary team of staff, including an occupational therapist, advanced nurse practitioner and an assistant psychologist. They are also working in partnership with the local GP surgery to deliver medically assisted detoxes for those people who meet the low-risk criteria. Medication is stored safely and administered as prescribed until people are assessed as being able to self-administer. Medication audits are completed regularly, and any anomalies identified and responded to quickly. People leave Brynawel with organised medication and prescriptions to enable them to settle back into the community.

The service has infection control processes in place, which follow a comprehensive policy. On the day we visited, all the service's buildings appeared clean and tidy. People are encouraged to keep their own bedrooms clean and do their own laundry. COVID restrictions have now lapsed to enable visitors to the service, and people to take leave to see their family as agreed as part of their rehabilitation. Personal Protective Equipment (PPE) is available, however hands on care is rarely required.

## Environment

People's wellbeing is enhanced by their environment. Brynawel is made up of buildings for accommodation, communal rooms, activities, therapy and recreation, such as a pool room. Outside are large grounds with garden areas, allotments and polytunnels, an outdoor gym, summerhouse and smoking shelter.

There are weekly walkarounds completed by the manager to identify any maintenance issues or risks to health and safety. An action plan is created to address these, and the board of trustees are informed of any significant issues. A maintenance man and gardener are employed and supported by volunteer staff. People staying at the service can take part in gardening and other tasks as part of their programme. We saw maintenance logs and records of internal fire tests and checks as well as regular servicing by external contractors. Areas such as the main office and medication room are securely locked to prevent unauthorised access.

Personal plans identify when people are vulnerable to self-neglect due to poor diet and encouragement is given to attend mealtimes and make healthy food and lifestyle choices wherever possible. A communal dining room allows mealtimes to be sociable, for those who wish to share that with others.

## Leadership and Management

In the last year, the service has continually developed in line with its vision and ethos. The RI has facilitated the use of different streams of funding to provide people staying at Brynawel with the best possible care, support and environment whilst completing their rehabilitation programme. The service is mostly fully occupied, with potential for a waiting list. Plans are in place to further expand the service to meet more people's needs and make as much of the rehabilitation process in-house as possible.

Staff are safely recruited and vetted for their roles. Feedback from people using the service, volunteers and other professionals is that although individual staff members deal with things differently, they all have a similar temperament and non-judgemental approach when it comes to delivering care and support. The recruitment process is successful in identifying people with this same attitude and value base. Staff recruitment information is recorded and stored as required, and a Human Resources officer has been employed to ensure both volunteers and paid staff are subject to the same processes and receive similar support. Disclosure and Barring (DBS) checks are completed prior to working at the service. Many of the volunteers have previously completed a programme at Brynawel and have wanted to return to help others. The staff team is broadening to a more multidisciplinary team including Occupational Therapist and Assistant Psychologist.

Management ensure that all staff are suitably trained and supervised to maintain their professional standards in their roles. Comprehensive training matrices identify when both mandatory and service specific training is due. Additional learning, such as QCF qualifications or Welsh Language courses, are offered and staff are supported to complete them. Supervisions are held regularly by the most appropriate line manager for each staff member. This is an opportunity for one-to-one discussion regarding any aspects of people's personal and professional development. Staff feedback showed the passion for the service and how happy they are to work there. One staff member told us: *"this is the best place I have ever worked, it's magical"*.

There are robust quality assurance processes in place to monitor the service and drive ongoing development. At the time of the last inspection, some improvements were needed in the scheduling of the visits made, and reports collated, by the RI. This has now been put in place, and both the RI and the manager produce comprehensive reports including audits of events in the service, monitoring of support provided against achievement of outcomes, and analysis of strengths and weaknesses. These reports are presented regularly to the board of trustees and action plans created to address any areas for improvement.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
------------	---------	--------



N/A	No non-compliance of this type was identified at this inspection	N/A
73	Regulation 73 (3) : RI visits at least every three months	Achieved
77	Regulation 77: Duty to ensure there are systems in place to record incidents and complaints	Achieved
80	Regulation 80 (1) and (2): Quality of Care Review	Achieved

**Date Published** 16/03/2023