Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Brookside Care Home

Brookside, Brecon, LD3 7UA

01874658393

The inspection visits for this service took place between 07/09/2026 and 14/09/2026

Service Information:

Operated by:	BROOKSIDE CARE HOME Limited
Care Type:	Care Home Service Adults With Nursing
Provision for:	Care and support for people living with dementia, Care and support for people with a physical disability, Care and support for people with mental health needs, Care and support for people requiring short-breaks or respite care, Care and support for people with a learning disability
Registered places:	31
Main language(s):	English
Promotion of Welsh language and culture:	The provider makes an effort to promote the use of the Welsh language and culture or is working towards a bilingual service.

Ratings:

Well-being	Good
Care & Support	Requires Improvement
Environment	Requires Improvement
Leadership & Management	Good

Summary:

Brookside Care Home is a care home based in Powys, providing care and nursing support to people with a range of needs.

We identified improvement in most areas since the previous inspection. At the last inspection, we issued two Priority Action Notices (PANs) and five Areas for Improvement (AFIs) relating to health and safety, personal planning, dignity and respect, Responsible Individual (RI) oversight, and staffing arrangements. During this inspection, we found sufficient progress had been made to remove one PAN and three AFIs. The remaining PAN relating to health and safety has been downgraded to an AFI because improvements have reduced the level of risk to people. Whilst some residual health and safety concerns remain, we no longer consider people to be at significant or imminent risk.

We found continued improvement in staff training arrangements. However, whilst training compliance has improved it remains below the standard expected. Further work is required to ensure personal plans are consistently person-centred, outcome focused and accurately reflect

people's needs. Therefore, these two AFIs remain open.

Overall, leaders have demonstrated commitment to improvement and the changes made since the previous inspection are having a positive impact on people’s well-being. Ratings have improved since the last inspection. We rate Well-being and Leadership and Management as Good. This reflects improved wellbeing for people and strengthened governance arrangements. We rate Care and Support and Environment as Requires Improvement because further work is needed to ensure people’s personal plans reflect their needs and they live in an environment that fully promotes their safety and well-being.

Findings:

Well-being — Good

People experience positive well-being outcomes because care staff know them well and support them in a kind, respectful and unhurried manner. We observed many positive interactions throughout the inspection. Care staff demonstrate a good understanding of people's histories, preferences and daily routines, helping people maintain control over their day-to-day lives. People appear comfortable in the service. Sufficient staff are available to provide support without staff appearing rushed or task focused. We saw people receive reassurance and encouragement when mobilising and noted a calm and relaxed atmosphere throughout the home. These positive interactions support people's dignity, independence and emotional well-being.

People are increasingly involved in decisions about their care and support. We found personal reviews are more meaningful and place greater emphasis on people's views and involvement. People and their representatives contribute to reviews and there is evidence the service is strengthening a culture where people's voices are heard. Staff recognise people's capacity and encourage independence whenever possible. Language preferences are recorded and the service is making efforts to promote the Welsh Active Offer. We observed examples of Welsh language promotion, including telephone calls being answered in Welsh. This demonstrates the service is working towards identifying and meeting people's language and cultural needs.

People maintain important relationships with family and friends. Visitors are welcomed at the service and care staff understand the importance of maintaining connections with those closest to people. Staff described opportunities for people to access community activities, including local groups, church attendance and shopping trips. It is encouraging that the service is continuing to strengthen links within the local community and expand opportunities available to people.

People benefit from an improving activities programme. We observed positive engagement during a live musical performance and saw people enjoying the experience. Leaders have recognised this area requires further development and have taken action by recruiting additional activities support.

Outcomes for people require improvement because personal plans do not consistently demonstrate a strengths-based and outcome-focused approach. Although reviews have improved, personal outcomes are not always reflected throughout personal plans, and some records lack sufficient personalisation. This means staff do not always have access to consistent information about what matters most to people and how they wish to achieve their individual outcomes. Leaders offered us assurance that this issue would be rectified and we look forward to testing this at our next inspection.

Care & Support — Requires Improvement

Many people receive caring and respectful support from staff who understand their needs and preferences. People benefit from continuity of care, and we observed positive interactions throughout the inspection. Care staff are familiar with people's routines and demonstrate commitment to supporting their health and well-being. We found evidence of multi-disciplinary working, with specialist involvement from health and social care professionals where required. Case tracking identified examples of input from speech and language therapists, district nurses and other partner agencies to help support people's care needs. Recent admissions demonstrated improved assessment processes, and personal plans had been completed within required timescales following admission.

Medication management is largely effective. Medication administration records are generally completed well, stock balances reconcile appropriately, and controlled drug records are accurate. Staff demonstrate a good understanding of medication systems, and storage arrangements are organised. We found evidence of regular medication audits, providing management with oversight of medication practices.

People are generally protected from infection. Staff have access to personal protective equipment, and domestic staff undertake regular cleaning duties. Most communal areas and bedrooms appear visibly clean and environmental cleaning schedules are completed. Management responded positively when concerns around cleanliness were raised during inspection and took prompt action to address identified issues.

People receive care from staff who take safeguarding responsibilities seriously. Safeguarding incidents are recorded and managed appropriately. Management and care staff were open and transparent during the inspection and acted quickly to mitigate risks when matters were brought to their attention.

Outcomes for people require improvement because personal plans do not consistently provide accurate, person-centred and outcome-focused information to direct care. Case tracking identified plans that contained inconsistent, contradictory or outdated information. We found monitoring records relating to nutrition, fluid intake, repositioning and health monitoring were not always consistent with assessed needs. Whilst people's needs are generally identified, records do not always accurately reflect the care people receive or the outcomes they wish to achieve. In addition, personal plans do not consistently contain meaningful information about people's histories and what is important to them. Greater emphasis is required on ensuring plans remain accurate, personalised and outcome focused. People may not always achieve positive outcomes because personal plans do not consistently provide sufficient information to direct staff in the care they provide. This area requires improvement and we expect the service provider to take timely action.

Environment — Requires Improvement

People live in an environment that generally meets their needs and supports their day-to-day lives. The service provides a range of communal spaces. Bedrooms are spacious, comfortable and personalised with photographs, artwork and personal belongings. People have access to equipment that supports a range of care and mobility needs, helping them maintain independence and safety. We found facilities were largely accessible.

The provider has made progress since the previous inspection and demonstrates a realistic understanding of the improvements still required. It was positive to see prompt action taken when issues were identified during inspection. Equipment no longer required was removed and areas highlighted for additional cleaning received immediate attention. We particularly welcomed the comprehensive environmental improvement plan provided during the inspection, which demonstrated awareness of current priorities and future investment requirements.

Health and safety arrangements are somewhat effective. The maintenance technician demonstrates good oversight of health and safety matters. We found evidence that routine servicing, testing and safety checks are completed appropriately. Management also demonstrated openness regarding environmental challenges and provided clear evidence of planned improvements. People will benefit from ongoing investment in the environment. Since the previous inspection, work has been undertaken to improve the premises and leaders have developed a structured plan for further renovation. This demonstrates commitment to enhancing the quality of the environment over time.

People’s outcomes require improvement because parts of the environment and associated maintenance arrangements do not consistently support people's well-being and safety. Inspectors identified uneven flooring, worn furnishings, unstable furniture and damaged fixtures within several bedrooms. Whilst these issues do not currently have a significant impact on people's physical health, they reduce assurance that all environmental risks have been effectively addressed.

Parts of the home appear tired and in need of refurbishment. Continued investment in décor, furnishings, equipment replacement and general maintenance is needed to ensure the environment consistently reflects the standards people deserve. We recognise the significant commitment made by the service provider to improving the premises and appreciate that substantial investment will be required. People may not achieve the best possible outcomes because the environment and facilities are not consistently maintained to the standard expected. This area requires improvement and we expect the service provider to take timely action. Progress against the environmental action plan will be reviewed at the next inspection.

Leadership & Management — Good

The service benefits from committed leaders who are open, transparent and receptive to improvement. Since the previous inspection, management has introduced a number of positive changes, including revised pre-admission assessments, improved handover arrangements and strengthened review processes. Throughout the inspection, leaders engaged positively with inspectors, responded appropriately to feedback and demonstrated a willingness to address concerns promptly. We received positive feedback regarding leadership and management within the service.

The RI maintains a visible presence within the home and demonstrates a good understanding of the service and the people living there. We found evidence of increased engagement with people and staff through questionnaires, consultations and regular quality assurance activity. RI reports have improved considerably and now include the range of information expected under the regulations. It was positive to note that several areas for improvement identified by the RI aligned with our own findings, demonstrating insight and commitment to service development.

Governance records, safeguarding information and statutory notifications are organised and readily accessible. The Statement of Purpose (SoP) is comprehensive and reflects regulatory requirements. Likewise, the Service User Guide contains useful information for people and representatives and reflects the service delivered.

People are supported by caring staff. Staffing levels observed during inspection appeared sufficient to meet people's needs and were consistent with the SoP. Safe recruitment practices have improved since the previous inspection and most staff are appropriately registered with Social Care Wales, the workforce regulator. Supervision practices have also become more consistent, and records demonstrate meaningful discussion regarding performance, well-being and development.

People may not achieve consistently positive outcomes because some staff are not sufficiently trained. Staff training compliance, whilst improved, is not yet consistently meeting expected standards across mandatory and service-specific subjects. In addition, induction arrangements require strengthening to ensure new staff receive sufficient preparation for working in a large and complex care home environment. This remains an area for improvement, and we expect the service provider to take timely action.

Whilst governance arrangements are developing positively, further work is required to ensure audits focus on quality, accuracy and outcomes rather than completion alone. Targeted audits of care planning and workforce compliance are required to strengthen oversight. We look forward to reviewing these continued improvements at our next inspection.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

The table(s) below show the area(s) for priority action and/or those for improvement we have identified.

Summary of Areas for Improvement	Date identified
The service provider has not ensured that all risks to the health and safety of individuals are identified and reduced so far as reasonably practicable. However, we do note significant improvement since our last inspection, but residual risk remains.	07/09/26
People's needs and personal outcomes are not sufficiently outlined in their personal plans which puts them at risk.	27/03/23
People cannot be confident of achieving their outcomes because care workers do not have the necessary training for their role.	28/10/25

CIW has not issued any Priority action notices following this inspection.

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