

Briery Park Care Home Service

New Street
Thornhill
DG3 5NJ

Telephone: 01848 332 000

Type of inspection:
Unannounced

Completed on:
1 May 2025

Service provided by:
Abee-Mayu Gunpath

Service provider number:
SP2008968599

Service no:
CS2008169826

About the service

Briery Park is a care home service registered to provide care to a maximum of 31 older people with physical and/or sensory impairment. One of the places is available for respite care. The provider is Abee-Mayu Gunpath.

The service is located in Thornhill town centre in Dumfries and Galloway, with easy access to local amenities.

The premises is a flat-roofed building on one level. There are small group living areas in the home; these include lounge and dining areas, which have snack making facilities. All bedrooms are single rooms, with en-suite toilet and wash hand basin.

There are gardens surrounding the home and an enclosed courtyard, which offer places to sit outside. There are car parking spaces to the front and side of the building.

About the inspection

This was an unannounced follow up inspection to look at progress in meeting requirements following a complaint. The inspection took place on 1 May 2025. The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection, we reviewed information about this service. This included previous inspection findings, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service, we spoke with the manager and deputy manager, and reviewed documents.

Key messages

Progress had been made in meeting the outstanding requirement.

How well do we support people's wellbeing?

We noted that progress had been made in respect of the requirement on falls management, which resulted from the complaint visit on 3 December 2024. In discussion with the management team, and from our review of the records, we could see that further progress could be made to ensure staff adhere to the service policy and procedure on falls management, when monitoring and recording observations for people in the post fall period.

Areas for improvement

1. To support the safety and wellbeing of people, the manager should ensure that all staff consistently follow the service procedure on monitoring people in the post fall period.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 10 February 2025, to support the safety and wellbeing of people, the provider must ensure that the approach to falls management is improved. To do this, the provider must at a minimum, ensure:

- a) all staff are familiar with, and follow, the guidance set out in the falls management policy and best practice guidance on managing falls in a care home setting
- b) staff have received training and guidance on falls management
- c) staff complete accident and incident reports fully and promptly
- d) post fall monitoring of people is implemented with all observations recorded
- e) staff assess people for injury and symptoms of pain and provide pain relief as appropriate
- f) in line with guidance, staff request prompt medical advice where someone has experienced a fall.

This requirement was made on 3 December 2024.

Action taken on previous requirement

Records confirmed that all staff had read the service policy and procedure on falls management and team meetings had been used to support staff knowledge and understanding. We found that NHS training on falls management has been arranged with more events planned. We sampled care plans and risk assessments for people who are known to be at high risk of falls. With one exception, we found appropriate care plans and risk assessments were in place and had been reviewed appropriately. Records showed that staff were escalating concerns to medical services where appropriate and, we could see that family/representatives were being notified without delay where their relative had experienced a fall. We found that some work was still needed to ensure the consistent recording of clinical observations for people in the post fall period. Records we sampled were not all complete and did not demonstrate that observations were recorded in line with expected procedure. Overall, we were satisfied that progress had been made in meeting this requirement. Some work is needed to ensure post falls monitoring is completed fully and consistently by all staff and so we have restated this as an Area for Improvement.

Met - within timescales

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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