



Inspection Report on

Beech Cottage

**Beech Cottage
1-4 Beech Terrace
Abercwmboi
Aberdare
CF44 6AW**

Date Inspection Completed

07/10/2022

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About Beech Cottage

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Rhondda Cynon Taff County Borough Council Adults and Children's Services
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	11 November 2021
Does this service provide the Welsh Language active offer?	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 positive about the care and support provided when staying at Beech Cottage. People's relatives told us they are very happy with the support people receive. Care staff are compassionate and respectful and generally enjoy working at the home. The service has systems to ensure care and support is of a good standard. People benefit from individualised and current personal plans. People and their relatives are always consulted and involved in their care. Up to date policies and procedures help protect people from harm and abuse. The service meets the legal requirements in relation to Responsible Individual (RI) visits and quality of care reviews. The environment is clean and adapted for people's needs. Infection control measures are of a good standard. Care staff are recruited following robust recruitment checks. They receive regular supervision and feel supported in their work. Care staff receive specialist training, enabling them to work for people who have a range of complex health needs. Improvements are required to ensure care staff are sufficiently trained in line with regulations.

Well-being

People are supported to have control over their day-to-day lives when they stay at Beech Cottage. Care and support is person-centred and people are treated with dignity and respect. Where a person needs help to make their voice heard, people's families and representatives are supported to do this, being involved in reviews of personal plans. The home has good relationships and lines of communication with relatives, who tell us staff keep them informed and updated. Where people cannot make their own decisions about their care, we saw the best interests' process was followed.

People are supported to be as healthy as they can be by getting the right care at the right time. They are supported to keep appropriately active, being encouraged to take part in activities and access the community. The home liaises with health professionals to refer any concerns and follows appropriate guidance. We saw evidence of correspondence with professionals, with personal plans reflecting direction given. Personal plans are detailed, person-centred, and reviewed before a person stays. Meals are of a good standard and are what the person has chosen. The home has a sufficient supply of personal protective equipment (PPE). We saw the management of medication is safe.

People are supported in an environment that supports them to achieve their well-being. Beech Cottage is an adapted property over two levels that caters for a wide variety of needs. Specialist equipment is in place to aid people with mobility needs. Rooms are spacious and comfortable. The home has access to specially adapted transport, meaning local facilities and amenities can be accessed.

There are systems in place to protect people from abuse and harm. Access to the home is restricted to authorised individuals. Ongoing specialist training ensures care staff are sufficiently skilled. Up-to-date policies support good practice and assist staff with reporting a safeguarding concern and whistleblowing, should they be needed. Staff told us they feel confident that if they raised a safeguarding issue with the manager, it would be responded to. Recruitment is robust, and regular supervision supports continued development.

Care and Support

Care and support is provided in a person-centred and dignified manner when people stay at Beech Cottage. People's families told us the service is "*brilliant*", they have "*nothing but praise*", they "*couldn't live my life without them*", staff "*go over and above*", and people "*like going to stay there*". We were told how the service considers the needs of people when they stay to ensure compatibility as far as possible, so that everyone can enjoy their stay at Beech Cottage and be safe.

Care staff have up to date knowledge of people's needs and personal goals. Personal plans are person-centred and contain information about people's goals and outcomes. We saw evidence plans had been produced in partnership with people and their representatives. We saw plans are reviewed before a person stays, with personal plans being updated following a review. We saw detailed risk assessments, covering areas specific to the person's needs. Care files contained assessments and guidance from other professionals, such as learning disability nurses and consultant psychiatrists. We viewed evidence of appropriate and timely referrals to health professionals, with recommendations and direction acted upon by the service. Service contact sheets contained detailed information about details from a person's day. Personal spending records showed people were supported to manage their money and were safeguarded. We viewed evidence of best interests' decision making where people were found to be unable to make decisions about their care.

There are systems in place for the management and storage of medication. Medication was stored securely. Medication Administration Records (MAR) were viewed, and we saw guidelines from the Local Health Board about when to administer 'as needed' medication in people's files. A medication policy is present.

There are infection control measures in place to help keep people safe from the transmission of COVID-19 and other potential sources of infection. Staff have access to a supply of appropriate PPE. There is an infection control policy in place. A cleaning rota is in place to ensure regular cleaning is undertaken by staff, with the home appearing clean and well kempt on the day of inspection.

Environment

People's wellbeing is enhanced by staying in an environment that is clean, safe, and adapted to their needs. Beech Cottage is an adapted property on two levels, located in a residential area of the village of Abercwmboi. The home is secure from unauthorised people, with visitors required to sign before entry. The home is clean, tidy and free from malodours. Bedrooms are large and comfortable, with specialist tracking hoist equipment and an adjoining bathroom in two of the bedrooms. The service has a minimalist décor to aid the needs of some of the people who stay there. There are homely and comfortable living and dining areas, where people can choose to spend their time. The kitchen facilities are appropriate and enable people to take part in preparing food if they wish. There is a secure garden area with accessible patio areas for people to use.

The service takes measures to ensure the home environment is safe. Substances hazardous to health are stored in cupboards in line with Control of Substances Hazardous to Health (COSHH) regulations. We saw fire exits were clear of clutter and obstructions. There were no obvious trip hazards. Daily cleaning duties were being maintained. There are fitted window restrictors in all bedrooms and bathrooms viewed. Maintenance is managed by a Corporate Estates team. Maintenance records confirm the routine completion of utilities testing. The auditing and servicing of equipment is up to date and fire safety tests and drills are completed. Personal evacuation plans are in place, so staff understand the level of support people need in the event of an emergency

Leadership and Management

People are supported by a team of staff who are recruited safely. Staff files viewed show appropriate recruitment arrangements and contain all legally required information. Staff start work once pre-employment checks are completed. New staff have access to an induction programme. Training is in place for specialist health conditions relevant to people who stay at the service, such as percutaneous endoscopic gastrostomy (PEG) feeding, moving and handling, and Positive Behaviour Support. Training records show not all staff have up to date training in core areas of care. We advised this is an area of improvement, and we expect the provider to take timely action to address this.

Staff feel supported in their role. They told us they “*really enjoy*” working at the service and supporting the people who stay there, and “*feel supported*” by the current managers. Some staff have worked for the service for many years, which helps facilitate continuity of care. Staff have regular supervision to reflect on their performance, identify support they might require, and discuss any issues. This is an improvement acted upon following the last inspection. The manager told us staffing levels are worked out based on the number of people staying and their level of need. This is adjusted as needed, is planned based on respite bookings, and the rota reflected staffing on the day.

Appropriate governance, auditing and quality assurance arrangements are in place. These systems help the service to self-evaluate and identify where improvements are required. The RI appears to have good oversight of the service. We saw evidence of the RI undertaking the legally required three-monthly service visits and six-monthly quality of care reviews. Policies and procedures, such as for complaints, infection control, medication, and safeguarding, are in place. They give guidance to care staff, for example telling them what to do if they thought someone was at risk of harm.

The service provides good information to the public. The Statement of Purpose sets out the service’s aims, values, and delivery of support. A written guide contains practical information about the home and the care provided and is available in an easy-read format.

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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36	Core training has not been provided to all staff.	New
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Date Published 08/11/2022