



# Inspection Report on

**Pen-coed Residential Care Home**

**Pencoed  
Wooden  
Saundersfoot  
SA69 9DY**

**Date Inspection Completed**

13/04/2022

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## About Pen-coed Residential Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Forest Care Homes Ltd
Registered places	25
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">Manual Insert</a>
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

People lead fulfilling lives and have access to daily activities. Comprehensive personal plans are in place and risk assessments keep people safe and well. People are encouraged to maintain contact with those individuals who are important to them and staff understand and support daily routines. Care staff provide care and support in a least restrictive manner. People and relatives are satisfied with the service they receive and report positive relationships with staff.

The management team maintains good oversight and are visible in the service. Good communication channels are evident throughout the organisation and staff feel valued. Policies are up to date and fit for purpose and the Responsible Individual (RI) shows a good level of awareness of the service. PPE and infection control measures are understood and maintained.

The environment is well maintained, clean with no malodours and personal and communal areas are welcoming. The outside of the home requires painting and the manager gave an assurance that this was planned for the near future.

## Well-being

People receive good quality care. A number of care staff we spoke with have worked at the service for several years and demonstrated a good understanding of people's needs. Staff told us they have sufficient time to familiarise themselves with people's plans, to ensure they understand individual routines and care needs. All staff we spoke with feel the service provides good quality care.

People are protected from the risk of harm and abuse. Care workers are knowledgeable, well trained and care about the individuals living in the service. They also have a good understanding of people's needs and how best to meet these. Whilst care records provide information about the requirements and preferences of people, details of the person's history could better inform care workers about the individual. The service liaises with health and social care professionals to make sure people remain as healthy as possible.

There are good recruitment, supervision and training procedures in place to ensure staff have the right skills, knowledge and approach to care. Staff recognise the manager's experience and they are well supported by the RI. Care staff are clear on their responsibilities to protect people and are supported by policies, which are regularly reviewed and updated.

Appropriate infection prevention and control measures are in place and staff are clear about their role and responsibilities. The service is clean, well maintained and welcoming for people.

People's choices and views are recognised. The RI seeks the views of individuals living and working in the service during Regulation 73 visits. People can personalise their bedrooms and communal areas with items important to them such as furniture, ornaments, photographs and artwork. People have choices of meals and refreshments and are involved as much as possible in their care.

## Care and Support

People consistently told us that they are well cared for by staff who they know and like. Care plans are reviewed regularly in order to ensure that people's changing needs are met appropriately. Discussion with the manager and with care staff evidenced that they are very familiar with the people living in the home and are able to notice any changes to people's needs promptly. Appropriate referrals are therefore made to relevant health and social care professionals in a timely manner in order to ensure people's health and well-being are promoted.

All staff spoken with told us that they enjoy their work at Pencoed and that they feel very well supported by the manager, RI and the staff team as a whole. Care staff said that they feel that this leads to a happy, relaxed and familiar atmosphere for people to enjoy within the home. A number of staff said that the staff team support one another well and that this was invaluable during the Covid-19 pandemic. Care staff told us that they are well supported by the manager who is approachable, listens and is responsive. They said that they would have no hesitation in reporting any concerns or issues to her and would anticipate a swift response.

People are cared for and supported by staff who are well supervised and trained. All staff spoken to said that they had received regular supervision and records corroborate this. Care staff told us that they had received all appropriate training to enable them to do their jobs effectively and with confidence. The training matrix provides evidence of this. Care staff spoke well of the training provided to them and said that they felt they had sufficient training to enable them to carry out their roles effectively.

People are protected by the policies and procedures in place which underpin the care and support provided within the home. Care staff are aware of these, including those in place to safeguard people and could describe the procedures they would take in order to safeguard people from abuse.

## Environment

The environment supports people to achieve their personal outcomes. People live in a service where they are safe and comfortable in their surroundings. There are good security measures in place preventing unwanted access into the building. Visiting arrangements follow current Public Health Wales (PHW) guidelines. There are good visiting facilities for people and their visitors to use, including an enclosed area in the garden. The interior of the building appears well maintained and ongoing maintenance takes place. The exterior of the home is in need of repainting and the manager assured us that this was planned for. There are a number of communal areas for people to use, including the lounge, dining area and spacious conservatory. These are all well used and offer people the opportunity to socialise if they wish. There is a secure outdoor garden which has been developed to provide an area for people to enjoy communal activities, or to spend quiet time, if they wish. In the better weather people use the wider grounds. Staff are readily available to assist people in a respectful and dignified way.

The home offers a welcoming environment. All bedrooms are personalised and decorated to a good standard and in a homely and comfortable way. Communal areas are welcoming, pleasant and well furnished. People said that they were very happy with their surroundings and indicated that they felt a sense of belonging. All areas of the home appear clean and there are no malodours. The manager ensures that maintenance checks are carried out such as fire safety and equipment checks and that appropriate certification is sought for services to the home, such as electricity. Two whole home maintenance checks are carried out during each 24 hour period in order to ensure people's ongoing safety.

## Leadership and Management

Systems are in place to support the day-to-day running of the service. The statement of purpose is up to date and reflects the service provided. A range of policies and procedures are available and care workers we spoke with have a good working understanding of these. The manager told us that care workers are informed, and reminded, that the policies and procedures are located in the office and readily available to all staff. There is a clear management structure in place and staff understand their role in the wider organisation. The RI evidences oversight through the quarterly RI visits and six monthly reports. The RI regularly consults with people, relatives and staff on the quality of the care provided. We noted team meetings take place on a regular basis to update staff on any changes to policies or practice and support good communication. A complaints policy is in place and people working at the service told us they know how to raise a complaint should they need to.

Ongoing training supports staff to ensure they continue to meet the needs of the people they care for. The training matrix confirms the service offers frequent training opportunities and staff remain up to date with all training requirements. We viewed a number of staff files and found that recruitment and vetting processes are robust.

Care staff said that they feel supported both informally by the manager and their peers and by more formal supervision. Records of formal supervision sessions, which take place at least every three months, are kept. They evidenced that a range of topics are discussed including staff development and training opportunities. Care staff told us that they are confident in approaching their manager with any issues or queries they might have. Care staff told us morale is good and staff work well together as a team. From viewing a selection of staffing rotas and from feedback provided, we can be confident sufficient staffing levels are in place. Care staff told us they enjoy working for the service and feel valued by the management team.

### 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



**Date Published** 01/08/2022