



Inspection Report on

Beech House

**27-29 Cog Road
Sully
Penarth
CF64 5TD**

Date Inspection Completed

14/08/2023

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About Beech House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Ocean Community Services Limited
Registered places	10
Language of the service	English
Previous Care Inspectorate Wales inspection	11 May 2021
Does this service promote Welsh language and culture?	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 happy living at Beech House and have built good relationships with the staff who support them. Care documentation is detailed and clearly outlines people's needs and how they should be met. People are treated as individuals and do the things that matter to them. Care staff treat people with kindness and respect and have good knowledge of the needs of the people they care for. Care staff receive appropriate training and feel fully supported by the management. All staff have regular supervision. The Responsible Individual (RI) has good oversight of the service and there are robust quality assurance procedures in place. Care staff levels are very good but there is some agency staff use at the service as the provider continues to recruit care staff. There are policies and procedures in place and a robust complaints process. Safeguarding of people living at the service is taken very seriously and referrals are monitored closely. People live in a suitable environment that is warm, clean, and spacious. Safety checks of the building are completed correctly, and fire safety measures are in place. People have their own bedrooms which offer quiet time and privacy.

Well-being

People receive care without delay. Care staff levels at the service are very good and ensure that people receive their care in a timely manner and can attend activities of their choice. Personal plans correctly guide care staff on how to care for people and contain additional documentation such as risk assessments when required. Care staff have built positive relationships with people and understand their needs and preferences. Medication processes are robust, and changes have been implemented to make administration as safe as possible. Quality assurance processes are in place to ensure a quality service is always provided. Care staff attend training relevant to the jobs they undertake and have formal supervision regularly. People are happy living at the service and speak positively about the care staff who support them.

People are treated with dignity and respect. Care staff support people with kindness and patience and have learned skills to enable them to support people in the best possible way. People are at the centre of care planning and their views are included in personal plans of care. The RI engages with people during their monitoring visits and the manager is available to speak with people if they have any concerns. People are given detailed information about the service they can expect to receive which includes details of how to complain if they are not happy. People have access to independent advocacy services and encouraged to maintain relationships with friends and family. All bedrooms are single and offer people personal space, privacy, and a sense of belonging. People have choice regarding how they spend their time and are encouraged to be as independent as possible.

People are protected from abuse and harm. Beech House has a robust safeguarding policy in place and all staff attend training in the safeguarding of adults at risk of abuse. Referrals are made to the local Authority safeguarding team when required. Referrals are then stored centrally with outcomes recorded and monitored as part of quality assurance processes. This is good practice as it enables the provider to monitor referrals for themes, trend, and patterns of abuse. The environment is safe as hazards are reduced and safety checks are completed. Fire safety measures are in place and kept under review. Care staff are recruited safely as pre-employment checks are completed and there is a system in place to renew Disclosure and Barring Service (DBS) certificates when required.

Care and Support

People have choice and control over their lives. Personal plans of care are person centred and include peoples likes, dislikes and preferences as to how their care is delivered. People are included in the assessment of their needs to ensure their personal outcomes and goals are understood. People's daily routines are individual as they choose when to get up in the morning, when to go to bed at night and how they spend their time in between. People have personal activity plans which include activities of their choice within the home and the community. People told us some of the activities they attend and added that they "*like them very much*". We saw photographs on display of people enjoying and interacting in past activities. People are supported to be as independent as possible and are encouraged to do things for themselves where possible. Care staff support people to plan weekly meal menu's and to complete the food shop. People have the choice of the planned meal but can have an alternative if they prefer.

People get the right care at the right time. Care staff have a very good understanding of the needs of the people they care for and can anticipate the needs of people who cannot communicate verbally. Care staff have learned the sign language 'Makaton' to communicate with some people living at the service. Care documentation is robust and clearly outlines peoples needs and how they should be met. Personal plans are kept under review to ensure they remain accurate. Personal plans of care are important as they guide staff on how to care for people correctly. Referrals are made to health and social care professionals without delay and any advice or guidance is added to personal plans. People have support from an internal multi-disciplinary team with whom they meet regularly. Care staff levels are very good and ensure that people do not wait for care. There is currently some agency staff used daily but we are assured by the provider that consistent agency care workers are used, and they are actively recruiting to fill the current vacancies. Medication processes are safe as medication is stored correctly and administered safely. We noted some liquid medication bottles did not have an opened date on them but were assured that this would be completed going forward. Medication Administration Record (MAR) charts in place contain all required information and are signed correctly when medication is administered.

Environment

People live in a suitable environment. Beech House is in the residential area of Sully and benefits from local amenities and good transport links. The service is made up of two semi-detached houses that both comprise of four en-suite bedrooms and one self-contained flat. The service is warm, welcoming, clean, and decorated nicely throughout. There is ample communal space for people to enjoy spending time together and to partake in group activities. The kitchens are spacious and facilitate people being supported to prepare meals and another space for people to eat their meals if they choose. Bathrooms and toilets are all clean and in good working order and fully accessible. Beech House has safe outdoor space that is well maintained and has furniture for people to enjoy the outdoors comfortably. People have their own bedroom's which are large, warm, and clean. Single bedrooms offer opportunity for people to have quiet time and personal space. People are free to access their bedrooms as they wish and are encouraged to personalise their rooms to make the space as homely as possible. People told us that they like their bedrooms and we saw staff respecting people's private space.

People can be assured they live in a safe environment. On arrival at Beech House our identification was thoroughly checked, and we were asked to sign the visitor book before being permitted entry. We conducted a tour of the building and found that hazards have been reduced as far as practically possible. Harmful chemicals are locked away safely and there are window restrictors in place. We noted some bedroom doors wedged open with pillows and advised the provider that they must be removed due to fire safety. We were given assurances that this would be addressed. Beech House has a fire risk assessment in place which is reviewed annually, and all staff attend fire safety training. Everyone living at the service has a Personal Emergency Evacuation Plan (PEEP) in place. PEEPs are important as they guide staff on how to evacuate people safely in the event of an emergency. Fire alarms and emergency lighting are tested weekly, and we were told that full fire drill evacuations take place at least twice per year. The building is well maintained and safety checks including gas and electricity safety testing take place in line with legal requirements.

Leadership and Management

People benefit from the leadership and management in place. Beech House benefits from a manager who is registered with Social Care Wales, the workforce regulator and an RI who has good oversight of the service. There are policies and procedures in place for the running of the service and we were told that all policies are to be reviewed with a view to them being more succinct. The manager understands legal requirements of caring for vulnerable people and makes referrals to the Deprivation of Liberty Safeguards (DoLS) when required. This ensures that placements at Beech House are lawful where people lack the mental capacity to make decisions regarding their care and accommodation. There are robust quality assurance and governance arrangements in place which indicate that the provider is committed to providing a quality service and making improvements when needed. The RI visits the service regularly and engages with people using the service and care staff working at the service to ensure their views of the service are captured. Complaints to the service are taken seriously and dealt with correctly. The service has also received several compliments from third parties in regard to the good care staff provide. People are given detailed information about the service and can access independent advocacy services.

People are supported by care staff who are well trained and safely recruited. Care staff like working at Beech House and feel well supported. One staff member said, "*the manager is really lovely and senior staff are great*". Another staff member said, "*I like my job very much and have no issues working here at all*". All staff receive appropriate training and feel well equipped to undertake their roles. All care staff receive a formal supervision in line with regulatory requirements. Supervision is important as it is an opportunity to discuss care staff practice issues or needs in a formal setting that is recorded. Care staff working at the service are registered or in the process of registering with Social Care Wales. We examined a selection of staff personnel files and found them in very good order and containing all required documentation. We saw that pre-employment checks including DBS certificates and references are applied for prior to employment commencing. These checks are important as they determine a person's suitability to work with vulnerable people.

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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N/A	No non-compliance of this type was identified at this inspection	N/A
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