

# Inspection Report on

The Beeches

The Beeches Nursing Home 1 Bethuel Street Aberdare CF44 7HJ

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

**Date Inspection Completed** 

19/06/2024

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# About The Beeches

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	PARKCARE HOMES LIMITED
Registered places	46
Language of the service	Both
Previous Care Inspectorate Wales inspection	12 <sup>th</sup> April 2023
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

## Summary

People living at The Beeches receive good person-centred care and support. The majority of care workers have worked at the service for a number of years. This enables staff to know the people they support very well and are familiar with their needs and routines. People told us they are very happy living at the service. People's relatives provided complimentary feedback regarding the service their loved ones receive. There are opportunities for people to take part in activities. Nutritional needs are understood and met.

Care documentation is detailed and clearly set's out people's care and support needs. Risk assessments help to identify and manage areas of concern. Care documentation is reviewed regularly to ensure it remains current. Systems in place ensure medication is stored and administered safely. Care workers feel they are supported by management and are happy working at the service. Care Workers report team morale as being *"very good"*. Suitable governance arrangements are in place, helping the service run smoothly. The Responsible Individual (RI) has good oversight of the service and regular quality assurance monitoring takes place. The environment is clean, comfortable, and well-presented. Regular audits and an ongoing maintenance programme ensures the environment is safe.

#### Well-being

People's overall well-being is promoted by a service which provides good care and support. People have a voice and are treated with dignity and respect. Care workers have very good knowledge of people's routines as well as what is important to them. People have opportunities to take part in a range of activities. Activities are person-centred and consider the health conditions and needs of individuals in the home. There is a monthly timetable to tell people what activities are happening and when.

People live in an environment that supports them to meet their needs. The accommodation is provided over two floors. Bedrooms are comfortable and personalised to people's preferences. There are sufficient communal areas available. Suitable mobility aids are in place to help people where needed. A clean, comfortable environment helps support people's well-being. The home is well maintained. People are safe from unauthorised visitors entering the building, all visitors have to ring the front doorbell before gaining entry and are asked to record their visits in the visitor's book when entering and leaving. Care records are stored safely and are only available to authorised care workers.

The management team and RI gather regular feedback to ensure the care provided meets expectations. Good medication management arrangements are in place. Medication is securely stored, and people receive their medication as prescribed. Regular health and safety audits and cleaning schedules promote safety and good standards of cleanliness and hygiene. People are protected from harm and neglect. Staff have received training in safeguarding vulnerable people and there is a safeguarding policy in place to guide staff. People are supported to maintain and improve their health and well-being through access to specialist care and advice when they need it. Referrals are made to professionals in a timely way and there is evidence of healthcare professionals visiting residents.

## **Care and Support**

People receive a good standard of care and support which is specifically tailored to meet their individual needs. The home has 'resident of the day' enabling a designated care worker to spend purposeful time with individuals, making sure they are always familiar with their wishes and preferences. Care workers appear to know the people they support well and are familiar with their needs and routines. People we spoke to provided positive feedback regarding care workers. One person said, "*I wouldn't change anything about living here*", "*staff look after me well*". Positive feedback was also received from people's relatives who used words like "very good", "we have no issues or complaints at all", to describe the standard of care and support provided. We saw people have access to a range of activities they enjoy which promote inclusion and social interaction. On the day of inspection, we saw care workers providing a range of activity choices in a relaxed environment. We saw positive interactions between care workers and people.

Assessments are completed prior to people coming into the home. This ensures the service is able to meet individual needs and support people to receive care and support to achieve personal outcomes. Personal plans are detailed and person-centred. Plans clearly outline the level of care and support people require enabling care workers to best support them. Information recorded in personal plans include care plans, risk assessments and management plans. Care workers complete daily recordings which are accurate and give a detailed account of care and support provided. Reviews of care documentation take place monthly, updates are implemented if needed. Deprivation of Liberty Safeguards (DoLS) authorisations are in place for people who lack mental capacity to make decisions regarding their care and support. These authorisations ensure care and support provided which may deprive people of their liberty is legal.

Medication audits are in place. Medication is securely stored and can only be accessed by authorised personnel. Care workers receive relevant training and follow a medication policy promoting safe practice. Medication is frequently audited to identify and address any issues. We looked at a number of medication administration recording charts and found people receive their medication as directed. Information recorded on people's personal plans show they have good access to health care professionals when needed.

## Environment

People receive care and support in an environment which is adapted to suit their needs. The home is set over two floors with lift access for those with mobility problems. Bedrooms are individualised to people's tastes, containing photos and decorations which make the environment feel homely and familiar. The service has a range of lounge areas, where people can choose to spend their time. The home has a garden at the front of the building which provides a safe space for people. On the day of inspection, we observed people enjoying and undertaking activities in the garden. They appeared calm and relaxed, this suggesting they are happy with the environment. Care workers follow daily cleaning schedules to maintain good levels of cleanliness and hygiene. There are sufficient toilet and bathing facilities as well as specialist moving and handling equipment such as hoists for those who require it. People have access to call bells to alert staff when they require assistance.

Ongoing checks and maintenance ensure the environment remains safe. We saw records of routine utilities and equipment testing. Fire safety tests and drills are completed regularly. Personal emergency evacuation plans (PEEP's) provide guidance on how people should be safely evacuated in the event of an emergency. A maintenance worker is employed to carry out routine health and safety checks and general repairs. Substances hazardous to health are stored securely and there are no obvious trip hazards. Repairs to the property are completed in a timely manner. The service has been awarded a score of three by the Food Standard Agency this suggesting hygiene standards are satisfactory. A sufficient supply of personal protective equipment is in place. People's personal information, together with employee personnel records, are stored safely, and are only available to authorised members of the staff team.

## Leadership and Management

Care workers feel supported within their roles. Care workers we spoke with say they enjoy working at the service and provided complimentary feedback such as "*I feel valued*", "*staff work very well together*", "*I don't think there is anything the home can do better*", "*I love working here*". There is a culture of openness in the home. We saw the manager's office door was always open and people living and working in the service walked in freely to chat.

Care workers receive sufficient training and recruitment practices are safe. Overall staff recruitment files contain the required information and checks to ensure staff hold the necessary skills and are of good character. Records show staff have good induction and training. Care workers told us they receive sufficient training to carry out their duties effectively and safely. Training information we viewed shows care workers are generally up to date with their training requirements. There is a clear staffing structure in place and all staff we spoke with understand their roles and responsibilities. We saw the majority of staff are registered with Social Care Wales, the workforce regulator. This is done to ensure staff possess the relevant skills and qualifications needed for working in the care sector. We looked at information relating to supervision and appraisal and found care workers receive the required levels of formal support which corresponds with the positive feedback we received.

The service benefits from good governance arrangements. Policies and procedures underpin safe practice, they are kept under review and updated when necessary. We saw evidence the RI regularly meets with people and staff to gather their feedback to inform improvements. The quality of care provided is reviewed in line with regulation and a report is published on a six-monthly basis. This report highlights what the service does well and any areas where improvements can be made. Complaints, reportable incidents, and safeguarding matters are recorded and processed in line with policy. We looked at a cross section of the services policies and procedures and found they reflect current statutory and best practice guidance. Other written information we viewed included the statement of purpose and service user guide. Both these documents are reflective of the service provided and contain all the required information.

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. Th 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		

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

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