



## Inspection Report on

**Beach Court Care Home**

**Beach Court Care Home**

**35-39**

**Beach Road West**

**Prestatyn**

**LL19 7LL**

**Date Inspection Completed**

**30/8/2022**

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## About Beach Court Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Rebba Care Ltd
Registered places	32
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	Working Towards. 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 are happy with the service they receive and have positive relationships with the staff who support them. Interaction between people and staff is warm, friendly and respectful. Robust audit and maintenance systems are in place to ensure risks to people's health and safety are identified and addressed in a timely manner. Policies and procedures are in place for the smooth running of the home.

Care workers are trained and there are sufficient numbers to undertake their role and meet the needs of people. Staff are recruited safely, and management have good oversight of the service and understand their legal requirements when caring for vulnerable people. Care records clearly describe how care workers are to meet people's individual needs. Management is supportive and approachable. The dining experience is positive, and the environment is safe, warm, and clean, and meets people's needs. Bedrooms are individualised and personal to the person occupying the room.

## Well-being

People have choice over their daily lives. We saw people's rooms are personalised and they have decorated them with photos, pictures, and items of importance. The RI, who is also the manager, is based at the service most days and knows the people using the service well. People have access to an advocacy service if needed and there is a robust complaints process in place. People can choose how they want to spend their day, where they want to go, how they keep their own rooms and what they eat. Care planning documentation is developed with the person being cared for and contains their wishes and feelings regarding the care they receive. People benefit from a variety of social activities and pastimes of their choice. The service has their own minibus and regular outings are arranged.

People live in a home which is welcoming, homely, and safe. The entrance to the home is secure and there are infection control measures in place to protect people. The RI ensures the building, specialist equipment, and outside areas are secure and monitored at all times as well as being maintained. Raised garden areas are available for people to use if they want to. Care workers interact and support people in positive ways, with good-humoured conversations and good rapport was heard. The building is easy to navigate with pictures on their bedroom doors to help orientate people to their rooms.

People can be assured that they are protected from abuse and harm. Staff are trained in areas related to health and safety and safeguarding. The RI completes audits such as falls, environmental audits and infection control to ensure good quality care and support is offered. There is a robust safeguarding policy in place and staff know how to raise any concerns if they arise. People live in a safe environment, which is secure and free from hazards. Staff recruitment is safe and robust as references and Disclosure and Barring Service (DBS) checks are completed before employment is offered.

The provider is working towards the Active Offer of the Welsh language: this means being proactive in providing a service in Welsh without people having to ask for it. Four staff members speak Welsh, and there is a staff member on duty who speaks Welsh on each shift. We heard the administration person speak Welsh to people and can translate any documentation if requested. There is bilingual signage around the home. We heard the RI speak Welsh to some people. The Statement of purpose is available only in English.

## Care and Support

People experience appropriate, responsive care from staff who have an up-to-date understanding of their individual needs and preferences. Personal plans are person centred which includes details of their likes and dislikes, but this could be further enhanced in how they like their care to be provided. A 'This is me' document explains what care people require which informs staff about people's life histories, previous employment, and preferences. Personal plans are reviewed every three months or updated as the persons needs change. We saw in people's notes that they are supported to consult with a wide range of health professionals as required, including GP's, Community Psychiatric Nurses, and District Nurses.

People's physical, emotional, and mental health is promoted, and their creative work is displayed around the home. People are offered a choice of homemade meals in addition to the four weekly rolling menus. The menu is currently under review taking into consideration what meals are popular and what is not. Drinks are available in the communal areas and in their bedrooms along with snacks for people to help themselves. There is a wide range of activities on offer which include chair aerobics, watching films, quizzes, regular walks to beach for ice-cream which is directly on their doorstep and trips out for a pub lunch in the home's own minibus. People spoke very passionately about a recent 'Elvis' entertainer and how they thoroughly enjoyed the afternoon.

People receive good support from friendly, respectful, and caring staff. We observed staff providing support in a person-centred way, evidencing they have a good understanding of people's individual needs. We saw care is provided in such a way that people experience warmth and attachment with all the staff who work in the home. People's privacy and dignity is maintained. We heard staff knocking on people's doors before entering their room. Staff communicate effectively with people and the atmosphere within the service is homely, calm, and relaxed.

There are mechanisms in place to safeguard people. Individual risk assessments are in place. The provider ensures the service safeguarding policies and procedures are up to date and accessible to all staff. Care staff are trained in safeguarding and know what steps to take if a person may be at risk. There are effective systems in place to ensure care staff training is up to date.

## Environment

People are cared for in a safe and secure environment. Access to the home is through a locked door, which required staff to open, and visitors are required to sign the visitor book and show a negative LFT result before entering. There are pleasant garden areas, which are easy for people to access. There are raised flower beds and gardening tools to use if they wish to grow things. The outside area is secure with coded gates, staff supervise people when they are outside. New fire curtains have recently been installed in the two lounges. Personal Emergency Evacuation Plans (PEEP's) have been compiled and there is an emergency procedure in event of a fire. The home has been awarded a food hygiene rating of 5 (very good) in February 2022. Documentation relating to the control of substances that are hazardous to health (COSHH) are in place. Maintenance records seen demonstrate electrical lighting, and fire safety equipment are tested within required timeframes. Hoists are in good condition and are checked and monitored as required. Staff have received training in fire safety, infection control, emergency first aid, health and safety.

The home is welcoming, comfortable, homely, and personalised. People can bring in items to personalise their rooms, we saw many rooms looked comfortable and reflected the individual's taste. There are picture frames on people's bedroom doors which can be used to help people identify their rooms. The communal areas have photographs of the people using the service, taken whilst doing a range of activities. There is a dedicated 'Smile' wall where photos of residents are on display. We saw one bedroom was in the process of being decorated. People have access to a stair chair if needed as well as a passenger lift. There are bilingual signs on all doors such as toilets and bathrooms. The environment audit identifies work that is needed and is addressed. There is a dedicated cleaning and laundry staff who take pride in their work.

## Leadership and Management

Governance arrangements are in place to ensure the smooth operation of the service. There is currently no registered manager however, the responsible individual (RI) has filled this role until the manager's position is filled. The RI is at the service most days and has regular contact with staff and people. The RI has not completed their three-monthly reports since April 2022, however as the RI is in the home most days and has good oversight of the service and there is no impact, we will follow this up at the next inspection. We viewed a sample of policies and procedures and saw they are reviewed regularly to ensure they accurately reflect current legislation and guidance. A quality-of-care review report has been produced which considers the views of people using the service, family representatives of people using the service and staff. However, more detail is required to include the homes own audits such as falls, compliments and concerns. Quarterly staff meetings do not take place however, discussions between management and staff happen on a day-to-day basis and via handover.

People receive a service where staff are safely recruited, well trained and there is enough staff are on duty to meet the needs of people. Staff files are organised, easy to navigate and include the necessary safety checks, ensuring staff's suitability to work with vulnerable adults. Disclosure and Barring Scheme (DBS) checks are carried out and references from previous employers are in place. Staff receive regular supervision to help them in their role and annual appraisals are carried out. We found certificate evidence of training attended such as infection control, manual handling, medication administration and dementia. We found sufficient staff were present during our visit and the staff rota demonstrated ongoing sufficient care staff available during the day and night.

The service provider has not declared any financial difficulties to CIW. People have good food options and there are plentiful stocks of fresh food in the home. New fire curtain shutters in both lounges have been purchased and there is an ongoing decoration programme in place.

### 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
56(2)	The service provider is not compliant with 'The Regulated Services (Service Providers and Responsible Individuals (Wales) Regulations 2017' 56 (2). The service provider has failed to ensure the service is provided in accordance with infection control policies and procedures in place to control and minimise the spread of infection.	Achieved

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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