Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Beechlea

Blackwood

01495221583

The inspection visits for this service took place between 16/09/2026 and 28/09/2026

Service Information:

Operated by:	Abbey Ambitions
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for learning disability, Provision for mental health
Registered places:	4
Main language(s):	English
Promotion of Welsh language and culture:	The provider is not promoting the Welsh language and culture needs of people, and this requires improvement.

Ratings:

Well-being	Good
Care & Support	Good
Environment	Good
Leadership & Management	Good

Summary:

Beechlea is a small care home situated in a village close to Bargoed and provides accommodation, care and support for up to four adults.

People's well-being and the care and support they receive are both rated as good. People are at the centre of their care and are treated with dignity, kindness and respect. Their choices, independence and individual outcomes are promoted, with personal plans reflecting their needs and wishes and are regularly reviewed. People receive their medicines as prescribed, with some aspects of medication management identified for further improvement.

The environment and leadership and management of the service are both rated as good. People live in accommodation that supports their independence, safety and sense of security. Improved environmental oversight is required to ensure people continue to live in a safe and well-maintained home. The service is generally well managed, and quality assurance arrangements continue to develop to support effective monitoring and improvement. The RI is strengthening their oversight to provide greater assurance about the ongoing quality and safety of the service.

Findings:

Well-being — Good

People experience good emotional and physical well-being at Beechlea. They appear comfortable and settled in their surroundings and are treated with kindness, dignity and respect by a caring and attentive staff team. People benefit from positive relationships with staff and enjoy the companionship of others. Friends and relatives are welcomed and can visit when they wish, supporting people to maintain relationships that are important to them. Staff support people to access their local community and wider opportunities, including holidays abroad. People have opportunities to engage in activities and interactions that are meaningful to them, including planned activities and informal, spontaneous interactions with staff. People appeared relaxed and comfortable in the company of staff, demonstrating positive relationships and a sense of belonging within the service.

People are supported to make choices and exercise as much control as possible over their daily lives. Staff were heard and observed offering people choices, and personal plans reflect individual likes, dislikes and preferences. People's language preferences are identified as part of the assessment process and support is provided accordingly. People have opportunities to express their views about the service through arrangements such as keyworker meetings and visits from the Responsible Individual (RI).

There is focus on promoting and maintaining people's emotional and physical health. This includes access to GP services and other health and social care professionals, with staff supporting them to attend appointments. Referrals are made promptly when there are changes in people's health, demonstrating a responsive approach to maintaining well-being.

There are systems in place to help protect people from abuse and harm. The service assesses people's care and support needs and any associated risks to their health and well-being. Care staff are trained to meet the needs of the people they support and are aware of their safeguarding responsibilities. There are whistle-blowing and safeguarding policies and procedures in place to further support practice.

The accommodation generally supports people's well-being. People have access to communal areas where they can spend time together, while their bedrooms provide private space and are personalised with belongings reflecting their individual tastes and preferences. People also have access to outdoor garden space. Routine fire safety and health and safety checks are completed to help maintain a safe environment.

Care & Support — Good

People receive care and support that helps them achieve their personal outcomes and promotes their well-being. Staff provide support with warmth, compassion and patience and demonstrate a good understanding of people's individual communication needs and preferences. They adapt their approach to enable people to understand, engage and express themselves. We observed positive and meaningful interactions, with people appearing relaxed and reassured by the staff supporting them.

Personal plans provide a comprehensive and individualised overview of people's needs, preferences, and backgrounds. These plans include social histories, reflect people's voices, and guide staff in delivering consistent and responsive care. Plans are reviewed regularly, although records do not always clearly demonstrate how people, or their representatives, have been meaningfully involved in the review process. Risk assessments are in place to identify and manage potential risks to people's safety and well-being. Going forward, risk assessments will be reviewed alongside personal plans to ensure they remain current and relevant.

Keyworker meetings provide people with further opportunities to discuss their care, preferences and experiences of living at the service. These meetings focus on what matters to people, their individual wishes and the outcomes they would like to achieve. People's health is monitored and they are supported by care staff who know them well and notice any changes quickly. This results in timely referrals to healthcare professionals supporting people to maintain their physical health and any advice or recommendations are followed.

Improvements are required in medication management and oversight. Although records indicate people receive their medicines as prescribed, concerns relating to storage temperatures, updating personal plans, medication audits and staff competency checks mean there is insufficient assurance that medication practices are consistently safe and effective. This has the potential to adversely affect people's health and well-being outcomes. This is an area for improvement, and we expect the provider to make improvements before the next inspection.

Environment

Good

The environment is suitable for people's needs and provides a comfortable and homely place to live. People's bedrooms are of a sufficient size and are personalised according to their individual preferences, with photographs, belongings and items of importance helping to create a sense of familiarity and belonging. Communal areas provide opportunities for people to spend time together and take part in activities. During the inspection, we observed people using communal areas and they appeared comfortable and relaxed. People have access to an outdoor area with seating which can be enjoyed during warmer weather.

There are appropriate arrangements to help keep people safe and secure. Access to the home is controlled, visitors are required to make themselves known on arrival, and staff verify their identity before allowing access. Fire safety equipment is checked regularly, including testing of fire alarms and emergency lighting. People's personal emergency evacuation plan (PEEP), summaries will be developed further to clearly identify the individual support they require to evacuate safely in an emergency. External contractors undertake required servicing and safety checks, including gas and electrical testing. Food hygiene standards are maintained to a high level, as evidenced by the service achieving a Food Standards Agency rating of 5.

Improvements are required in the service provider's oversight of the environment. The home is generally clean and maintained to an acceptable standard; however, sealant and tile grouting within a bathroom and areas of flooring near the front door require replacement. The provider gave assurance these issues would be addressed and any underlying causes identified to reduce the risk of recurrence.

Routine internal environmental and health and safety checks are not documented to demonstrate effective oversight of the premises. Consequently, there is insufficient assurance that systems are sufficiently robust to routinely identify, monitor and address environmental issues promptly, to ensure people live in a safe and well-maintained environment. This is an area for improvement, and we expect the provider to make improvements before the next inspection.

Leadership & Management — Good

The service has governance arrangements in place which support its day-to-day operation and help people achieve their individual well-being outcomes. The Statement of Purpose (SoP) and guide to the service provide information about the care and support people can expect. The manager is experienced, registered with Social Care Wales and supported by a deputy manager. The Responsible Individual (RI) maintains oversight of the service through regular visits, which include opportunities to speak with people and staff.

Overall, people are supported to achieve their well-being outcomes; however, quality assurance and monitoring arrangements require strengthening. The Quality-of-Care report does not provide a sufficiently comprehensive evaluation of the service, with no analysis of information from audits, RI visits and environmental monitoring. Greater oversight and scrutiny are required across medication management, environmental and health and safety monitoring, and staff support and development to ensure areas for improvement are identified, appropriate action is taken and improvements are sustained.

Currently, quality assurance arrangements do not provide sufficient assurance that emerging risks are identified, and learning is used effectively to drive and sustain improvements in the quality and safety of people's care and support. Outcomes for people may not continue to be good because the RI does not have sufficient oversight of the quality of the service. This is an area for improvement, and we expect the provider to make improvements before the next inspection.

People are supported by a generally stable staff team, with sufficient staff available to meet their needs at the time of inspection. Staff feel well supported and confident they have the skills needed to carry out their roles. They complete relevant core training, and care staff are appropriately registered with Social Care Wales. Staff receive regular formal supervision, providing opportunities for support and development. However, supervision records do not always accurately reflect discussions held. The provider continues to strengthen recruitment and induction arrangements to ensure appropriate pre-employment checks are completed, and induction is structured and aligned with the All Wales Induction Framework (AWIF). The service provider is taking steps to strengthen the quality of supervision records, formal supervision arrangements for the deputy manager, and improve opportunities for staff to meet collectively as a team.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

The table(s) below show the area(s) for priority action and/or those for improvement we have identified.

Summary of Areas for Improvement	Date identified
Systems to monitor the storage and administration of medication are not sufficiently robust.	16/09/26
The service provider must ensure the service is free from potential hazards to the health and safety of people and to evidence monitoring of the environment to identify deficits and any remedial action required.	16/09/26
Systems and processes in place to monitor, review and improve the quality of care and support provided are not sufficiently robust.	16/09/26

CIW has not issued any Priority action notices following this inspection.

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