



Arolygiaeth Gofal
Cymru
Care Inspectorate
Wales

Inspection Report

Rose Cottage



71 Leyshon Road, Gwaun Cae Gurwen, Ammanford, SA18 1EN



01269826519



<https://accomplish-group.co.uk>

The inspection visit took place on 10/07/2026

Service Information:

Operated by:	Accomplish group ltd
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:	5
Main language(s):	English
Promotion of Welsh language and culture:	The provider makes an effort to promote the use of the Welsh language and culture or is working towards a bilingual service.

Ratings:



Well-being

Excellent



Care & Support

Good



Environment

Good



Leadership & Management

Good

Summary:

Rose Cottage provides care and support to five individuals. Support is provided to people who may have learning disabilities or mental health requirements.

The management team consist of the Responsible Individual (RI), the manager, and deputy manager. The team is very established and some have been providing support to people living at Rose Cottage for many years. This means they know people well. The team strive to ensure people achieve excellent well-being and experience meaningful and personal achievements. People are supported to do what is important to them, be a part of their community and lead a healthy and happy life. Good care and support is provided in a person centred, positive risk taking way whilst ensuring people are safeguarded and have a voice. Reviews are completed quarterly or sooner if any changes occur and families/representatives feel involved and are kept informed.

The environment in Rose Cottage is person centred, representative of what is important to people and very homely. Risk assessments and routine checks take place with planned maintenance work where required.

Staff feel supported by the Responsible Individual (RI), manager and deputy manager. Good recruitment processes are in place with subsequent training and individual supervision provided. Good oversight ensures a service that strives to go from strength to strength.

Findings:



Well-being

Excellent

People are supported to have as much control as possible over their everyday lives. Whilst people may have limitations with communication, care staff capture people's voices very well. Care documentation has a section entitled 'voices and choices'. Here non-verbal cues and how well staff know people is captured and demonstrates how people make choices. People are involved in recruitment processes, meeting applicants at interview and contributing to decisions about their employment. People feel valued as their opinion is recognised. A positive risk approach has been instilled by the manager which enables people to have opportunities for good meaningful experiences, whilst risks are managed proportionately. Staff told us *"There is a more positive risk approach and staff are enabled to take positive risks."* A versatile, unique, person centred approach is being taken to plan a holiday this year. A fairly local base is being considered, where people can spend as little or as much time as they wish. Flexibility and contingency planning will be in place to ensure this can be a positive experience. People are supported to thrive with numerous opportunities to maintain, develop and explore their strengths. This includes attendance at, sports events such as a mixed ability football team, local bike groups and visiting food festivals. The impact of these opportunities has led to increased confidence and healthier lifestyles. Staff told us, *"Activities aren't just about filling time anymore; they're based around what each person actually enjoys and wants to achieve."*

People are supported to have a sense of belonging in their own home and community and have enhanced relationships with people who are important to them. Whilst considering what is important to people and their families, advocacy and best interest decision processes are applied to ensure people's rights are supported. Regarding the Welsh Language Active Offer, staff do speak Welsh; however, use of the Welsh language is not currently a requirement for people living at Rose Cottage.

People live in accommodation that supports their well-being outcomes. Whilst temperatures were very hot on the day of the inspection, people's well-being was prioritised by planning activities for cooler periods of the day and using fans in the warmer rooms. Permission was sought from people for us to look around the home. Staff have gone over and above to ensure people's rooms really do represent what is important to them – they have personalised their rooms with activities, furniture and pictures that really do have meaning to them. Professional feedback includes, *"The service provides a person centred approach, the staff are friendly and the service is homely"* and *"My clients are always looking well and have personalised items to their needs or interests"*.

People's well-being is of the utmost importance to staff working at Rose Cottage with staff telling us, the aim is, *"To ensure people enjoy the same everyday experiences that many of us take for granted"* and *"People we support are genuinely at the centre of everything we do"*. Family told us, *"They individualise each person"*.



Care & Support

Good

Staff have a good understanding of safeguarding processes and all staff spoken to know what to do in the absence of the manager or where to find relevant information. Staff have a good understanding of Deprivation of Liberty Safeguard (DoLs) authorisations and associated processes to ensure people's rights and choices are supported. Staff told us *"We are always looking at how we can reduce restrictions safely, promote positive risk taking and give people more choice and control over their own lives."* People have advocates to represent them and regular visits are recorded. A visiting professional told us *"The management have always been honest and open with me as a professional and I am free to visit at any time."* Family told us *"I trust them which is important as X can't speak for themselves"*. People have a service user guide which includes information about safeguarding and how to raise concerns, however this is not user friendly for people living at Rose Cottage. The manager had already identified this as an area they would like to develop.

People's medication is safely managed. Temperature checks are in place for medication storage and despite high summer temperatures these were within the required parameters. Twice daily medication balance checks are completed in addition to audits. We did note handwritten medication charts are not always signed by two staff and multiple medication charts were not updated to reflect the actual number of medication charts i.e one of two instead of one of one. Consents to administer medication are completed and refer to best interest decisions where the ability to consent is not possible. We saw good detail around how to practically support people with their medication support plans.

People receive the quality of care and support they need to achieve their personal outcomes from an established team of staff who know them well. Care documentation includes 'About Me' and is person centred, reflecting what is important to people. The use of positive language with an outcome focus reflects the ethos of Rose Cottage. We saw detailed Positive Behaviour Support (PBS) plans with prevention strategies and early indicators recorded. When we asked staff how they know what people enjoy doing they told us *"Capturing smiles and what leads to the smile shows what people enjoy"*. 'Communication and Understanding' plans reflect how people will express their mood and preferences. Oral health assessment tools are in place and details of current dentists or waiting list referrals. Reviews of people's plans and outcomes are completed at least three monthly. These are detailed and reflect involvement of people and their representatives including family and professional representatives. Best interest decisions and referrals to other professionals is reflected. Families feel informed and reassured when information is shared *"We are kept in touch with photos and videos – they mean so much"*.



Environment

Good

Regular servicing and maintenance of the environment ensures the safety and well-being of people. We saw records of an oil service and electrical installation certificate report. A date has been booked to complete works to meet the areas requiring improvement. A recent legionella risk assessment and fire risk assessment has been completed with recommendations and specified timescales. Records of fire evacuation practices are completed. Staff are positive and confident about processes to follow.

People can access their own bedrooms and communal areas which are also personalised. Staff told us, *"The house is more personalised, reflects people's personality and character. Getting the guys involved - they have all got their own about me boards, It's their home after all"*. People's bedrooms have been redecorated ensuring they represent what is important to them. We saw newly decorated rooms where people have been involved with choosing colours and participating as much or as little as they want. Each item, photo frame and piece of furniture encompasses the individual in some way. The manager acknowledged whilst there are many improvements and updates to the decor in the home there is also an ongoing programme with plans to continue with improvements. The home was nicely decorated with new furniture seen in the lounge. The manager explained how protective screens had been reviewed and removed from the lounge windows making the room feel lighter and more natural. Views of the surrounding area and the planted window boxes were appreciated more.

Bathroom and toilet refurbishments have been completed since the last inspection and a storage area has been improved with the archiving of notes/records. This area is now accessible for team meetings, quiet time and to store other items as required. The reception area has an information board that shows examples of 'moments that made us smile' and reflect examples of positive experiences for people with 'little wins' and 'you said we did'. Staff feedback is very positive about the improvements made to the environment.

Outdoor space is safe and accessible to people living at Rose Cottage. We saw people have a secure enclosed garden where they can access seating in a shaded area or in the summer house. People have been involved with planting a herb garden and other vegetables and flowers. People told us *"I like it here"* and professional feedback includes *"It has a homely environment and staff have always been welcoming and kind."*



The oversight and governance arrangements promote a positive and open culture. The RI completes regular visits and is described as *“Excellent, a great support and a regular fixture in the home”*. This coupled with the consistent approach of the manager and deputy manager means the team feel their workplace is a safe place to learn and develop their practice. Staff feel very supported and feedback includes: *“We get a lot of support from X”* and *“Nothing but praise for the manager.”* The manager is open and transparent, reporting and liaising with agencies, including Care Inspectorate Wales (CIW). The RI visit records, reflect observations/feedback from people and staff and checks of the environment; care documentation and staff personnel files. The RI makes recommendations to improve, as well as acknowledging what is working well. These records and the quality care review report would be strengthened further if family members and/or advocates are contacted to provide feedback and this is reflected in the reports/findings.

People achieve their personal outcomes because the provider ensures there are enough suitably recruited and trained staff to deliver quality care and support. We were told *“The average length of service exceeds ten years, reflecting excellent staff retention and consistency for the people who live there”*. Staffing levels seen at the inspection visit reflected at least those specified in the Statement of Purpose. Recruitment is ongoing and regular bank staff support the current team. We saw the required checks for recruitment of new staff. This included reference checks, gaps in employment and registration with Social Care Wales. Disclosure and Barring Service (DBS) checks are completed prior to staff commencing employment and renewed as required. Staff told us about their induction and allocated time specifically to interact, observe and get to know the people at the home.

Training is provided and the completion of this monitored. Whilst overall percentages of attendance are around 94%, we noted two or three staff from a team of 15 are overdue with Fire Safety, First Aid, Moving and Handling and medication competency. Overall staff are positive about the training received but feedback and plans for improving this include considering a more bespoke type of training specific to the people they support. Individual supervision is provided regularly with records showing staff have had at least three sessions in the past seven months with monthly sessions for new starters. Supervision and annual appraisal records reflect staff centred discussions with positive feedback and an emphasis on staff feeling valued.

Staff told us: *“The Circle has been a helpful tool in showing appreciation to the team, with many positive stories shared within the organisation”* and *“Incidents are openly reviewed during team meetings, encouraging honest discussion, shared learning”*.

Family told us *“The staff are wonderful and the deputy and manager is great – they all are”*.

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.

CIW has no areas for improvement identified following this inspection.

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

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