



## Regency House Residential Home



Regency House Residential Home, Parkes Lane Tranch, Pontypool, NP4 6BA



01495763597

The inspection visit took place on 28/10/2025

### Service Information:

Operated by:	Regency House Residential Home Ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for mental health
Registered places:	52
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:

Regency House is situated in Pontypool within the County of Torfaen with easy access to a range of local amenities. The service provides accommodation, care and support for up to 52 people, and does not provide nursing care.

People's wellbeing and the care and support they receive is good. People can make everyday choices and are given opportunities to take part in activities. A good standard of care is provided, and people are treated with dignity and respect. Personal plans detail how people like their needs met and are reviewed regularly with the person or their representative.

The environment people live in is good, with ongoing renovations. People have their own rooms and communal areas in which to spend time alone or with others. Outdoor space is available to access when the weather is warm. The leadership and management of the service is good because quality assurance systems are effective. Staff feel supported by management, complete regular training and receive regular supervision.

## Findings:



### Well-being

Good

People are encouraged and assisted by care staff to be as healthy as they can be. People's allergies, specialist diets and favourite food are known, and nutritional meals help people remain healthy. The service assesses people's care and support needs and any associated risks to their health and well-being. These are documented in personal plans, providing guidance for staff on how to support individuals with their needs. There are systems in place for receiving, storing and administering medications safely. Care staff know the people they are supporting well and seek medical assistance quickly when required. Managers put people's needs and wishes at the forefront of any decision-making.

People are encouraged to have control over their day to day lives where possible and make as many everyday choices as they can including, for example, where and how to spend their day, food and drink options. Plans are person centred, including people's social histories, likes, dislikes and preferences. People engage in the development and review of their plans giving them more control over their life choices. Residents' meetings are held on a regular basis giving people a voice and the ability to contribute to how the service is delivered.

A new range of activities has been introduced across two units, which include more themed discussion group activities based on feedback from people. Going forward changes to activities will be introduced across all units. New weekly planners have been devised following consultation and are kept in individual bedrooms and include, for example activity choices for the week and important appointments for the individual.

There are systems in place to help protect people from abuse and harm. Risks to people are assessed and their safety is managed and monitored. Character and suitability checks of staff to undertake their roles before providing care are completed. Accidents and incidents are recorded and monitored, with actions taken to minimise further occurrence. The provider has a safeguarding policy and guidelines for staff to follow. Where there are necessary restrictions made in people's best interests to manage their safety; these appear proportionate.

The service is working towards providing an Active Offer of the Welsh Language. There currently aren't any people who have requested a service in Welsh and the service would have to consider if they could provide this going forward. The service makes efforts to celebrate Welsh history and culture.

The environment is warm and homely. Individuals' rooms are personalised with their belongings on display which promotes belonging. Suitable mobility aids are in place to help people where needed.

The garden is accessible in warmer weather. There is a range of systems to help mitigate risks to the health and safety of people at the service. The service promotes hygienic practices and effectively manages infection prevention and control procedures.



## Care & Support

Good

During our inspection, it was clear staff know people well and work hard to support them to feel relaxed and comfortable. People we spoke with told us “*Staff are lovely*” and “*They are always there when I need some help.*” Feedback received from relatives was also positive stating that their loved ones were well cared for and safe at the service.

An assessment is completed before people move into the service to ensure people’s needs can be met. This pre-assessment leads to the development of an initial plan and then into a bespoke personal plan. These set out how care staff support people in areas they need assistance as well as people’s preferences around how they receive care. Risk assessments highlight individual vulnerabilities and contain information on how to keep them safe. Personal plans include social histories, identify individual likes, dislikes and wishes, ensuring the persons voice is central to the care provided to them. Personal plans are reviewed regularly to ensure they remain up to date and relevant to the person, who is also involved in the reviews, or their representative is.

People’s liberty is protected in line with legislation. If restrictions are needed to keep people safe, the service ensures correct processes are followed and Deprivation of Liberty Safeguard (DoLS) authorisations are sought. The service maintains a record of applications it has made and expiry dates, to ensure authorisations are in place.

Appropriate referrals to health and social care professionals are made with recommendations acted upon by the service. People’s health is monitored to enable the service to act responsively to any change in their health and wellbeing. There are effective medication management systems in place. We saw medication is securely stored and it can only be accessed by authorised personnel. Medication administration record (MAR) charts are filled in correctly confirming people receive their medication at the right time. Medication audits are completed on a regular basis we were told these would be strengthened to ensure practice remains safe and effective.

People’s risk of infection is minimised. The service effectively assesses, manages and prevents the risk of infections. Care staff are appropriately trained and competent in using personal protective equipment (PPE) and infection control practices. Effective daily cleaning schedules are in place.



## Environment

**Good**

We walked around the environment and found it was warm and welcoming. Accommodation is provided across four linked units, each with their own communal lounge and dining area. People can choose to be either in the company of others or spend time alone and can move around the unit as they please, promoting independence and choice. People have their own rooms, which are clean and personalised to their own taste. People have family photos, pictures and trinkets in their rooms, which gives a homely feel to their surroundings. There are sufficient toilet and bathing facilities available. Ongoing renovations, such as flooring and redecoration, are scheduled, a structured maintenance plan will ensure timely completion. Going forward the 'walk abouts' undertaken by management to check the environment will be formally documented.

People live in a safe environment, with safety checks being conducted on a regular basis to identify and mitigate risks to health and safety. Arrangements are in place to ensure the environment is clean. There are maintenance and repair arrangements in place. Maintenance records confirm the routine testing of utilities and equipment such as hoists, slings and lifts. Fire safety tests and checks are completed on a regular basis. Personal emergency evacuation plans are in place and accessible in the event of an emergency. We were assured fire drills will be completed on a more regular basis going forward.

We found cleaning regimes and standards of hygiene throughout the home to be good, and laundry duties are being maintained. The service employs a team of domestic staff to maintain the standards in the home. All staff have access to personal protective equipment (PPE). The service had been inspected by the Food Standards Agency and had been given a rating of 5, demonstrating hygiene standards are very good.



## Leadership & Management

Good

Governance arrangements support the day-to-day operation of the service to ensure continued quality care and support, helping people achieve their wellbeing outcomes. The Statement of Purpose (SoP) and guide to services state what people can expect whilst living there. The Responsible Individual (RI) is also the manager and has oversight of the service, through effective audit and monitoring processes. They are based at the service daily and engage with people receiving a service, their visiting family, visiting professionals and the staff to gain feedback about how people are doing. Quality of care reports are completed every six months. The reports evidence which areas are working well and what could be improved. The provider has submitted an annual return as required by Regulation. The regulatory body is informed of incidents affecting service delivery at the service. A deputy manager has daily oversight of service delivery and is supported by shift managers and senior staff.

There is monitoring of people's health and wellbeing, with monthly reports analysing the data and identify any actions required. There are effective processes in place to ensure accidents and incidents are recorded, analysed and any required actions consequently are taken. A concerns and complaints process are in operation and compliments received from family members and visiting professionals are shared and celebrated.

There are robust systems in place to ensure safe recruitment. All staff provide appropriate identification documents as well as complete a Disclosure and Barring Service (DBS) check, provide satisfactory references and full employment history. This enables the service provider to decide about the fitness of workers at the service. Care staff are supported to complete a robust induction to support them into their caring role. This includes completing mandatory training to ensure staff have the required knowledge and skills to support people at the service and the opportunity to shadow more experienced staff.

Staff complete core and refresher training in a timely manner. Formal supervision is provided on a regular basis for all staff to receive feedback from managers about their work performance and to discuss any staff welfare issues. Staff also receive an annual appraisal. All eligible care staff are registered with Social Care Wales, the workforce regulator. Care staff told us they are happy in their roles, enjoy coming to work and feel supported by management.

## 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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