Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Heathfields Residential Home

27 Merthyr Mawr Road, Bridgend, CF31 3NN

01656668586

www.heathfields.uk

The inspection visit took place on 21/09/2026

Service Information:

Operated by:	Heathfields Residential Homes Ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care and support for people living with dementia, Care and support for people requiring short-breaks or respite care
Registered places:	22
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	Good
Care & Support	Good
Environment	Good
Leadership & Management	Requires Improvement

Summary:

Overall people experience good wellbeing outcomes and enjoy living in Heathfields Residential Home where they feel safe, respected and valued. People told us they feel safe, are treated with dignity and respect, and are confident in the current manager's ability to lead the service effectively. Relatives provided positive feedback about the quality of care, the approachable nature of staff and the communication maintained by the service. We observed warm and positive interactions throughout the inspection and found the atmosphere to be welcoming and person centred. While people benefit from positive relationships and support, opportunities remain to further enhance well-being through increased access to meaningful activities, occupation and community engagement to ensure all people can consistently enjoy fulfilling and enriching experiences.

People receive good care and support from a committed staff team who know them well and understand their individual needs and preferences. A stable core staff team promotes continuity of care and enables positive relationships to develop. Care staff work collaboratively with health and social care professionals to support people's health needs and ensure access to appropriate healthcare services when required. Regular multidisciplinary meetings help to monitor people's well-being and respond to changing needs.

People live in a comfortable and homely environment that supports their safety, comfort and well-being. We found the home to be welcoming, with communal areas that provide opportunities for social interaction and engagement. People have personalised their bedrooms to reflect their preferences and individuality, helping to create familiar and meaningful living spaces.

The manager has developed a good understanding of the service since taking up post and has identified areas for further development to strengthen outcomes for people. The provider must ensure the service is delivered consistently in line with its Statement of Purpose so people can be confident they receive the care, support and opportunities described within this document.

Findings:

Well-being — Good

People achieve positive well-being outcomes because they receive support from care staff who treat them with kindness, dignity and respect. People told us they feel safe living at the service and said care staff respond to requests for assistance in a timely manner. Relatives consistently described staff as caring, patient and knowledgeable about people's needs and preferences. People describe the care staff as "*Very helpful*". "*Pretty good*" and "*I can have a laugh with them,*" Relatives told us, "*Staff are amazing and know her sense of humour*", "*I think they are excellent*" and "*It's a nice atmosphere*".

People maintain important relationships with family and friends. Visitors are welcomed without unnecessary restrictions and relatives told us they can visit at times that suit them. We saw positive interactions between people and care staff throughout the inspection and found care staff knew people well. The service promotes people's rights and offers opportunities for feedback through resident meetings. Records showed people discuss matters affecting daily life, including meals and service provision. People know who to approach if they have concerns and spoke positively about the new manager.

People receive support to maintain their health. The service maintains regular contact with healthcare professionals and participates in monthly multidisciplinary meetings to help prevent unnecessary hospital admissions. Professionals described the service as approachable and responsive.

People benefit from a comfortable home environment; however, opportunities to participate in meaningful activities require strengthening. Several people, relatives and care staff told us there are limited organised activities and little community engagement. While occasional quizzes, entertainers and themed events take place, we saw limited evidence of individualised activity programmes or support for people to access their local community. Some people told us they would value greater social stimulation and more opportunities to maintain connections outside the home.

People receive meals and refreshments throughout the day. However, meal choice is limited as the service generally offers one main meal option each day. Some people told us they enjoy the food provided, while others said menus can become repetitive over time and would benefit from greater variety and choice. This does not always support people to exercise meaningful choice and control in relation to their dining experience.

Care & Support — Good

People receive care and support from a stable and experienced care staff team who know them well. Many care staff have worked at the service for a significant period, which helps develop positive relationships and promotes continuity of care. People told us they are happy with the care they receive and spoke positively about the kindness and approachability of care staff. Relatives also described care staff as caring and committed to supporting people's well-being. We found care staff knew people's needs, preferences and routines well and responded to them in a respectful and compassionate manner.

The service uses an electronic care management system to record and monitor care and support. Personal plans contain information about people's assessed needs. While plans generally provide care staff with sufficient guidance to deliver day-to-day care, they could be developed further to better reflect people's personal outcomes, life histories and individual aspirations. The manager has recognised opportunities to further improve person-centred care planning. Personal plans are reviewed routinely; however, records do not consistently demonstrate people's involvement or the involvement of their representatives in review processes. Some care records contained limited information about people's personal histories, aspirations, interests and preferences. The manager has already started work to develop more detailed "This is Me" information to ensure staff have a richer understanding of people as individuals.

Medication systems support the safe administration of medicines; however, practice requires strengthening. We identified gaps in some staff medication administration signatures and found records relating to 'as required' medicines did not consistently provide sufficient detail regarding decision-making and outcomes. These issues reduce assurance that medicines are always managed in line with best practice and require improvement. The manager had already begun strengthening audit processes and addressing these matters.

Infection prevention and control arrangements were appropriate and supported people to live in a safe environment. We found a good supply of personal protective equipment (PPE) available to staff, and observations showed staff followed infection control practices. Hazardous substances were stored securely, with appropriate COSHH arrangements in place to reduce risks to people and staff.

People are protected from harm, abuse and neglect because appropriate safeguarding arrangements are in place. Care staff have completed safeguarding training, understand their responsibilities and are able to clearly describe the action they would take if they had concerns about a person's safety or well-being. The service maintains a detailed safeguarding policy and procedure, which were regularly reviewed to ensure they reflected current guidance and practice.

Environment

Good

People live in a safe environment. The front entrance was secure and remained locked to help protect people from unauthorised access. Personal Emergency Evacuation Plans (PEEPs) are in place and provide care staff with clear guidance to support people safely in the event of an emergency.

We found recent issues relating to the passenger lift had been resolved. Records and discussions with management confirmed appropriate action was taken to repair the lift and ensure people continued to access all areas of the home safely. The provider demonstrated a proactive approach to contingency planning and informed us that a stair lift is currently being installed. This additional equipment will help minimise disruption and maintain accessibility should any future issues arise with the main lift.

The home is clean, welcoming and provide people with sufficient space to spend time independently or socially. Bedrooms reflected people's individual preferences and contained personal belongings that helped create a homely atmosphere. Communal areas were comfortable and supported people to engage with others or receive visitors. Although the home is generally comfortable and suitable for people's needs, some areas would benefit from redecoration to further enhance the environment. The manager had already identified these areas and informed us that a structured improvement plan is being developed to prioritise and complete the required work.

The recently appointed manager has been unable to access all historical records relating to required environmental and health and safety checks completed before their appointment. They acknowledged this has limited their ability to fully evaluate previous monitoring arrangements. To address this, the manager has introduced a new suite of audits and oversight systems designed to provide assurance that required checks are completed consistently and effectively. Records evidenced these systems are being embedded and are beginning to provide clearer management oversight of the service.

The manager has also identified opportunities to strengthen cleaning arrangements. Whilst we found the home to be clean at the time of inspection, a more structured cleaning schedule would support greater consistency, provide clearer accountability and further promote effective infection prevention and control practices. The manager is developing these arrangements as part of the service improvement programme.

Leadership & Management Requires Improvement

The service benefits from committed leadership and a management team that is focused on improvement. A new deputy manager has been recruited. People, relatives, staff and professionals spoke positively overall about the registered manager, describing her as approachable, visible and responsive. The manager has introduced a range of improvements since commencing in post and has demonstrated a clear commitment to service development.

The provider has recruitment processes in place that help ensure staff are suitable for their roles. We reviewed staff recruitment records and found required pre-employment checks had been completed. Staff told us they had received induction training and ongoing learning opportunities relevant to their roles.

Staff feedback about staffing levels and morale was mixed. While people generally told us their needs are met, several care staff reported pressures during busy periods and concerns about staffing arrangements. The manager has recognised these concerns and now needs to review staffing systems, including how staffing levels are assessed and monitored.

The provider has some systems in place to monitor the service, but these are not yet sufficiently robust to ensure the service is consistently delivered in line with its Statement of Purpose. We found some aspects of service delivery did not reflect the commitments and arrangements described within this document. The Statement of Purpose must accurately describe how the service operates and people must receive the service as set out within it. Outcomes for people require improvement because the service is not consistently delivered in accordance with the Statement of Purpose across all themes. We expect the provider to take action to address this matter and ensure service delivery aligns with regulatory requirements.

The responsible Individual (RI) undertakes the required quarterly visits and biannual quality of care reports but needs to strengthen the oversight and support provided to the manager. They must maintain effective monitoring of the service and demonstrate robust assurance regarding the quality and safety of care provided. They must also ensure the manager receives appropriate support and guidance, to effectively fulfil their role and drive continuous improvement within the service. This is an area for improvement, and the RI must take action to address.

The new manager has begun strengthening governance systems; however, quality assurance arrangements remain under development. They do not have access to some historical records and have had to establish several monitoring systems from the beginning. While the manager has started to complete audits and tracking systems, these processes are not yet fully embedded across all areas of service delivery.

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
The provider must ensure the service is provided with sufficient care, competence and skill, having regard to the Statement of Purpose.	21/09/26
The Responsible Individual must supervise the management of the service	21/09/26

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

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