Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Cedar House

6-10 Llys Gwynfryn, Neath, SA10 7UB

01639633091

https://accomplish-group.co.uk

The inspection visit took place on 07/09/2026

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:	14
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	Good

Summary:

People experience good well-being and receive person-centred support that promotes choice, independence and positive outcomes. Care planning is detailed and people, relatives and professionals speak positively about the support provided. People maintain relationships, access activities and live in a welcoming environment. Staffing pressures have affected consistency at times, although recent recruitment is improving this.

People receive good care and support that is tailored to their individual needs through detailed care planning, effective risk management and strong partnership working with professionals. Safeguarding arrangements and Deprivation of Liberty Safeguards (DoLS) processes support people's rights and safety. Medication management requires improvement due to recording errors; however, enhanced oversight has been implemented to minimise risk.

The environment is good. People live in a homely, personalised and well-maintained environment that supports comfort, dignity and well-being. Ongoing refurbishment and environmental improvements enhance quality of life. Robust maintenance systems, regular servicing, fire safety arrangements and environmental audits help ensure facilities; equipment and the environment remain safe and suitable.

Leadership and Management is good. The service benefits from effective leadership, governance and quality assurance systems. Audits, quality reviews and Responsible Individual oversight support continuous improvement. Staff are appropriately trained and skilled to meet people's needs. Workforce stability remains a challenge; however, active recruitment and development plans are helping strengthen consistency and sustainability.

Findings:

Well-being — Good

People receive support that is centred on their individual strengths, preferences and personal outcomes, and are empowered to make choices and have control over matters that affect them wherever possible. Care plans viewed are comprehensive, reviewed regularly and provide clear guidance about communication, health needs, risks and what matters to people. Feedback from people and professionals evidenced positive health and well-being outcomes, particularly for those with complex needs. One professional stated, *"Cedar House provides person centred care and understand the needs of the individual."* People speak positively about life at the service, one said; *"I really like it here, the staff are great, they help me to do things that I want to do. I'm very happy here."* However, staffing instability has at times affected continuity of support and opportunities for meaningful engagement, meaning experiences are not always consistently delivered to the high standard intended.

People are safe and protected from abuse and neglect. People benefit from a service where safeguarding arrangements, risk management processes and staff training help promote their safety whilst respecting their rights and independence. Risk assessments are detailed and proportionate, enabling staff to support people safely whilst encouraging positive outcomes. Staff understand their safeguarding responsibilities and feedback any concerns they have about the people they support. We saw concerns are appropriately escalated when required. Most people, relatives and professionals' express confidence in the care provided. However, we found some issues? with medication records during this inspection. We are assured, however, that these are being addressed, minimising any risk to people. For example, stronger oversight of medication practices has already been implemented.

People are supported to maintain meaningful relationships, participate in their communities and engage in activities that matter to them. Staff interactions observed were warm, respectful and person-centred, with positive feedback received from relatives and professionals regarding the caring culture within the home. One relative commented, *"It is clear that the team know the residents as individuals and genuinely want them to feel safe, comfortable and well cared for."* Another described their family member's birthday celebration organised by the manager as *"a special and magical occasion."* People usually have opportunities to access community activities, entertainment and social events, supporting connection and inclusion. In recent weeks, staffing pressures have sometimes reduced opportunities for outings and meaningful engagement; however, this is an improving situation as newly recruited care staff are completing their shadowing shifts in the service so activities will soon revert to former levels.

People live in an environment that is welcoming, personalised and generally well maintained. Improvements since the last inspection include refurbishment, redecorating and environmental enhancements, helping to promote dignity, comfort and quality of life. The environment supports

people to remain safe whilst accessing communal and outdoor spaces, and appropriate equipment and safety systems are in place. Feedback highlighted the homely atmosphere, with one staff member describing Cedar House as *“very welcoming to anyone outside the home.”* The accommodation meets the needs of people living there.

Care & Support — Good

People receive the quality of care and support they need to achieve their personal outcomes. We reviewed care records, risk assessments and daily records and found these are detailed, regularly reviewed and provide staff with clear guidance on how to support people safely whilst promoting independence and choice. Support plans contain information about communication, health needs, behaviour support, emotional well-being and personal goals, reflecting a good understanding of each person as an individual. We saw evidence of effective partnership working with health and social care professionals to support people with complex physical and mental health needs. Professionals speak positively about the service, with one community nurse noting, *"The quality of care provided is consistently very good, with good communication maintained between the District Nursing team and the care home staff,"* whilst another stated staff *"really know and understand people's needs."* Feedback from relatives is largely positive recognising the commitment of staff to supporting people.

People are protected from harm and abuse. We found appropriate systems in place to protect people whilst ensuring their rights and freedoms are respected. Care records contain comprehensive and individualised risk assessments relating to areas such as mobility, choking, epilepsy, self-harm, exploitation, nutrition and personal safety. We reviewed DoLS documentation and found authorisations in place where required, with further applications submitted and monitored appropriately. Staff work alongside external professionals to ensure restrictions are proportionate and in people's best interests. Professionals consistently described the care provided as safe and responsive, with one reporting staff demonstrate *"good care, showing best interests of the patient."* The combination of detailed risk management, safeguarding awareness, effective partnership working and adherence to legal safeguards provides assurance that people are protected from harm whilst receiving care that respects their individual rights and circumstances.

The Manager has implemented further oversight to ensure medication is safely managed. During our review of records we identified gaps in Medication Administration Records (MAR) charts and stock-count discrepancies that had not always been identified through existing audit processes. Whilst we found no evidence that people had experienced harm as a result of these recording issues, improvements to strengthen oversight and ensure medication records consistently reflect medicines administered have already been prioritised by the service manager and we are assured that these improvements will minimise any further risk of errors going forward. We saw medicines are stored securely within a dedicated medication room and found effective systems in place for ordering, receiving and disposing of medicines. Staff responsible for administering medication complete relevant training and competency assessments, and medication procedures are discussed regularly through audits and staff meetings.

People's risk of infection is minimised. We found effective infection prevention and control arrangements embedded within the service. Training records show high compliance rates for infection control training, and infection prevention audits consistently achieved positive outcomes.

During our visit the environment was clean, well maintained and suitably equipped with personal protective equipment and cleaning resources. Records demonstrated ongoing monitoring through cleaning schedules, COSHH arrangements and health and safety checks. Although we identified some shortcomings in food safety documentation, including temperature monitoring and labelling records, the manager was already aware of these issues and is taking steps to improve compliance following staffing changes within catering provision.

Environment — Good

People live in a spacious and welcoming home that is designed to support their comfort, independence and quality of life. During our inspection we observed a homely environment which has benefited from further refurbishment and redecoration since the previous inspection. Bedrooms are personalised to reflect individual preferences, and communal areas provide opportunities for social interaction, activities and spending time with visitors. Outdoor areas are accessible and well maintained, including the addition of a new garden shed, enabling people to enjoy outdoor space safely. We found the environment supports the diverse and complex needs of people living at the service, including those requiring specialist equipment and mobility aids. Feedback received demonstrates people feel comfortable in their surroundings and can access facilities that matter to them. The service also continues to promote opportunities for social engagement through regular entertainment, community links and use of communal spaces. Overall, the accommodation promotes people's well-being, dignity and independence and supports them to achieve positive outcomes.

People live in an environment with appropriate and well-maintained facilities and equipment to help them achieve their well-being outcomes while identifying, mitigating and reducing health and safety risks. Good arrangements are in place to ensure the environment remains safe and well maintained. Records viewed demonstrate essential servicing and maintenance checks are completed consistently, including electrical installation testing, gas safety certification, water hygiene monitoring, asbestos management, lift servicing, emergency lighting, profiling beds, call alarm systems and moving and handling equipment inspections. Fire safety arrangements are well established, with weekly alarm testing, regular fire door checks, external fire risk assessments and individual Personal Emergency Evacuation Plans (PEEPs) available and regularly reviewed. We saw evidence of a comprehensive programme of environmental, health and safety and infection control audits which help identify and address issues promptly.

The provider's governance systems ensure maintenance concerns are discussed through staff meetings and quality assurance processes, with clear oversight from both local and regional management teams. The home was observed to be clean, tidy and free from significant hazards, with equipment appropriately maintained and available to meet people's assessed needs. Ongoing investment in the physical environment, together with effective monitoring arrangements, demonstrates a proactive approach to reducing risks and maintaining a safe living environment. The service is currently working towards improving their food hygiene score which is currently a 3, the manager is aware of the improvements needed and is working towards this as well as recruiting for a permanent cook’s position in the service.

Leadership & Management — Good

Effective governance arrangements are in place to monitor the quality and safety of the service. We saw a comprehensive programme of audits covering care planning, infection control, environmental standards, finances and overall service performance and more. These are completed by both the registered manager and regional managers, providing independent oversight and challenge. Formal visits have been undertaken regularly by the Responsible Individual, who also engages directly with people living at the service to gather feedback about their experiences. Quality reviews demonstrate feedback from people, relatives, staff and professionals is considered as part of the provider's quality assurance processes to drive improvements. We saw evidence of action planning and continuous review, particularly in relation to staffing pressures, medication governance and workforce development. Audit outcomes and quality monitoring activity provide assurance that the provider understands the service's strengths and areas requiring development and is taking actions to improve. Policies and procedures viewed are reviewed routinely and in line with the current legislation.

People are supported by staff with the necessary expertise, skills, and qualifications to meet people's care and support needs. Training and workforce records evidence staff have access to a wide range of mandatory and specialist training relevant to the complex needs of people living at the service. Mandatory training compliance is almost completely up to date, with particularly strong compliance in safeguarding, medication awareness, infection control, first aid, moving and handling, equality and diversity, and Mental Capacity Act training. Staff supporting people with specialist needs have also completed training in areas such as acquired brain injury, dementia, epilepsy, mental health, positive behaviour support, autism and more. Recruitment records demonstrate appropriate pre-employment checks are undertaken before staff commence work. Staff spoken with are knowledgeable about people's needs and described receiving regular support, supervision and development opportunities. One staff member told us, *"I feel privileged to work here, I think everything here is well organised,"* whilst another stated, *"We all work together as a team really well."* These findings support the view that people are supported by a workforce with the skills, knowledge and competence required to meet their assessed needs.

The inspection identified staffing stability as the most significant challenge facing the service. Feedback from staff, relatives and previous quality reviews highlighted the impact of staff turnover and the continued recruitment of new staff members on continuity of care and staff morale. Several staff describe the pressures associated with supporting and mentoring new recruits while continuing to meet the needs of people living at the service. One member of staff said, *"The staff turnover is exhausting, it feels like we're always training new people,"* whilst another stated, *"The new starters we've had this time are really good and I think once they know what they are doing we may finally be a bit more stable."* Despite these challenges, we found evidence that recruitment activity had been significant, with several new staff already appointed and progressing through induction and compliance processes. The provider had recognised the impact workforce instability

was having and had taken steps to increase staffing capacity and reduce reliance on agency workers. We found the service is operating broadly in line with its Statement of Purpose, with effective systems for oversight, quality assurance and staff development, although further work is required to improve workforce stability and medication governance.

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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