



## Woodside House Residential Home



Woodside House Nursing & Residential Home, Penrhiwgoch Baglan, Port Talbot, SA12 8LN



01639821452



<https://woodsidehousecarehome.co.uk/>

The inspection visit took place on 02/03/2026

### Service Information:

Operated by:	Mishael Care Home Ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal 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

Requires Improvement



Environment

Good



Leadership & Management

Good

## Summary:

Wellbeing of residents is rated as good. People experience warm and respectful relationships and feel safe, supported, and involved in decisions about their care. Activities and family contact are encouraged. However, outdoor and communal spaces need improvement, and Welsh language provision is still underdeveloped.

Care and support are rated as requiring improvement because infection prevention and control are not strong enough. Despite this, care is person-centred, well organised, and responsive. Staff monitor health, nutrition, hydration and risks effectively. Residents and relatives give highly positive feedback. Safeguarding, medication management, and infection control processes are strong, though care records could better capture individuals' personal voices.

The home is safe and adequately equipped, but several areas need attention. Outdoor areas look untidy, some communal spaces feel cramped, and there are internal storage and safety issues that require action. Fire safety and maintenance checks are mostly completed but need more consistent auditing. Governance is effective, with clear accountability, good communication, and strong audit systems. Staff feel supported and well trained. Recruitment documentation needs improvement, particularly in ensuring consistent references and digitising staff files.

## Findings:



### Well-being

Good

People living at Woodside House experience a warm and supportive environment where their wellbeing is promoted through positive relationships, personalised care, and a sense of safety. Residents consistently describe their experience in positive terms. One resident stated the support was “Nice,” while another described the home as “Lovely,” and another commented that staff were “Very good... they are all angels.” These comments align with wider evidence indicating that staff treat people with dignity and respect, and that interactions contribute meaningfully to people’s emotional wellbeing.

Residents feel they have appropriate control over their daily lives, with staff involving them in decision-making and ensuring their voices are heard. People confirm that staff consult them on their care, with responses such as “Yes, *always*” when asked about involvement in care planning. Systems are in place to promote independence, including support for financial matters where appropriate.

A strong sense of safety was expressed across resident accounts. When asked if they felt safe, residents responded simply and confidently with “Yes.” One resident also emphasised satisfaction by sharing, “No, *I love it here*” when asked about complaints. The inspection findings support this, noting robust safeguarding arrangements, staff awareness of reporting responsibilities, and a secure environment where risks are identified and managed effectively.

People are supported to maintain healthy relationships and social connections. Residents confirm they take part in activities both inside and outside the home, stating, “Yes, *I go out with the activities coordinator.*” The home’s culture encourages connection with family and friends, and the activities programme—supported by an activities coordinator—helps maintain routine, stimulation, and purpose. Relatives also described care as “Excellent... *10 out of 10,*” praising communication and staff warmth.

Accommodation supports wellbeing, with residents and relatives describing rooms as “*lovely and warm*” and “*excellent.*” Bedrooms are clean and personalised, and equipment is available to meet people’s needs. However, some environmental improvements are required: outdoor areas appear neglected, and communal spaces are small and less conducive to social engagement. While these issues do not undermine safety, they do impact the quality of the environment and opportunities for stimulation.

The Welsh language active offer remains underdeveloped; although some bilingual information and staff are available, bilingual signage and proactive cultural planning are not yet embedded.

Overall, residents' own words highlight a caring, respectful, and safe service that supports strong wellbeing outcomes



## Care & Support

## Requires Improvement

People living at the service receive care and support that is responsive, well-organised, and centred on their individual needs. Care planning is thorough and includes assessments, reviews, risk evaluations, health records, and monitoring tools to identify and respond to changes in people's wellbeing. People's nutritional needs, hydration levels and skin integrity risks are monitored closely, and staff demonstrate a clear understanding of how to meet these needs. While documentation is strong overall, the service should improve how it records resident involvement, as the personal voice of individuals is not consistently evident in the case-tracked files.

Residents consistently described their care experience positively, praising staff for being respectful, patient and understanding. Relatives echoed this positive theme strongly. One relative described the care as *"excellent... from day one, we felt at home, the staff were brilliant."* Another relative commented that the service was *"ten out of ten... communication and warmth of the staff."* Others expressed confidence, saying *"they know what they are doing"* and *"they have treated my mother with respect."* Positive feedback also highlighted the value of activities offered, including music, painting, bingo, community outings, and opportunities for social contact.

People are kept safe through well-established safeguarding arrangements. Staff receive training, have access to current policies, and demonstrate awareness of how to raise concerns. Records show that safeguarding matters are responded to appropriately, and identified risks—such as falls, hazards or issues relating to equipment—are acted upon promptly. Authorisations that relate to people's liberty are correctly documented, reflected in care plans, and understood by staff.

Medication support is delivered safely and consistently. Policies and procedures are fully in place, medication is securely stored, and records such as medication administration charts are complete and accurate. Regular checks and audits confirm good practice across ordering, storage, administration and disposal. Staff are trained in medication procedures, and specialist advice is sought when needed to support people's health.

A recent Infection prevention and control audit identified good practice in training, respiratory hygiene, hydration, and clinical room standards. However, outcomes for people require improvement because concerns were found across infection management, hand hygiene, PPE provision, environmental cleanliness and resident bedrooms. Staffing issues and gaps in cleaning routines contributed to inconsistent standards. Overall, infection prevention and control arrangements require improvement to ensure resident safety. We expect the provider to take action and will follow this up at the next inspection.



## Environment

Good

People live in an environment that meets expected standards of safety. Bedrooms were warm, personalised, and equipped according to individual care plans, including items such as airflow mattresses, call bells and bed rails where needed. Residents reported feeling comfortable throughout the home.

Outdoor spaces were neglected, with weeds in gutters, poorly maintained planting areas, and an untidy raised seating space. Although secure when supervised, these areas are not fully accessible or inviting, and existing ramps are difficult to use for people with mobility needs.

Inside, communal spaces such as the lounge and dining room were assessed as small and unsuitable when at full capacity, limiting residents' comfort and opportunities for social interaction. Some bathrooms required cleaning and reorganisation, and inspectors instructed staff to stop storing laundry trolleys in cramped washrooms. An unstable hallway bookcase used for laundry storage was also identified as hazardous.

On the second floor, a cluttered storage area containing large amounts of cardboard and supplies posed a potential fire risk and required urgent reorganisation to reduce fire loading. While fire safety systems were compliant and servicing was up to date, routine checks of emergency lighting and regular audits of escape routes were not consistently completed.

Health and safety arrangements exist but are not yet fully robust. The home was warm during the inspection, and hazards such as daisy-chained extension leads and trailing cables were identified and immediately addressed. Although this shows responsive practice, it also highlights the need for more proactive monitoring.

Cleaning routines were in place, though some areas appeared clinical rather than homely. Essential safety certifications were current, and a full-time maintenance worker undertook routine checks. However, there was no planned maintenance schedule or renewal programme for the fabric and décor of the premises.

Overall, the home provides a safe environment, and issues identified during the visit had been addressed by the end of the inspection. Nevertheless, targeted investment, improved organisation, and more consistent safety auditing are needed to ensure the environment fully supports residents' well-being and offers a homely, accessible and dignified place to live. Following the prompt response to the issues identified above, no non-compliance notices have been issued regarding the environment in this instance.



## Leadership & Management

Good

Governance arrangements at the service are effective. Leaders maintain clear lines of accountability, and organisational policies and procedures are up to date and accessible. The Responsible Individual and Manager work in partnership, and staff, relatives, and residents report that communication is positive and responsive. Leadership is described as visible, approachable, and diligent, with appropriate mechanisms in place to support complaints handling, whistleblowing, and learning from incidents. While governance is broadly compliant with regulatory requirements, scrutiny and quality of recruitment documentation, particularly relating to references and employment histories require strengthening.

The service has a programme of regular audits, covering health and safety, safeguarding, medication, nutrition, infection control, maintenance, complaints, and care documentation. However, audits of infection prevention and control require strengthening as discussed earlier. A Quality Assurance Policy is in place, and Quality of Care reviews are completed every six months, with regular RI visits documented. Evidence shows that audit findings and stakeholder feedback are used to drive improvements. However, quality assurance would benefit from strengthened record-keeping practices, including the digitisation of recruitment files and ensuring all employment and qualification evidence is consistently recorded. Overall, systems are functioning and sufficient to maintain oversight, with actions identified for ongoing improvement.

Staffing levels align with the Statement of Purpose, with adequate numbers of carers on duty and no agency use. Supervision and appraisal processes are established, occurring regularly and supported by appropriate documentation. The training matrix demonstrates strong oversight of mandatory and specialist training, showing compliance levels, expiry dates, and individual staff qualifications. Staff feedback indicates they feel valued, supported, and able to develop, and they would recommend both the service and their workplace to others.

Recruitment practices are mostly compliant; however, several staff files required additional evidence or clarification relating to references and employment gaps. We discussed with the Manager the need for the provider to audit and digitise staff files to ensure regulatory compliance and improve the robustness of recruitment checks. Residents and relatives consistently reported positive experiences with staff, highlighting professionalism, kindness, and respectful care.

## 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
Outcomes for people require improvement because the service provider has not sufficiently ensured standards of hygiene and infection control in the delivery of the service are maintained and systems to monitor levels of cleanliness and to take action were insufficient.	02/03/26

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

**Welsh Government © Crown copyright 2026.**

*You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: [psi@nationalarchives.gov.uk](mailto:psi@nationalarchives.gov.uk)  
You must reproduce our material accurately and not use it in a misleading context.*