



Haven House Residential Care Home



2 Pentre Street, Cardiff, CF11 6QX



02920253176

The inspection visit took place on 08/01/2026

Service Information:

Operated by:	CRS CARE LIMITED
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for learning disability
Registered places:	15
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:

The service has made several improvements since the last inspection. There is a new management team in place including a new Responsible Individual (RI) and a manager. The new management team are gradually implementing changes, and we found these to be positive. Additional staff have been recruited ensuring there is better deployment of staff at the service helping to maintain improved oversight. A small team of seniors know people and the service very well and provide continuity. Leadership and management overall is good but ongoing work is required to improve monitoring and oversight of systems in order to identify gaps and improvements. This remains an area for improvement.

Well-being is rated as good. People are involved in the service through reviews, meetings and chats with managers. We saw people have access to health professionals and care staff are quick to take action where they notice health concerns. A new activities staff has been appointed, and

recruitment is ongoing to ensure there are sufficient staff to provide regular opportunities to people to access the community as well as ensure safety. The service continues to consider and improve how they can promote the Welsh active offer.

New records have been implemented and some existing records improved, but more is required to ensure that records identify people's risks and support needs to assist care staff with safe care delivery. Care staff know people well and told us they keep up-to-date on any changes. Medication is well managed and people receive the right medication at the right time. The manager and RI are working on improving oversight of medication management to ensure that policies are up-to-date and practice is in line with this. Care and Support is good.

The environment is welcoming and busy, with lots of different areas for people to use. There is some ongoing redecoration of the service to manage wear and tear and the service were quick to take action following our feedback. We noted some areas require better oversight to ensure that any health and safety matters are quickly identified and addressed.

Findings:



Well-being

Good

People have the opportunity to share their views and have their voices heard. People's views are gathered regularly through monthly resident meetings, personal plan reviews and surveys as well as the RI visits and management presence. Haven House receives regular visits from an external Age UK advocate also. Relatives praise the seniors, saying *"I appreciate being involved and asked."* People appear relaxed and happy in the company of one another and their care staff. One relative said *"X is settled, happy.... staff are polite and helpful."*

People are safe and protected from abuse and neglect. We saw care staff appropriately report concerns and record accident and incidents. The manager and RI maintain oversight of accidents, incidents, complaints and any safeguarding concerns. Care staff are trained to understand signs of abuse. Care staff are safely recruited and are registered with Social Care Wales, the workforce regulator and all hold a valid Disclosure and Barring Service check. The RI reports matters to safeguarding and to Care Inspectorate Wales when required.

Several people enjoy relaxing at home in their rooms or communal spaces, some enjoy going out and about in their community to different events and activities. A new activity coordinator has been appointed increasing in-house and community activities for everyone. The service has also been considering ways they can celebrate Welsh culture, such as decorating love spoons, baking Welsh cakes and visits to Welsh heritage sites. Hallways display photographs of people enjoying a range of activities, contributing to a positive and inclusive environment. Notice boards provide key information, including the on-call rota and safeguarding guidance. One relative said the home has a *"Welcoming and has a family feel."*



Care & Support

Good

Personal plans are in place which inform care staff of people's basic needs and risks. Important information such as people's health, things they enjoy, and meaningful relationships are included. Plans would benefit from providing more detail and a strengths-based focus, so care staff understand what people can do independently. Regular reviews are completed by care staff and people, and there is some person-centred detail about how people wish to receive their care. Peoples' personal outcomes and goals are not always clearly recorded and monitored within plans. The service is developing how they record, to ensure potentially high-risk areas, such as diet and nutrition and mental health, are well recorded, reported and responded to. One member of staff told us *"We read them regularly and when they've been updated."*

Medication records are good and completed appropriately, with regular stock checks and auditing. People's level of support in relation to medication is recorded and people receive their medication in the right way and at the right time. We noted some medication records are not always completed in line with the service's policy and medication audit requirements, and oversight is being strengthened to improve this. The medication policy is also under review.

Daily records are maintained through an electronic system. While these can appear task focused, the service also offers a well-being one to one check to ensure they capture how the person is that day. Records show appropriate health checks are made, and health professionals are involved when required. The manager told us they regularly speak with District Nurses and staff have received training from them specific to people's needs. Accidents and incidents are recorded, and the manager and RI maintain oversight of this. One relative said they felt their loved one is safe and *"Well cared for."* Consistent care staff provide continuity and know people very well. We saw care staff and people interacting in a caring and warm manner. The atmosphere was calm and relaxed, and people appeared to communicate well with another and get along.



Environment

Good

The service is homely and welcoming, there is a small lounge, a bright and spacious conservatory as well as a dining space and kitchen. We saw several people sat watching TV together and some sat in the dining area having a cup of tea. The home has been inspected by the Food Standards Agency and achieved a five-star rating, indicating a 'very good' standard of food hygiene. We saw items in the fridge are appropriately labelled and care staff wear appropriate personal protective equipment. Overall, people appear relaxed and comfortable in their surroundings.

Individual bedrooms can be personalised according to people's preferences; one person told us they like their room as it is. We noted some wear and tear to mattresses, and bedding was of poor quality. The service advised new mattresses had been ordered, and since the inspection, they have purchased all new bedding. The service has recently experienced some water damage due to leaks and there is ongoing redecoration to manage this. We noted some areas of roof flashing were not secure, which could result in further water damage, and we found one window did not have a restrictor. These issues had not been identified through the service's oversight systems. The provider's arrangements for auditing the physical environment require strengthening, as current processes do not consistently identify maintenance issues. We discussed the need for regular and robust environmental checks with the manager, who provided assurances that improvements will be made.

All communal areas were clean and tidy and we saw care staff actively cleaning at the time of inspection. The home has a small garden, but people prefer to access the local community independently and choose not to regularly use the outdoor space. QR codes are displayed to enable people or staff to report environmental concerns. Care staff checked our identity on arrival and ensured we signed in and out of the visitors' book, promoting safety and oversight. Fire safety systems are in place, including a sprinkler system, and maintenance records for fire alarms and emergency lighting are up to date. Personal emergency evacuation plans (PEEPs) are in place and the manager is updating these to provide more person-centred detail.



Leadership & Management

Good

Since the last inspection, the service has made changes to the management team. There is a new RI and manager in post. The new manager brings experience and knowledge and has plans to make several improvements to the service. The new RI maintains oversight of the service and has plans to improve the robustness of auditing and monitoring in place. A team of senior care staff know people extremely well and maintain very good oversight of the day-to-day running of the service. Care staff told us they felt supported by the management team and receive regular training and supervision. One staff member told us *"We work well together."*

Training and supervision are up-to-date and in good order. Care staff receive a range of training including safeguarding, positive behaviour support and fire safety. All staff undertake an in-house induction which includes face-to-face training as well as an introduction to the company. Care staff receive regular medication competencies and know how to report any concerns. The RI and manager ensure the appropriate authorities are informed of incidents when required. Care staff files are well organised; they include the appropriate information and checks to ensure staff are suitable to work with adults at risk. The manager has implemented a new induction checklist to ensure care staff receive regular shadowing opportunities and one to ones. One staff member told us, *"Staff are lovely."* The service has improved their levels of staffing since the last inspection. People's levels of need and risk are identified using a dependency tool. The service has ongoing recruitment to be fully staffed, and we discussed the need to ensure suitable arrangements are in place to cover vacancies in the interim.

The RI visits the service to gain feedback from people, their relatives and staff, and to maintain oversight. We noted that RI reports show some areas noted at inspection had already been identified. The RI checks personal plans to ensure they are up-to-date and reviewed as well as medication, complaints, safeguarding, staffing, incidents and the environment. The RI also completes a Quality of Care review, which considers feedback from professionals and evidence changes and improvements made. Such as improvements to risk assessments, menu choices and activities. However, the service needs to strengthen their audit process to ensure that it effectively tests compliance and identifies gaps. Outcomes for people continues to require improvement in this area because people may be at risk and we expect the provider to make improvements.

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
A lack of effective oversight systems could impact the quality of the service and place people at risk	16/07/24

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

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