



Arolygiaeth Gofal
Cymru
Care Inspectorate
Wales

Inspection Report

Erwhir Care Home



Erwhir Residential Home, 29-30, Longacre Road, Carmarthen, SA31 1HL



01267236504

The inspection visit took place on 15/04/2026

Service Information:

Operated by:	Towy Haven Care Homes Ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care
Registered places:	15
Main language(s):	Welsh and English
Promotion of Welsh language and culture:	The provider promotes, anticipates, identifies, and meets the Welsh language and culture needs of people.

Ratings:



Well-being

Good



Care & Support

Good



Environment

Requires Improvement



Leadership & Management

Requires Improvement

Summary:

Erwhir is a home in a quiet residential area in Carmarthen providing good quality care for adults with a range of care and support needs. At this inspection we found that the warm, compassionate approach taken by staff means that people experience good well-being outcomes. Well-being is good because care staff have good relationships with people and support a range of activities that contribute positively to wellbeing. Daily living is flexible, mealtimes offer choice, and staff understand people's needs.

People experience a welcoming and homely environment, with personalised spaces that support comfort, familiarity and social connection. The environment requires improvement because the outdoor environment is not safely accessible. We did not read that the RI ensures all required fire checks and remedial works are undertaken in a timely manner, to address environmental risks.

Leadership within the home promotes a caring and inclusive culture. Managers are visible and approachable. Leadership and management requires improvement because not all identified environmental risks are addressed in a timely manner. Oversight by the Responsible Individual (RI) does not consistently ensure environmental risks are actioned and requires strengthening to ensure the safety and wellbeing needs of people are consistently met.

Findings:



Well-being

Good

People experience good well-being at Erwhir because staff support them to live lives filled with choice and meaningful connection. Throughout the inspection we saw consistently warm, respectful and kind interactions between staff and people living at the service. Staff communicated with people in a calm and friendly manner, offering reassurance and gentle prompts where required. People appeared relaxed, settled and comfortable within the home, which gives assurance they feel safe and emotionally secure.

People are supported to exercise choice and control over their daily lives. We saw people moving freely around the home, choosing where they wished to spend time and who they wanted to be with. At lunchtime, people were offered clear options and were supported to decide what they wanted to eat. Staff respected people's preferences and routines, supporting dignity and independence.

Positive relationships between people living at the service are evident. We observed people engaging naturally with one another and offering encouragement and support. On one occasion, a person reminded another to wait for assistance rather than attempting to stand independently, helping to reduce the risk of a fall. This showed people feel comfortable with one another and look out for each other's well-being.

We saw people taking part in activities through the service's social media page, which families can also access. This included photographs of seasonal activities and birthday celebrations. These shared experiences support people's enjoyment of everyday life and help families remain connected to important moments, providing reassurance about how people spend their time at the service.

People spoke positively about their lives at Erwhir. One person told us, *"I'm very happy living here; the staff are really kind."* A relative told us they felt reassured that their family member was settled, comfortable and well cared for.

We saw staff supervising people appropriately, helping to maintain safety while supporting independence. The provider has given assurances that improvements are being made to manage potential risks in a timely manner. The provider has also provided assurances the outdoor area will be improved to enable people to access the outdoors through the summer. Overall, people experience positive outcomes and feel supported, valued and at ease in their home.



Care & Support

Good

People experience care and support that meets their needs and is delivered in a kind, respectful and responsive way. Staff provide care in a calm, compassionate and unrushed manner. During the inspection we saw staff interacting positively with people, taking time to explain what they were doing and responding patiently to requests for support. Staff demonstrate a good understanding of people's individual routines, preferences and day-to-day support needs, which helps people feel respected and at ease.

People told us they are happy living at the service and appeared comfortable with the care they receive. We saw people approaching staff freely for reassurance and assistance and being responded to promptly, indicating trusting relationships between staff and people. A member of care staff told us, *"We know people really well here and try to support them in the way they prefer."* Professionals also spoke positively about the quality of care. A visiting health professional told us, *"Staff know the people really well and respond quickly when there are changes."* This provides assurance that care is responsive and focused on people's individual needs.

We reviewed care records which show staff make appropriate referrals to health professionals when changes in people's health or well-being are identified. This demonstrates awareness of people's health needs and appropriate action being taken. Infection prevention and control practices were appropriate at the time of inspection, supporting people's safety and health.

We spoke with the service about opportunities to further strengthen consistency in care planning, daily recordings and medication documentation. These discussions focused on embedding good practice and ensuring routine checks continue to support consistency and assurance.

People's day-to-day experiences of care are positive and underpinned by staff who are attentive, caring and responsive.



Environment

Requires Improvement

People live in a welcoming, comfortable and personalised home that supports everyday living and social connection. We saw a clean, warm and homely internal environment. Bedrooms and communal areas are personalised with photographs, decorations and personal belongings that reflect people's interests and experiences. People told us they like their rooms and feel comfortable living at the service. At the time of the inspection, people were not able to access the garden as planned works to the outdoor area had not commenced.

Communal areas are well used and support social interaction. The lounge is comfortably furnished and provides space for people to relax, listen to music, spend time together and take part in activities. We observed people chatting and enjoying each other's company in a calm and inclusive atmosphere. The dining room supports positive and sociable mealtime experiences. We saw people sitting together at lunchtime with music playing, encouraging conversation and shared experiences. These moments contribute to people's enjoyment of daily life and build a sense of community within the home.

Throughout the service, we saw displays showing photographs of activities and shared experiences. These displays help people reflect on enjoyable experiences and reinforce a sense of belonging. We also saw a sign-in and sign-out book in use, supporting the security of the home by helping staff maintain oversight of who is entering and leaving. The home has a five-star rating from the Food Standards Agency which means that hygiene standards are 'very good'.

We reviewed quality assurance and RI reports which show environmental matters had been identified. We did not read that the RI ensures all required fire checks and remedial works are undertaken in a timely manner, to address environmental risks. Outcomes for people require improvement because people are not able to safely access the outdoor area and audit processes do not consistently ensure risks within the environment are addressed in a timely manner. We expect the provider to make improvements.



Leadership & Management

Requires Improvement

Leadership promotes a caring and inclusive culture within the service. Leadership is visible and approachable. Staff told us they feel supported and confident to raise concerns or seek guidance when needed. One staff member told us, “*Management are always available if we need advice or support.*” Relatives and professionals also expressed confidence in the service.

Staff confidence in leadership was evident during the inspection. Staff spoken with described managers as approachable and supportive and said they felt able to seek guidance, raise concerns and discuss practice openly. This contributes to a positive working culture where staff feel listened to and supported in carrying out their roles.

Families and professionals also spoke positively about communication with the service. They told us management are accessible and responsive, and that they feel able to contact the service easily if they have any questions or wish to discuss their family member’s care. This supports transparency and helps build trusting relationships between the service, people living there and those important to them.

Governance arrangements are in place, including Responsible Individual visits, quality assurance reports and action plans. These demonstrate leaders are reflective, understand pressures within the service and are aware of areas they want to strengthen. We spoke with the service about strengthening how identified actions are taken forward from planning through to completion. Some matters discussed during the inspection had been identified previously and would benefit from closer monitoring to ensure improvements are delivered consistently and sustained over time. These conversations focused on strengthening follow-through rather than a lack of awareness. Outcomes for people require improvement because known risks and areas for improvement remained unresolved, increasing the likelihood of harm, and we expect the provider to make improvements.

We reviewed recruitment records and found that safer recruitment processes are in place. These include appropriate pre-employment checks such as Disclosure and Barring Service (DBS) checks, verification of identity, employment history and references. These arrangements support assurance that staff employed at the service are suitable to work with people and that safeguarding risks are minimised.

Staff spoken with demonstrated an understanding of their roles and responsibilities, including professional boundaries and safeguarding expectations. This contributes to a staff team that is aware of the importance of safe practice and accountability.

Overall, the service benefits from caring leadership and a positive culture where people’s well-being is valued. While leadership intent and governance systems are in place, improvements are required to ensure that identified actions consistently lead to completed and sustained

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.

CIW has no areas for improvement identified following this inspection.

Summary of areas for Priority Action	Date identified
People cannot be assured they live in a home which consistently addresses risks within the environment and takes prompt action to ensure people's health and wellbeing. People cannot be assured they live in a home which ensures they have consistent access to the garden to support their health and wellbeing.	15/04/26
People cannot be assured the service provider has robust arrangements in place for the proper oversight of the management , quality and safety of the service.	15/04/26

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

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