Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Aspen House Care Home

Aspen House Care Home, 37 Coedpenmaen Road, Pontypridd, CF37 4LP

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www.aspenhousecarehome.co.uk

The inspection visits for this service took place between 22/09/2026 and 23/09/2026

Service Information:

Operated by:	Cwmdare Homes 2 Limited
Care Type:	Care Home Service Adults With Nursing
Provision for:	Care and support for people living with dementia, Care and support for people with a physical disability, Care and support for people with mental health needs
Registered places:	38
Main language(s):	English
Promotion of Welsh language and culture:	The provider is not promoting the Welsh language and culture needs of people, and this requires improvement.

Ratings:

Well-being	Good
Care & Support	Good
Environment	Good
Leadership & Management	Requires Significant Improvement

Summary:

People's well-being outcomes are good. People are provided with opportunities to participate in a range of activities if they choose. They receive appropriate support to meet their healthcare needs, with access to relevant healthcare professionals when required. People are also supported to maintain and develop important relationships with family members and friends, promoting their overall well-being and quality of life.

Care and support is good. People living at the service report high levels of satisfaction and describe positive, respectful relationships with staff. Person-centred personal plans are in place, providing clear and comprehensive guidance that reflects peoples' assessed needs, preferences, and desired outcomes. Medication is stored securely, managed appropriately, and administered in a timely manner by suitably trained staff.

The environment is good. The service provides a safe and secure setting, while enabling people to personalise their bedrooms to reflect their preferences and maintain a sense of comfort and identity. Communal areas are readily accessible and support social interaction and engagement.

Leadership and management require significant improvement. At the last inspection we issued a

Priority Action Notice in relation to governance arrangements. This remains in place as we were unable to test the non-compliance at this inspection.

Findings:

Well-being — Good

People are supported to exercise choice. People can choose what they wish to eat and drink, as well as decide whether to spend time in communal areas or in the privacy of their own rooms. We observed an activity programme in place that offered a range of opportunities for engagement, enabling people to participate in activities according to their preferences and interests. The service also works in partnership with external organisations to enhance the range of activities available. People are actively consulted about activity provision through regular resident meetings, helping to ensure activities reflect their views and preferences.

There are measures in place to safeguard people and promote their safety and well-being. Staff are recruited in accordance with regulatory requirements, helping to ensure they are suitable to work with vulnerable people. Staff receive training relevant to the needs of the people they support, enabling them to provide safe and appropriate care. The manager makes safeguarding referrals to the Local Authority Safeguarding Team when required, demonstrating an appropriate response to concerns. A safeguarding policy is in place and is aligned with the Wales Safeguarding Procedures. Staff spoken with demonstrate a clear understanding of their responsibilities and the process for reporting safeguarding concerns.

People are treated with dignity and respect. Throughout the inspection, we observed warm, positive interactions between staff and people living at the service. Staff demonstrate a good understanding of the people they support and are familiar with their needs, preferences and daily routines. Feedback from people was consistently positive. One person told us, *“The staff are good, they look after me really well,”* while another commented, *“The staff are lovely.”* Positive feedback was also received from relatives, all of whom spoke highly of the staff team and expressed satisfaction with the quality of care and support provided to their loved ones.

People live in an environment that promotes and supports their well-being. The service provides sufficient communal areas that are clean, comfortable, and welcoming. People are encouraged to personalise their bedrooms, helping to create a familiar and homely environment. The home is appropriately maintained, with systems in place to ensure the regular servicing and safety testing of utilities, equipment, and key safety features, contributing to a safe and suitable living environment.

Care & Support — Good

People receive a good standard of care and support. Prior to admission, a pre-admission assessment is undertaken to ensure the service can meet peoples identified needs. Following admission, a person-centred personal plan is developed to guide the delivery of care and support. The personal plans we reviewed contain detailed and relevant information regarding people's care and support needs, preferences, outcomes, and associated risks. We found evidence plans are developed in partnership with people and, where appropriate, their representatives, and are reviewed regularly in line with regulatory requirements. Throughout the inspection, we observed staff providing care and support in a respectful, dignified, and compassionate manner, demonstrating a good understanding of people's individual needs and preferences.

People are supported to maintain their health. Personal plans clearly detail people's healthcare needs, and all relevant medical correspondence is retained within care records. We found evidence of timely referrals to healthcare professionals where required, together with clear documentation of appointments, reviews, and visits undertaken by healthcare practitioners. Personal plans are updated to reflect advice and recommendations provided by healthcare professionals, helping to ensure care remains responsive to people's changing needs. People's health is monitored on an ongoing basis through the use of recognised assessment and monitoring tools, which are reviewed and updated as required to support effective oversight of people's health needs.

Medication management arrangements are robust and support people to receive their medicines safely. Medications are stored securely and administered by qualified nursing staff. The service has a medication policy that is aligned with current best practice guidance, providing a clear framework for the safe management of medicines. Nursing staff receive appropriate medication training, and regular competency assessments are undertaken to ensure they remain skilled and knowledgeable in the administration of medication.

The service demonstrates safe and effective infection prevention and control practices. Infection prevention and control training forms a key component of the service's mandatory training programme, helping to ensure staff have the knowledge and skills required to reduce the risk of infection. Staff work in accordance with an infection prevention and control policy that is aligned with current best practice guidance. Appropriate supplies of personal protective equipment (PPE) are readily available throughout the service, and during the inspection staff were observed using PPE correctly when providing care and support. Regular infection control audits are completed to ensure practice remains safe and issues are quickly identified and actioned.

Environment

Good

Aspen House is situated close to the town of Pontypridd and is registered to provide care and support for up to 38 people. The home is arranged over three floors, with lift access available to ensure the environment remains accessible for people with mobility needs. People have access to communal lounge areas on each floor, providing opportunities for social interaction and engagement with others. Communal bathing facilities are also available throughout the home, and a range of specialist moving and handling equipment, including hoists, is in place to support the safe delivery of care. Bedrooms are personalised in accordance with people's preferences and are equipped with en-suite toilet facilities. The service also benefits from a secure and accessible garden area, offering people opportunities to enjoy fresh air and participate in outdoor activities. Observations made during the inspection indicated the service would benefit from additional storage capacity in certain areas. This was discussed with the management team, who acknowledged the issue and provided assurance that appropriate action would be taken.

The service has suitable arrangements in place to maintain the safety and upkeep of the environment. A designated maintenance person is responsible for overseeing the premises, undertaking routine environmental checks and carrying out repairs as required. Specialist contractors are engaged to manage areas such as utilities and fire safety systems, ensuring all necessary servicing is completed and relevant certification is maintained. Environmental audits are undertaken regularly to identify areas for improvement and support the timely resolution of any issues identified.

During the inspection, cleaning activities were observed taking place throughout the home, and we saw domestic staff follow daily cleaning schedules to maintain standards of cleanliness. Laundry facilities were found to be appropriate for the size of the service, with a clearly defined 'clean' and 'dirty' flow process in place to reduce the risk of cross-contamination. The kitchen holds a Food Standards Agency rating of 3, indicating satisfactory standards of food hygiene and cleanliness. Cleaning products and hazardous substances are stored securely and in accordance with Control of Substances Hazardous to Health (COSHH) requirements, helping to promote a safe environment for people living and working within the service.

Leadership & Management

Requires Significant Improvement

The provider is committed to maintaining a skilled, knowledgeable, and competent workforce. During the inspection, we observed sufficient staffing levels to meet the needs of people living at the service. Staff receive training relevant to their roles and responsibilities, enabling them to provide safe and effective care and support. Training records demonstrate the majority of staff are up to date with mandatory training requirements. In addition to the training provided by the service, staff are encouraged to undertake recognised qualifications in health and social care to further develop their knowledge and skills. We also saw evidence that specialist International Dysphagia Diet Standardisation Initiative (IDDSI) training had been arranged for kitchen staff to support the safe preparation of food and drinks for people with modified dietary requirements. Staff are supported in their roles through regular supervision and ongoing management oversight.

The provider's policies and procedures are appropriate and support the delivery of safe and effective care within the service. The service maintains a comprehensive suite of policies that provide clear guidance to support consistent and safe working practices. Records showed policies and procedures are subject to regular review and update to ensure they remain aligned with current legislation, and best practice guidance.

The service provider has appropriate vetting processes for hiring staff to ensure they are qualified and trustworthy. Personnel files contain all the required pre-employment checks. These checks include references from previous employers, employment history checks and Disclosure and Barring Service (DBS) checks. New staff have to complete a structured induction to help them understand their role and the care and support needs of supported people. Care staff are registered with Social Care Wales (SCW) the workforce regulator and Nursing staff are registered with the Nursing and Midwifery Council (NMC).

At the previous inspection, a Priority Action Notice was issued due to ongoing concerns regarding governance and quality assurance arrangements. As the service is currently in the process of appointing a new Responsible Individual (RI), who holds overall accountability for these areas, we have not been able to fully assess compliance in relation to this matter during the current inspection. Consequently, the Priority Action Notice will remain in place at this time. We intend to revisit and evaluate this area of non-compliance within the next six months. In the meantime, we expect the provider to take prompt and effective action to address the identified concerns and strengthen governance and oversight arrangements within the service.

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
There is a major risk to people using the service as a result of this regulatory breach. The service has experienced a sustained high turnover of managers in recent years, which appears to be directly linked to insufficient guidance and support. This instability has had a detrimental impact on the staff team and has contributed to additional regulatory failings within the service.	23/03/26

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