



Arolygiaeth Gofal
Cymru
Care Inspectorate
Wales

Inspection Report

Pen-Y-Garth Care Home



Pen Y Garth Care Homes Ltd, Pleasant Lane Brymbo, Wrexham, LL11 5DH



01978753323



www.caringuk.com

The inspection visit took place on 19/05/2026

Service Information:

Operated by:	Pen-Y-Garth Care Homes Limited
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care
Registered places:	42
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

Excellent



Care & Support

Good



Environment

Good



Leadership & Management

Good

Summary:

Pen y Garth is located in the village of Brymbo near Wrexham. The home is a large older property, tastefully decorated and providing a home for up to 42 people.

People experience excellent well-being outcomes, as leadership and management promote a strong, person-centred culture where people have choice, control and are enabled to live meaningful lives. People benefit from an engaging, flexible activity programme and positive relationships, resulting in strong social connection and a sense of belonging.

Outcomes for care and support are good. Care is planned and delivered in line with people's needs and preferences, with regular reviews involving people, representatives and health professionals. Risks are managed appropriately to support independence, and effective systems are in place for safeguarding, medication and infection prevention.

Outcomes for the environment are good. The home is clean, comfortable and personalised, with a

range of communal spaces that support social interaction. While outdoor areas are available, some spaces are not fully accessible without support, which limits independence.

Outcomes for leadership and management are good. There are effective arrangements for recruitment, training, supervision and quality assurance. Leadership and management maintain oversight through audits and communication with the provider.

Overall, people benefit from a service that supports their well-being and safety, with consistent care delivery and a generally effective management structure.

Findings:



Well-being

Excellent

People experience excellent outcomes because they are consistently supported to live meaningful, self-directed lives with extensive choice and control. Leadership promotes a strong, person-centred culture where people's voices shape the service.

The manager ensures a highly effective approach to meaningful activity. Two activity co-ordinators provide a flexible seven-day programme that is co-produced with people and reflects their interests, past lifestyles and aspirations. Creative approaches, including RITA (Reminiscence/Rehabilitation & Interactive Therapy Activities) and LIFT (Low impact functional training), support physical health, cognitive stimulation and emotional well-being. Activities are delivered in shorter, adaptable sessions to maximise engagement and inclusion. Records of attendance and feedback are used to evaluate impact and improve experiences.

We observed people consistently engaged in activities across the service. People chose to participate in singing, dancing and quizzes, showing enjoyment, confidence and connection. Care staff adapted activities so people with differing abilities remained fully involved. Interactions were warm and natural, with laughter and companionship evident, demonstrating strong relationships and a sense of belonging. A visiting programme, including school children and community groups, further enhances social connections.

The service has a calm, inclusive culture. Care staff, including kitchen staff, interact with people in a warm and respectful way, supporting emotional well-being and a sense of value. The manager models this culture through a visible presence and clear knowledge of people's individual needs. We observed respectful interactions, with people responding positively and engaging in relaxed conversation. A representative told us *"There are great activities here and people are always enjoying themselves. I sometimes join in; I feel involved."*

People's rights and autonomy are consistently upheld. Care staff seek consent and respect preferences in all aspects of daily life. For example, permission was requested before entering rooms, demonstrating respect for personal space. Support is provided promptly and in a dignified manner.

People have extensive control over their daily lives. Bedrooms are personalised and reflect individual identity. People make decisions about routines, meals and activities, and care staff respond flexibly. Mealtime arrangements support dignity.

People are supported to maintain independence and contribute to the life of the service. Some people take active roles in daily tasks and express interest in activities such as gardening, promoting purpose and inclusion. People told us they feel listened to and that their preferences are

acted upon, resulting in improved comfort and satisfaction. One person said *“Staff are nice, they are always around and I can ask them for anything. I feel respected and listened to. I am very relaxed and happy here”*.

Representatives described a calm, friendly environment where people are happy and engaged. One representative told us *“The atmosphere is friendly and calm. Communication is very good, the manager always contacts us and lets us know what is needed.”*. Communication from management is strong, supporting confidence and continued involvement.

Overall, people experience highly positive well-being because of a culture where people feel valued, connected and in control of their lives.



Care & Support

Good

People receive effective care and support because leadership and management ensure robust systems are in place to assess, plan and review care in line with people's needs and preferences. Personal plans demonstrate people are involved in decisions about their care. Care needs are discussed with people, and their views are acted upon. Plans are reviewed monthly, and are audited by the manager to ensure oversight and accuracy. Representatives are also involved, and records show their views are considered and accommodated.

Care reflects input from a range of health and social care professionals. Records show involvement from general practitioners, pharmacists, community nurses and social workers. Communication is detailed and changes to care are reflected in personal plans. Local authority care plans were present within files and care delivery reflects assessed needs, with updates made when needs change.

People are supported safely because leadership and management have effective systems in place to identify and manage risks. Falls prevention and post-falls procedures are detailed and supported by involvement with the ISTUMBLE programme. This enables timely recording and response to incidents. Risk assessments support people to remain as independent as possible, for example through the provision of appropriate equipment and footwear to reduce falls risks while maintaining mobility.

People are safeguarded because leadership and management ensure appropriate processes are in place to report and respond to concerns. The manager demonstrated a clear understanding of safeguarding responsibilities and is actively working with safeguarding teams. Care staff are aware of the need to report concerns, and training records show safeguarding training has been completed. Policies are being reviewed to ensure full alignment with All Wales Safeguarding Procedures.

Medication is managed safely. Only care staff who have completed training, undertaken shadowing and been assessed as competent, administer medication. We saw evidence of competency assessments and clear guidance supporting safe practice.

Infection prevention arrangements are effective. A reviewed policy is in place and management ensure appropriate procedures, equipment and training are available.

Care staff described good communication systems, including the use of handover records, and confirmed they feel supported by the manager. They receive training and supervision and understand how to support people in line with their needs. Care staff also demonstrated flexibility in supporting people's choices. One staff member said *"Sometimes I will go for a walk with people who like to be outdoors"*

Communication has been further developed with the providers participation in the Red Bag project.

This ensures that all personal care information is shared between the NHS and the service for any hospital admissions, ensuring consistency of care.

People receive appropriate support with meals. Dining arrangements promote dignity and choice, and we observed positive interactions between care staff and people during mealtimes. One person said *“Meals are very nice and my choices are always responded to. I had salad today because I only like lighter meals”* and another said *“I am cared for as I want but I do what I want. The food is good. I am happy here “*

Overall, care is planned and delivered in a way that reflects people’s needs, with effective involvement from representatives and professionals.



Environment

Good

People experience a suitable environment because leadership and management ensure the home is clean, comfortable and meets most people's needs. The service is arranged over two floors, with communal and private spaces available across different areas. There is a lift and staircase to support access between floors. Safety measures are in place, including a gated staircase and a coded door system. On the day of inspection, care staff were present on both floors to support people's access and safety.

The home provides a range of communal spaces, including lounge areas, two conservatories and dining rooms. These areas are spacious and support people to spend time socially or independently. We observed people using these spaces comfortably, and representatives described the environment as calm, with minimal noise other than people interacting positively. This promotes a relaxed atmosphere and supports people's well-being.

Bedrooms are clean, tidy and personalised. People have decorated their rooms to reflect their preferences, which supports a sense of ownership and identity. Some bedrooms have ensuite facilities, and most rooms are of a good size. There are a small number of shared rooms, and we were told these arrangements were agreed with people and this was confirmed by representatives. Overall, the environment is homely and reflects people's individuality.

Bathrooms, toilets and shower rooms are easily accessible, uncluttered and very clean. Medication rooms are secure and maintained appropriately. The home was odour free. We saw a detailed cleaning schedule. This demonstrates effective cleaning arrangements of the service.

The kitchen is centrally located and clean, with serving hatches into the dining rooms. These remain open, allowing people to access drinks throughout the day. This supports people's independence and access to refreshments.

While outdoor space is available, access to the larger grounds is limited due to uneven surfaces, which means people are reliant on care staff support to use these areas. This reduces opportunities for independent access to outdoor space.

There is a smaller, enclosed garden with seating and planting areas which is more accessible. Access to this area is monitored through an alarm system to ensure safety. People told us they would like increased independent access to outdoor areas, particularly where they have an interest in gardening or being outside. This was discussed with the leadership team who will look at this through their quality processes.

Leadership and management have arrangements in place to monitor and maintain the environment, including responding to maintenance issues as they arise. We saw audits completed by the leadership team reviewing and planning for maintenance. Care staff told us maintenance

issues are addressed, and people confirmed they are happy living in the home.

Overall, the environment meets people's needs, is clean and well maintained, although access to some outdoor areas could be improved to further support people's preferences.



Leadership & Management

Good

Leadership and management promote a person-centred culture which is reflected in day-to-day practice and the way care staff interact with people.

People experience consistent care and support because leadership and management have effective arrangements in place to oversee the service, monitor quality and support care staff.

Recruitment processes are robust. We reviewed three staff files and found all required checks were completed, including identification, references, employment history, training and Disclosure and Barring Service checks. This helps ensure people are supported by suitable care staff.

Leadership and management ensure care staff are trained and supported to meet people's needs. Induction processes are in place and training records show care staff receive both mandatory and specialist training. Supervision and appraisal systems are established, and most care staff receive regular supervision, with any delays due to absence subsequently addressed.

Care staff told us they feel supported and have access to leadership and management when needed. There is a leader rota to provide support in managers' absence. There are clear communication systems, including handover arrangements, to support safe and consistent practice.

There are effective arrangements in place to monitor the quality of the service. Leadership and management complete a range of audits across key areas, including care planning, medication, infection control, safeguarding and falls management. These audits are undertaken at regular intervals and inform actions and improvements. Data analysis is also completed monthly to review trends. In addition, a company administrator completes weekly visits to carry out quality checks and reports findings to the provider.

Good oversight arrangements are in place, despite no designated Responsible Individual at present. Reviews of the service are completed by the manager and company administrator, which will be completed every 3 months. These involve discussion with people and review of audits. A report is produced with identified actions which is shared with the provider. The provider has not been able to attend the service in person and relies on these detailed reports as well as through regular communication with the manager.

The manager feels supported by the provider through regular telephone and email contact as well as support from the company administrator who visits weekly.

Quality of care reviews are completed within required timescales. These identify strengths and areas for improvement. Systems are in place to seek feedback from people, representatives and care staff, although further development to clearly demonstrate how this informs service

improvement would enhance this process.

Safeguarding processes are overseen by leadership and management. The manager demonstrates good understanding of safeguarding responsibilities and is actively working with external agencies. Training is provided to staff. Policies are being reviewed to ensure alignment with All Wales Safeguarding Procedures.

Staffing levels are consistent and managed to meet people's needs, with no reliance on agency staff. Staff have stated that they enjoy a good work life balance which they appreciate.

Overall, leadership and management provide effective oversight, although some governance arrangements require strengthening.

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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