Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Penrhos Care Home Ltd

Penrhos Care Home, Old Station Yard, Pontypridd, CF38 2LZ

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www.penrhoscarehome.com

The inspection visits for this service took place between 13/04/2026 and 14/04/2026

Service Information:

Operated by:	PENRHOS CARE HOME LTD
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for mental health
Registered places:	18
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	Good

Summary:

People experience positive well-being outcomes. Staff support people effectively with their health needs, and medication management systems are safe and well organised. People are supported to make daily choices about their lives and are able to take part in activities of their choosing. Safeguarding arrangements are effective, and people report that they feel safe, respected and valued.

Care and support practices are of a good standard. People express satisfaction with the care they receive. Staff demonstrate a good understanding of people's individual needs, preferences and routines and deliver person-centred care. Personal plans are reflective of people's assessed needs and are regularly reviewed with people and, where appropriate, their representatives.

The environment promotes people's comfort, safety and well-being. The home is secure, clean and well maintained. Routine safety checks and servicing of utilities and equipment are completed as required, and hazardous items are stored safely. People are able to personalise their rooms according to their preferences, helping to create a homely and familiar environment.

Leadership and management arrangements are good. Care staff receive regular supervision and

have access to training that supports them in carrying out their roles effectively. Governance systems are well established, with the Responsible Individual (RI) undertaking regular visits, providing oversight, and quality of care reviews completed in line with regulatory requirements. Staffing levels meet the needs of people living at the service.

Findings:

Well-being — Good

People's well-being is enhanced by care staff who develop strong, trusting relationships, enabling people to feel safe, valued, and well supported. The service actively promotes positive and respectful interactions, recognising their importance in achieving good well-being outcomes. During the inspection, we observed numerous warm, kind and respectful interactions between staff and people. Feedback from people was very positive. Comments included, *"The staff are amazing, it's excellent here,"* and *"I feel very well looked after, the staff do a good job caring for me".* Positive feedback was also received from people's representatives. One told us, *"The staff are excellent, mam loves them, they give her lots of attention".*

The environment supports people's well-being. The home is set over a single floor, ensuring all areas are accessible for people with mobility needs. People are encouraged to personalise their rooms according to their preferences, helping to create a comfortable and homely environment. There is a main communal area providing opportunities for people to socialise and participate in activities. High standards of cleanliness and hygiene are maintained throughout the home. The environment, including its facilities and equipment, is subject to routine maintenance and servicing to ensure it remains safe and well maintained.

People are supported to have control over their day-to-day lives. We reviewed documentation demonstrating people are given meaningful opportunities to express their views about the service they receive. Regular residents' meetings are held, providing a forum for people to discuss topics such as activities and menu choices. Satisfaction surveys are also used to gather feedback on people's experiences of living at the service. People are actively involved in the development and review of their personal plans, ensuring they can communicate their preferences regarding the care and support provided.

People are protected from harm, abuse, and neglect. Care staff are recruited in accordance with regulatory requirements, ensuring they are suitable to work with adults at risk. Staff receive training relevant to the needs of the people they support, including safeguarding, medication, and Mental Capacity Act training. Care staff demonstrate an understanding of their safeguarding responsibilities and the procedures for reporting any concerns. Policies and procedures are aligned with statutory and best-practice guidance, supporting safe and consistent practice within the service.

Care & Support — Good

Penrhos Care Home provides a good standard of care and support. Pre-placement assessments are completed prior to admission to help ensure the service can meet people's needs. People are consulted about their preferences and requirements, supporting a person-centred approach from the outset. Following admission, a personal plan is developed which outlines each person's care and support needs and identifies relevant health and safety risks. While personal plans are generally detailed and informative, we found that some require improvement to ensure people's health needs and associated risks are clearly defined. We discussed this with the provider, who gave assurance that action would be taken to address these concerns. We saw evidence personal plans are developed in collaboration with people and, where appropriate, their representatives, ensuring their views and preferences are accurately reflected. Plans are reviewed regularly to ensure they remain up to date and responsive to changing needs, with people and their representatives involved in the review process.

People receive effective support to meet their health needs. Health requirements are documented within people's personal plans. Care staff demonstrate a good understanding of people's health needs and can recognise changes in people's presentation. Where changes are identified, staff take timely action and seek advice from appropriate healthcare professionals. We saw medical correspondence is maintained within people's records and that advice and interventions provided by healthcare professionals are accurately recorded. A healthcare professional who was at the service on the day of our inspection told us, *"I think people receive a good standard of care and support, staff get on with people, and they have a really good understanding of people's medical needs. This is one of the better homes I go to, I have no concerns with this place".*

Medication is managed safely within the service. Medicines are securely stored and administered in line with prescriber instructions. A comprehensive medication policy is in place, which reflects current best-practice guidance. Care staff receive appropriate medication training, and the manager routinely assesses staff competency to ensure they are confident and safe in their practice. Medication audits are carried out to promote safe and effective administration and to identify any issues requiring attention. However, these audits need to be completed more frequently to ensure any discrepancies or emerging concerns are identified and addressed promptly. The provider assured us this matter would be actioned.

The service implements effective infection prevention and control practices. Infection prevention and control training forms a core element of the service's training programme, ensuring staff understand their responsibilities and follow safe procedures. Care staff work in line with a comprehensive infection control policy that supports the maintenance of a clean and safe environment.

Environment

Good

The environment supports people's safety, comfort, and overall well-being. The service provides a main lounge and dining area, which is used by most people throughout the day. This communal space is used to facilitate daily activities within the home and is appropriately furnished and decorated. During our observations, people using this area appeared relaxed and comfortable, indicating that they are content with and well supported by the environment.

The service is arranged over a single floor, which supports ease of navigation throughout the home and promotes accessibility. This layout enables people to move freely between their bedrooms and communal areas according to their preferences, either independently or with support from care staff, as required. There are sufficient toilet and bathroom facilities available, and specialist equipment is in place to support people who have mobility needs.

People are encouraged to personalise their bedrooms, which supports a sense of belonging and helps them feel comfortable and settled within the setting. We saw that people's rooms were personalised with photographs, ornaments, and items of personal significance. Bedrooms are well presented, with appropriate furnishings and décor that reflects individual preferences.

Domestic staff are employed at the home daily to ensure high standards of cleanliness and hygiene are maintained. Laundry facilities are appropriate for the size of the service, and effective arrangements are in place to minimise the risk of cross-contamination. The kitchen has been awarded a Food Hygiene Rating of five by the Food Standards Agency, indicating very good hygiene standards are in place.

Regular servicing, maintenance, and prompt repair of the premises and facilities help to ensure the ongoing safety and well-being of people using the service. External contractors are used to carry out specialist servicing and maintenance, including manual handling equipment and fire safety systems. Environmental risk assessments are undertaken regularly, and where risks are identified, these are supported by appropriate action plans to reduce or manage the identified risks.

Appropriate security arrangements are in place to safeguard people using the service. The premises are secure to prevent unauthorised access. Visitors are required to make themselves known on arrival, and staff ensure that they sign in and out of the premises in line with the service's procedures.

Leadership & Management — Good

The service is well led, with robust organisational arrangements, governance, and effective oversight in place to support the smooth running of the service. The Responsible Individual (RI) maintains a visible presence and engages regularly with people using the service and staff members to gather feedback on service delivery and to inform continuous improvement. Annual satisfaction surveys are undertaken to capture the views of stakeholders and contribute to service development. The manager completes regular audits to monitor standards of care and ensures relevant regulatory bodies and statutory agencies are notified appropriately when concerns or significant events arise that may impact on the well-being of people receiving care. Quality-of-care reviews are carried out every six months to evaluate service performance, including analysis of safeguarding referrals, complaints, and staffing matters. The quality-of-care reports reviewed are comprehensive and clearly identified both the service's strengths and areas for improvement.

The service promotes a positive and inclusive culture that supports the well-being of both people using the service and staff members. Staff spoken with reported feeling well supported in their roles and expressed high levels of job satisfaction. One staff member commented, *"I love working here; the manager is very supportive,"* another stated, *"We all get along really well, have a good understanding of people's needs, and are encouraged to contribute to how things are done in the home".* The manager operates an open-door policy, and care staff reported feeling confident to raise any issues or concerns, knowing they would be listened to and supported. Records reviewed show staff receive regular one-to-one supervision, alongside annual performance appraisals. The manager ensures staff access appropriate training, and records indicate that staff are largely up to date with their mandatory and role-specific training requirements.

People achieve positive outcomes because the provider demonstrates a strong commitment to maintaining sufficient numbers of skilled and knowledgeable staff within the service. Rotas reviewed show target staffing levels are consistently met, ensuring people receive appropriate care and support. The service operates safe recruitment practices, and records reviewed confirm all required pre-employment checks are completed before staff commence employment. New staff receive a structured induction programme, which includes a period of shadowing experienced members of the team. Staff spoke positively about the induction process. One member of staff commented, *"I shadowed for two weeks and learned about the residents' care and support needs, developed an understanding of them as people, and they got to know me".* Following the completion of their induction, staff are registered with Social Care Wales (SCW), the workforce regulator, ensuring they meet the required professional standards.

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.