



Glynbargoed Care Home



Glyn Bargoed House, Glyn Bargoed Road, Treharris, CF46 6AA



01443 412905

The inspection visit took place on 13/02/2026

Service Information:

Operated by:	Roemarsh Limited
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for mental health
Registered places:	24
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

Requires Improvement



Environment

Good



Leadership & Management

Requires Improvement

Summary:

Glynbargoed Care Home is a residential home in Treharris. The service is in a residential area, close to local amenities.

People experience good well-being outcomes and are treated with dignity. People told us they are happy living at the service and feel safe. They are supported to make choices about their daily lives and to access healthcare when needed. Positive relationships between people, staff and relatives contribute to people feeling settled and secure. Care and Support requires improvement, specifically in the quality of personal plan documentation. While interactions between staff and people are warm and respectful, people's personal plans do not consistently contain enough detail to guide staff in meeting individual needs and personal outcomes. This limits how effectively care is planned, delivered and reviewed.

The environment is good. The home is welcoming and meets people's needs. Planned

refurbishment and extensions are expected to further enhance people's experiences and access to shared spaces. Leadership and Management requires improvement. Staff morale is positive and staff feel supported, however gaps in core training and inconsistent supervision mean systems are not yet robust enough to ensure consistent oversight and ongoing improvement. Further action is required to strengthen governance and quality assurance arrangements.

Findings:



Well-being

Good

Well-being at Glynbargoed Care Home is good. People are treated with dignity and respect and are supported and encouraged to make decisions about their daily routines, which promotes independence and personal control. People are offered choices in daily activities, and the service employs a full-time activities co-ordinator. Activities we observed appeared to be enjoyed by those taking part. People informed us they are being supported by the activities coordinator to complete 'This Is Me' booklets to record their personal history and things important to them. Individuals told us they were happy at the service, and they can do '*what we want to do*'. They advised they would feel comfortable raising any concerns with any member of staff, and both management and staff are approachable.

People are supported with their health by care staff who appear to know them well, which helps people feel understood and respected. We saw evidence of discussions with district nurses, and referrals to health specialists when required. Professionals told us care staff are '*warm and knowledgeable*' about the people they support. This helps ensure changes in people's health are identified and responded to appropriately, reducing the risk of deterioration and promoting positive outcomes.

Relatives we spoke with told us they feel their loved ones are safe, and they no longer worry about them. They told us they are always made to feel welcome by care staff and managers. People were seen to have strong, positive relationships within their friendship groups, and care staff were observed offering appropriate encouragement and support. People live in accommodation which meets their needs. The service prioritises well-being when evaluating whether the accommodation meets a person's needs and will request nursing assessments where needed.

There are systems in place for protecting people from harm or abuse. However, safeguarding refresher training requires further attention to ensure all staff maintain up-to-date knowledge. Addressing this will help strengthen staff confidence and ensure people continue to feel safe and protected.



Care & Support

Requires Improvement

People benefit from warm, caring and respectful interactions with care staff. We observed individuals receiving reassurance and meaningful support from care staff. People told us they have a good rapport with staff.

Improvements are required to people's personal plans to ensure information is detailed, consistent and kept up to date. Personal plans we read do not consistently provide sufficient, clear and up-to-date information to guide staff in delivering care and support, which meets individual needs and personal outcomes. This means care is not always planned or reviewed in a way which fully reflects what is important to people or how they wish to be supported. Where people and their representatives have been involved in discussions about care, this is not always clearly recorded, which limits assurance care provided is consistently person-centred. We informed the Responsible Individual (RI) this is an area for improvement, and we will follow up at the next inspection.

There is a safeguarding policy in place at the service, and care staff understand their whistleblowing responsibilities. However, care staff are not always able to demonstrate their understanding of safeguarding practice, and this will be addressed further under Leadership & Management. To ensure people's liberty is protected in line with their best interests and legislation further understanding around Deprivation of Liberty Safeguards (DoLS) is needed for staff at all levels.

People receive their medication safely. The service has a comprehensive medication policy in place. Medicines are stored securely and administered as prescribed. Medication reviews are undertaken with external health professionals. Following our inspection, the provider is strengthening medication documentation and introducing external audits, which will help improve consistency and oversight.

People are protected as far as possible from the risk of infection. The service is maintained in a clean and hygienic condition, and domestic staff follow an established cleaning schedule. Care staff have access to appropriate personal protective equipment and demonstrate a general understanding of infection prevention control measures. Clinical waste is disposed of correctly. The kitchen has a Food Hygiene Rating Scheme score of 3, indicating hygiene standards are 'generally satisfactory'. Kitchen staff we spoke with, demonstrated a good understanding of people's dietary needs and expressed a commitment to improving their rating at the next Food Hygiene inspection. People told us they enjoy the food provided.



Environment

Good

The environment is good at Glynbargoed Care Home. People live in a warm and welcoming environment. The service is set over two floors and is safe and secure. Efforts are made to make the service feel homely; there are many photos of people in the hallways. There are also mining photos and Welsh phrases on the walls, which people appear to enjoy. There is a communal main lounge and dining room, a smaller quiet lounge, and a dedicated visitors room, enabling people to spend time where they wish. However, the current size of the main lounge and dining room means there is limited space for all people to use these areas at the same time, should they wish. The RI has recognised this and has plans to extend the main lounge. This demonstrates a proactive approach to improving people's experiences and access to shared spaces.

The RI is also addressing general wear and tear and has an ongoing plan to continue enhancing the environment for people. The service employs a maintenance worker, and they complete regular monitoring checks and small repair or replacement jobs. Some minor repairs were noted during the inspection, and these have been addressed promptly.

The service ensures people have suitable furnishings and a recent furniture audit was undertaken by the RI, where people discussed their preferences. People's bedrooms are personalised and comfortable and contain their personal belongings. Outdoor space is safe, attractive and accessible with seating provided. People have use of a home hair salon, and a hairdresser visits weekly. People have access to equipment to support their independence. Currently some rooms are accessible with use of a stair lift. Plans are in place to install a lift in response to people's changing needs, which will further improve accessibility and promote independence.

External contractors are used to service and maintain facilities and utilities, including mobility aids, stairlifts, and the fire system. The service provider ensures the premises comply with current legislation and national guidance and all checks are up to date. Items hazardous to health are locked away. The entrance to the home is secure, and visitors announce their arrival to staff before entering.



Leadership & Management

Requires Improvement

People are supported by experienced staff they know well. Since the last inspection, staffing levels have stabilised and agency use is minimal. Care staff report they feel less pressure and are managing their workloads. Care staff feel supported by management and the team morale is generally good. Care staff advised the service currently has bedroom vacancies and they are mindful of all individuals needs being met when at full capacity as they are supporting individuals with more complex care and support needs. Management have oversight on this and advised they will continue to support people to access nursing assessments where needed. The RI is also actively trying to recruit a Team Leader for further support.

However, leadership and management systems are not yet sufficiently robust to ensure consistent oversight and sustained improvement. At the last inspection, improvements were required in relation to core training and staff supervision, and this remains an area for improvement. While some progress has been made, gaps remain in essential training, including safeguarding, and not all staff receive regular, meaningful supervision. This limits assurance staff are consistently supported, skilled and confident to meet people's needs and protect their well-being. Staff we spoke with told us they feel able to raise concerns due to an open-door approach from management. However, these discussions are not always formally documented, which reduces the effectiveness of oversight and learning.

Quality assurance processes are in place. The RI maintains oversight through quarterly monitoring visits and biannual quality-of-care reports. The RI visits the service frequently, including in the evenings to engage with night staff, and is building positive working relationships with the team. The RI is taking steps to improve the environment for people living at the service and to support an increase in bedroom occupancy. The management team appear to work well together, providing stability to the staff group. To strengthen manager and RI oversight audits undertaken require more detail and analysis.

Staff are working with a current Disclosure and Barring Service (DBS) security check and are safely recruited for their roles. Care staff are registered with the workforce regulator, Social Care Wales. New staff complete an induction and probation period to ensure their performance is satisfactory.

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
People cannot be assured care staff have clear and accurate personal plans with which to support them.	13/02/26
People are supported by staff who have not received up to date core training nor received appropriate supervision, increasing the risk of poor practice occurring.	22/01/25

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

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