Arolygiaeth Gofal Cymru
Care Inspectorate Wales

# Inspection Report

## Windsor Street

Aberdare

01685884555

www.pressltd.org

**The inspection visits for this service took place between 10/08/2026 and 20/08/2026**

## Service Information:

| | |
|---|---|
| Operated by: | Planned Support Services Ltd |
| Care Type: | Care Home Service<br>Adults Without Nursing |
| Provision for: | Care home for adults - with personal care, Provision for learning disability |
| Registered places: | 4 |
| 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 Improvement |

## Summary:

Windsor Street is located near the town of Aberdare, offering convenient access to local amenities. The service provides accommodation for up to four people, each in their own self-contained flat.

People experience good well-being outcomes. People can make choices about their day to day lives and are supported to engage in activities they enjoy. People are supported with their health needs and have good access to relevant health and social care professionals.

Care and support is good. Care documentation is person-centred, outcome focused and reflective of people's care and support needs. Care documentation is reviewed regularly and updated as required to reflect changes in needs. Risks to people's health and safety are appropriately assessed and managed.

The environment is good. People live in an environment that is suited to their needs and promotes their comfort, safety, and well-being. The home is clean, well maintained, and provides a welcoming and homely atmosphere.

Leadership and management require improvement. Care staff report feeling well-supported in their

roles and express satisfaction working at the service. Care staff have access to training to support them in meeting the needs of people; however, further improvement is required to ensure training provision is consistently effective and meets all identified needs.

# Findings:

## Well-being — Good

People are supported to live in accommodation that promotes their independence and well-being. Individual flats are personalised to reflect people's interests, preferences and achievements, helping to promote a sense of comfort and belonging. The environment is well maintained, and outdoor areas are accessible and safe, enabling people to engage in activities that support their well-being. People told us they are happy living at the service and said they feel safe and cared for.

People are safeguarded from abuse and neglect. Staff receive safeguarding training and understand their responsibilities for recognising and reporting concerns. Safeguarding policies and procedures are in place and reflect current guidance. Risks to people's health, safety and well-being are assessed, monitored and reviewed, helping to promote positive outcomes.

People benefit from positive relationships with staff who know them well and provide support in a caring and respectful manner. During our inspection, we observed warm, respectful interactions between people and staff. People receive individualised support in line with their personal plans and spoke positively about the staff who support them. One person told us, "*The staff are brilliant, I get on with all of them*." A relative *said, "I would be lost without them"* and spoke positively about the care provided to their family member.

People have opportunities to make choices and participate in activities that reflect their interests and preferences. Personalised activity plans include opportunities to access the local community. During our inspection, we saw one person being supported to attend a local café coffee morning. People are encouraged to maintain relationships with those important to them and told us they can receive visitors whenever they wish. Relatives spoke positively about communication with the service and the arrangements in place to support visiting.

People are supported to make healthy choices about food and nutrition and, where appropriate, are involved in meal planning and preparation. They are encouraged to live active and fulfilling lives and are supported to achieve personal outcomes that matter to them.

## Care & Support — Good

People receive the care and support they need to achieve their personal outcomes. Personal plans are person-centred, tailored to individual needs, and developed collaboratively with people and relevant multidisciplinary professionals. Appropriate risk assessments are in place to promote people's safety, well-being, and independence. We found care plans and risk assessments are reviewed regularly to help ensure they remain accurate, up to date, and responsive to changing needs. During the inspection, we discussed the importance of maintaining a complete audit trail of review records, as some documentation was not available for inspection. The provider acknowledged this issue and provided assurance steps would be taken to address it.

People's liberty is protected and promoted in accordance with relevant legislation and guidance. Where people lack the mental capacity to make decisions about their care and support arrangements, appropriate Deprivation of Liberty Safeguards (DoLS) authorisations are in place to ensure any restrictions are lawful and proportionate. We saw DoLs authorisations are up to date with the conditions detailed in authorisations reflected in people's personal plans. Care staff receive specific training helping to ensure they understand their responsibilities in upholding people's rights, promoting choice, and supporting decision-making.

The service provides support to people with medication needs. We observed medication is stored securely and administered in line with prescribed instructions. We identified areas where medication management arrangements could be further strengthened. These included ensuring the administration of 'as required' (PRN) medication aligns with current best practice, strengthening medication audits and making some minor amendments to the service's medication policy. These matters were discussed with the provider during the inspection. The provider acknowledged the areas identified and provided assurance that the necessary actions would be taken to address them and further strengthen medication management processes.

People are supported to maintain their health and well-being. people have timely access to healthcare services when required, and records show healthcare appointments, professional involvement, and relevant correspondence are appropriately documented. The service benefits from a stable staff team with low turnover. As a result, care staff have developed positive and trusting relationships with the people they support and have a good understanding of their individual needs, preferences, and usual presentation. This enables staff to recognise changes in a person's physical or emotional well-being at an early stage and to seek appropriate advice, support, or intervention promptly, helping to ensure people's health needs are met effectively.

## Environment

Good

Windsor Street is located near the town of Aberdare and consists of four self-contained flats which provide people with privacy and personal space. People have access to their own kitchens, bathrooms, laundry facilities and private outdoor spaces.

The environment is clean, comfortable and homely. People are supported to maintain their environment by completing general household tasks. People have personalised living spaces reflecting their interests, achievements and preferences. We saw photographs, artwork and personal belongings displayed within flats, helping create environments that are meaningful to each person.

The environment is well maintained, and appropriate measures are in place to keep people safe. Some health and safety arrangements are currently overdue, and we found no documented Legionella risk assessment. In addition, some environmental deterioration was evident, however management are already aware and committed to resolving this. We saw environmental upgrades had been made since our last inspection, including shower rooms which have been refurbished to a good standard.

We saw that fire exits are accessible; window restrictors are fitted to windows on upper floors and personal emergency evacuation plans (PEEPs) are available for each person. There appears to be adequate storage space throughout the service, and substances hazardous to health are stored securely in accordance with safety regulations.

The service ensures all visitors sign the visitors book on arrival and provide professional identification where required supporting a safe environment. Confidential information, including care records, are securely maintained, safeguarding people's privacy and ensuring confidentiality is upheld.

## Leadership & Management Requires Improvement

Care staff receive appropriate levels of support and consistently report feeling well supported by the management team. Feedback from care staff is positive, one said, *"The manager is really good, very approachable and very supportive".* Another commented, *"Ive worked here since 2018, I really enjoy it, I get supervision every three months and an annual appraisal. The manager is very supportive".* Records viewed during the inspection confirm care staff receive the required levels of formal support. This provides opportunities to reflect on their practice, discuss professional development, and identify any additional support or training needs. In addition, care staff attend regular team meetings where they can discuss operational matters, share information, and consider the needs and outcomes of the people they support.

Improvements are required to ensure care staff receive training that is relevant to the needs of the people they support. While compliance with the service's core mandatory training programme is generally satisfactory, we identified gaps in the provision of specialist training, particularly in relation to supporting people who may display behaviours that challenge. We found some people living at the service may present behaviours that challenge, and therefore it is important care staff are equipped with the knowledge and skills required to respond appropriately. We discussed this matter with the provider and identified it as an area requiring improvement. We expect the provider to take prompt action to address this shortfall and ensure staff receive training that reflects the assessed needs of the people they support.

The service operates a robust recruitment process. We reviewed a sample of staff files and found all the required pre-employment checks have been completed, helping to ensure those employed are suitable to work with vulnerable people. Following appointment, staff complete a structured induction programme to support them in developing the knowledge and competencies required for their role. Care staff are subsequently registered with Social Care Wales, the regulator for the social care workforce.

Governance arrangements are in place to help monitor service provision. The Responsible Individual (RI) visits the home regularly and engages with both people using the service and care staff. A formal quality of care review is completed every six months to evaluate the service's performance and identify opportunities for improvement. We reviewed the most recent quality of care report and found it provided a balanced overview of service strengths and areas requiring further development. However, we identified these reports could be strengthened further through the inclusion of analysis of audit findings and significant events occurring within the service. This would enhance the service's ability to demonstrate learning, identify trends, and drive continuous improvement. We discussed this with the provider, who acknowledged the benefits of this approach and provided assurance the matter would be addressed.

# 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 |
|---|---|
| We did not identify any impact on people using the service due to a breach of this regulation. However, it is important staff are suitably trained so they can provide the best possible care and support. | 18/07/23 |

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

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