Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Newton Care Home

Newton Care Home, 280-288 New Road, Porthcawl, CF36 5PL

01656 773923

The inspection visit took place on 24/04/2026

Service Information:

Operated by:	Breaksea Residential Homes Ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for learning disability, Provision for mental health
Registered places:	35
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	Requires Improvement
Care & Support	Requires Improvement
Environment	Requires Significant Improvement
Leadership & Management	Requires Significant Improvement

Summary:

Newton Care Home provides residential care services to older adults, located in the Newton area of Porthcawl.

Well-being requires improvement. People describe feeling respected, supported to make everyday choices, maintain relationships and take part in activities they enjoy. However, these positive outcomes are not consistently assured due to wider issues identified throughout the service which impact on people's well-being. Care and support require improvement. While care is person centred and people's health needs are monitored appropriately, they are not involved in reviewing and shaping their care, which limits their control and involvement. The environment requires significant improvement. While the home is comfortable and includes suitable communal spaces, significant health and safety risks have not been consistently identified or managed, and a priority action notice has been issued. Leadership and management require significant improvement. While some oversight arrangements are in place, issues in governance, staffing, and leadership mean people cannot be fully assured the service is managed effectively. A priority action notice has been issued in relation to the manager not being properly qualified or registered.

Findings:

Well-being — Requires Improvement

Well-being requires improvement because, although people can experience positive day-to-day outcomes, this is not consistently assured due to wider issues identified in other areas of the service which impact on people's well-being. People report they feel well looked after. They speak positively about care staff, describing them as kind, respectful and approachable, and say they can "*be themselves*" around staff. People feel able to raise concerns and are aware of who to speak to. Care staff support people to make everyday choices, including what they eat, when they go to bed and how they spend their time. People personalise their bedrooms, which helps them maintain their identity and feel at home. Mealtimes are calm and unrushed, with care staff supporting people and promoting independence using adaptive equipment where required. Food is well presented, with choice available and alternatives offered, which supports people's health and enjoyment.

There are arrangements in place to support people's safety. We were told people feel comfortable speaking with care staff if they have concerns. Relationships between people and care staff appear positive and respectful. Visitors attend freely, and people describe continued involvement from family members, which supports emotional wellbeing and reassurance. Health issues are reported in a timely manner, with professional feedback advising the service appropriately follows advice. These arrangements help people feel supported.

People are supported to maintain relationships and take part in activities which are meaningful to them. They speak positively about their relationships with care staff and other people living at the service, and about regular contact with family members. A range of activities take place, including crafts, quizzes, sing along sessions, visiting entertainers and accessing the local tuk tuk bike service. An enthusiastic and committed activity coordinator is in post, with people providing positive feedback about activities. Care staff also support social interaction during everyday routines, such as mealtimes, which helps promote a sense of community and belonging. While the Welsh Active Offer is not provided, some Welsh words are used by staff in daily interactions with people.

People live in an environment which supports their needs. The home is welcoming, with care staff and management described as approachable and open to feedback. Communal areas and dining spaces support social interaction and provide a pleasant environment for people to spend time in. The service demonstrates a willingness to respond when concerns are raised, which helps to support people's overall experience.

Care & Support — Requires Improvement

Care and support require improvement because, while people do receive kind and supportive care, they are not consistently involved in reviewing and shaping their own care and support. A new care planning system has been put in place. People's plans are person centred and outcome focused. They cover a wide range of needs, including health, mobility, personal care, nutrition, and emotional wellbeing, and are kept under regular review. However, improvements are required because people, or their representatives, are not involved in reviews of these. Reviews rely on updates from care staff rather than meaningful consultation with people or their representatives. This means people are not always involved in shaping their care and support or reflecting changing wishes and outcomes. We have advised this is an area for improvement and expect the provider to take timely action to address. Daily records and monitoring charts are completed and generally show care is delivered in line with what is planned. Care staff demonstrate good knowledge of people's routines and preferences, which supports continuity of care. People appear well cared for, with positive and responsive interactions observed. We saw several outstanding examples of staff interactions, which helps promote people's comfort and emotional wellbeing. People's health needs are monitored, and access to health professionals is timely. Records show advice and recommendations are usually followed, which helps maintain people's health and wellbeing.

Safeguarding systems are in place. People have risk assessments for a range of needs. These provide guidance for care staff to support people safely. Incidents are recorded, and actions taken in response are documented. Care staff understand safeguarding processes and how to raise concerns. The service works with external agencies when concerns are identified, helping protect people.

Medication management arrangements help support people to receive their prescribed medication. Medication is stored securely, and temperature checks are completed to help ensure medicines remain safe. Medication audits are undertaken, which supports oversight of practice. PRN 'as needed' medication records include reasons for administration and outcomes. External pharmacy support is in place and provides additional guidance and assurance. These arrangements help reduce the risk of medicines-related harm.

The service uses a range of infection prevention and control arrangements. The service responded to a recent issue by working with external professionals. We saw personal protective equipment and cleaning supplies available throughout the service, supporting care delivery. Additional monitoring activity has recently been introduced to strengthen oversight and ensure standards are maintained. These actions help manage the risk of infection and support people's health and wellbeing.

Environment

Requires Significant Improvement

The environment requires significant improvement because health and safety risks are not consistently identified, monitored or reduced. The service reflects the description within the Statement of Purpose, and most areas are accessible and appropriately laid out for the people living at the service. Communal and dining areas are available and support people to gather and engage with others. A courtyard outdoor space is in place, with seating for use by people in the nicer weather. Bedrooms are personalised and comfortable, many with ensuite facilities. There are suitable bathroom facilities throughout. Fire exits are clear, temperature levels throughout the home are comfortable, and personal information is stored securely. The service is developing a structured approach to maintenance, having in place a repair list overseen by the operations manager, which supports oversight of day-to-day issues. Maintenance records confirm utilities are being serviced and maintained.

Outcomes for people require significant improvement because not all risks to health and safety are identified and reduced so far as reasonably practicable. Multiple environmental risks were found to be present across the service which place people at risk of harm. These include unsecured wardrobes in numerous bedrooms, posing a risk of injury if they fall. We saw several wheelchairs missing footplates, which presents a significant risk to people's safety. Laundry storage arrangements do not consistently support effective infection prevention, as bedding and towels are stored in an unsuitable external area. The fire risk assessment has not been completed by a 'competent person' and does not contain a robust analysis for a high-risk care setting, which limits assurance fire risks are fully understood and managed. We found a variety of concerns with damaged fixtures and fittings, which reduces assurance the environment is safe and well maintained. These issues are compounded by inconsistent oversight of environmental risks, where hazards such as unsecured storage rooms are not always identified or addressed promptly. We have advised we have issued a priority action notice, with immediate action required to ensure risks are reduced and robust systems are in place to maintain a safe environment for people. We note the Responsible Individual (RI) has already begun taking steps to address this immediately following the inspection visit.

Leadership & Management

Requires Significant Improvement

Leadership and management require significant improvement. Some important governance arrangements are in place and provide a level of oversight. The RI undertakes regular visits to the service as required by regulation, with records evidencing observations of care, staffing and the environment. Some quality monitoring activity is evident, including medication audits, food safety and kitchen checks, and the recent introduction of additional bedroom checks. A maintenance file is in place, and incidents are recorded with actions noted. A detailed business continuity plan is available, demonstrating awareness of service risks and continuity arrangements. Improvements are required because the RI has not provided a clear and analytical review of the service as part of the six-monthly quality of care review process, including actions for improvement. Documentation seen does not provide meaningful analysis of quality, leadership or learning, and therefore does not support effective service improvement. This means there is limited oversight of how well the service is operating. This is an area for improvement, and we expect the service provider to take timely action. Notifications to the regulator are not always submitted and we found significant delays where notifications are made. This reduces transparency and prevents effective external oversight of the service. This is an area for improvement, and the provider is expected to take timely action to address.

Some staffing arrangements support the day-to-day running of the service. Induction processes are in place, including shadowing and the use of recognised frameworks for new or inexperienced staff. Team meetings take place and provide opportunities to discuss service issues and expectations. Care staff report positive relationships within teams and feel supported by colleagues. However, outcomes for people require improvement because staff are not consistently supported to deliver safe and effective care. Not all care staff are registered with Social Care Wales, the workforce regulator, with a significant proportion of staff not registered. This means people cannot be assured staff meet the required professional standards. This is an area for improvement, and the provider is expected to take timely action to address. Not all care staff have completed core training relevant to their roles, and significant numbers of staff have out of date training across key areas. In addition, many staff have not received regular supervision or appraisal. This limits the provider's ability to ensure staff are competent, supported and delivering care safely. This is an area for improvement, and we expect the provider to take timely action. Leadership arrangements are not sufficient to ensure safe and effective management of the service. The manager has not completed the required management qualification and is not registered with Social Care Wales. We have highlighted this is an area for improvement at previous inspections but is not yet addressed. People cannot be assured therefore the service is managed by a suitably qualified and competent individual. We have advised we have issued a priority action notice, with immediate action required to ensure the service is led by a properly qualified and registered manager.

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 or their representatives are not involved in reviews of personal plans, therefore are not able to have a say and contribute to how their care and support is provided.	24/04/26
The Responsible Individual has not prepared a report which assesses the standard of care and support provided, with recommendations for the improvement of the service. People's well-being may be impacted upon without the correct oversight and reporting.	24/04/26
Notifications to CIW have not always been made consistently, and those that have, have been subject to significant delays. People's well-being may be impacted where the regulator is not notified of events at the service, impacting on regulatory oversight of the service.	24/04/26
Not all care staff are registered with the workforce regulator, Social Care Wales, therefore people's well-being may be impacted by having staff work who do not meet the requirements of being 'fit' to work at the service.	24/04/26
Not all care staff have received core training appropriate to the work to be performed by them, nor appropriate supervision and appraisal, therefore people's well-being may be impacted upon by being supported by staff without appropriate training or have not received the required formal supervision, potentially increasing the likelihood of incidents occurring.	24/04/26

Summary of areas for Priority Action	Date identified

The service provider has not ensured that all risks to the health and safety of individuals are identified and reduced so far as reasonably practicable. People's well-being is at risk if areas of health and safety are not addressed, and if systems are not in place to maintain adequate oversight of this.	24/04/26
People's well-being may be at risk as the manager is not qualified nor registered with Social Care Wales as an adult care home manager.	09/05/24