Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Meadowlands

Meadowlands Care Home, Abernant Road, Aberdare, CF44 0PY

01685879292

https://www.hc-one.co.uk

The inspection visit took place on 22/04/2026

Service Information:

Operated by:	HC-One Limited
Care Type:	Care Home Service Adults With Nursing
Provision for:	Care home for adults - with nursing, Care home for adults - with personal care, Provision for mental health
Registered places:	52
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:

Meadowlands is a care home in Aberdare, providing care and support for up to 52 people. The home provides accommodation for people who require nursing or residential care and support. There is a particular focus on supporting people with dementia.

People's well-being outcomes are excellent. The service demonstrates a strong, embedded culture that promotes quality of life, emotional well-being and meaningful engagement. Practice in this area significantly exceeds expectations and is enhanced by innovative and research-informed dementia care.

Care and support is good, with people's experiences being positive. People receive effective, kind and responsive care. There are reliable systems in place for safeguarding, medication management, and infection control.

The physical environment is good. It is safe and designed to support the needs of people who live there.

The leadership and management at the service is good. Care staff have the correct training,

recruitment practices are effective, and governance and oversight systems are in place to support the running of the service.

Findings:

Well-being — Excellent

People experience excellent outcomes because care staff provide highly effective, creative, and person-centred support that significantly enhances quality of life. There is a strong and embedded culture of promoting meaningful activity, choice, and inclusion. The development of the well-being coordinator role since the last inspection has improved significantly the activities that are available to people. We saw care staff supporting people to be involved in a St George's Day celebration and a family member told us that the national tea day event the day before had been *"outstanding".* We observed people taking part in a Namaste sensory session. People respond positively to the environment, with one person interacting animatedly with sensory objects and others choosing freely how long to participate. Care staff respect people's autonomy and support individual choice. Families are encouraged to contribute to events such as a church service that we observed taking place. This inclusive approach strengthens relationships and ensures people remain connected to those important to them.

The service demonstrates strength in dementia care practice. The dementia coordinator uses research-based approaches to inform care delivery. "Remembering Together" booklets provide detailed insight into people's lives, preferences and relationships. Care staff use this information well to promote identity, dignity and emotional well-being. Additional prompts, such as information displayed outside bedrooms, enable staff to initiate meaningful conversations and build relationships. We heard how distress during personal care was reduced as care staff have a lot more knowledge of individual people and this enables more positive interactions. People benefit from meaningful engagement, such as rediscovering communication through music. Care staff show genuine motivation to understand people and improve how they support them.

People have extensive opportunities to engage throughout the environment. Activity stations, sensory resources and themed areas encourage interaction and stimulation. Care staff ensure people who are less mobile or are cared for predominantly in their rooms are equally included through consistent one-to-one engagement. This results in positive outcomes for people who may otherwise be isolated.

The service promotes community links and personalised experiences. Care staff support people to achieve individual wishes through initiatives such as the 'wish tree', enabling trips to the beach, sporting events and family activities. Community connections with local groups further enhance people's social well-being. People's voices shape the service. Regular resident and relative meetings result in tangible improvements, such as enhancements to the garden area. Families report significant improvements in their relatives' well-being. People exercise meaningful choice in daily routines, including getting up times and meals. The meal experience is positive, with good

quality food and choice supported through visual options. Professionals and families consistently report that people appear relaxed, content and well supported.

Care & Support — Good

People receive consistently good quality care and support. Care staff understand people well and deliver care in a dignified, respectful and responsive manner. We observed staff interacting warmly with people and responding promptly to their needs. Families said that *'if you ask staff for anything they will respond'*. The environment remains calm, with minimal use of call bells, indicating staff presence is effective. Feedback from families is positive. They describe care as *"excellent, top class"* and consistently report confidence in staff. The service uses an electronic care planning system that enables care staff to access personal plans and risk assessments promptly. The personal plans we reviewed were detailed with associated risk assessments that inform safe care delivery. Daily records demonstrate that care staff follow care plans in practice. This ensures people receive the right care at the right time. Families appreciated being kept well informed of any changes regarding their loved ones care.

The service demonstrates a good understanding of Deprivation of Liberty Safeguards (DoLS). Applications are submitted appropriately, and there is evidence that conditions attached to authorisations are followed in practice. Care staff show awareness of any restrictions and support people in a way that is least restrictive while maintaining safety. This helps ensure people's rights are upheld and that care is delivered lawfully and proportionately.

The service demonstrates appropriate safeguarding arrangements. Staff show a good understanding of safeguarding procedures and are able to describe how they would recognise and report concerns. Training is in place to support staff knowledge, and this is reflected in practice. Where concerns arise, appropriate referrals are made and there is evidence of management oversight. This helps ensure people are protected from harm and that concerns are managed in line with procedures.

People benefit from effective multi-disciplinary working. We saw referrals made to external professionals, including speech and language therapy and advanced nurse practitioners. There is clear evidence of collaborative working with healthcare services and pharmacy professionals. This ensures people receive appropriate and timely support for their health needs.

Medication management systems are safe and well organised. There are clear processes for the ordering, storage, administration and disposal of medicines. Controlled drugs are managed in line with legal requirements. These arrangements help ensure people receive their medicines safely and as prescribed. Infection prevention and control is managed effectively. An infection control policy guides staff practice, including the management of outbreaks. Personal Protective Equipment (PPE) is readily available and used appropriately. Cleaning schedules are in place and followed, and the laundry system is well organised to reduce risks. These measures help protect people's health and well-being.

Environment — Good

The service creates a positive first impression. The grounds are well maintained, and there is ample parking, including electric vehicle charging points. Approaching the home feels organised and welcoming. The entrance foyer is inviting and informative, with photographs, memory books and displays that reflect daily life. This effectively reassures people, families and visitors and helps them feel connected to the home.

People live in a safe, welcoming and homely environment that meets their needs and supports their well-being. The home is clean, comfortable and well maintained. There is a homely feel and the environment does not feel clinical or institutional.

The provider has designed the environment to support people's comfort and engagement. The home is arranged over two floors, both of which offer light, bright and inviting communal areas. Each floor includes lounge and dining spaces, which people use to socialise and spend time together. The provider demonstrates a good understanding of dementia-friendly design, for example by using contrasting colours to support orientation.

People personalise their bedrooms with their own belongings, which helps them feel settled and at home. The provider equips bathrooms and toilets with appropriate specialist equipment to promote people's safety, dignity and independence. A lift provides reliable access to the first floor, ensuring people with mobility needs can move around the home.

The provider ensures people can safely access outdoor space. There is level access to a large garden area, which has been recently repaved to improve safety and accessibility. The garden is pleasant, secure and suitable for people to use. There is potential to further develop this space to maximise opportunities for people's well-being.

The provider has effective systems to maintain the environment and manage risks. Dedicated maintenance staff carry out servicing, repairs and routine environmental checks in line with agreed schedules. The provider also uses suitably qualified and competent external contractors to complete specialist checks. Planned refurbishment of bedrooms and high-use areas demonstrates a proactive and ongoing approach to maintaining and improving the environment.
Staff maintain good standards of cleanliness and hygiene throughout the home. Communal areas, bedrooms, the kitchen and laundry are clean, organised and well managed. The service holds a Food Standards Agency rating of 5, demonstrating very good food hygiene standards.

The provider has suitable arrangements to keep people safe within the environment. Staff complete regular fire safety checks and receive appropriate training. People have Personal Emergency Evacuation Plans (PEEPs), which staff follow to support them in an emergency. The provider supports effective infection prevention and control, with sufficient supplies of personal protective

equipment available. Secure access arrangements, including controlled entry and visitor sign-in procedures, help to protect people.

Leadership & Management — Good

The service benefits from effective leadership and a positive, supportive culture. Care staff spoke positively about the recent appointment of the Manager. They described the Manager as *"approachable, visible and hands-on"*. Staff said they *"feel valued"*, morale has improved, and they feel well supported in their roles. The Manager sets clear expectations for the standard of care provided and communicates these consistently to staff. We observed that practice issues are addressed promptly and appropriately, which supports accountability and ongoing improvement.

The provider follows safe recruitment and induction processes. Staff are appropriately vetted and receive structured support when starting their roles. The training offered is comprehensive and compliance is good. Care staff told us training prepares them well to carry out their responsibilities. The service supports effective dementia care through dedicated roles and targeted training. Care staff and nurses maintain required professional registrations, including Social Care Wales registration and the Nursing and Midwifery Council, which supports safe and competent practice. The provider has established a stable staff team, reducing reliance on agency staff and promoting continuity of care.

The provider has effective communication systems. Daily 'flash' meetings ensure key information is shared between departments, including clinical updates and operational matters. This supports coordinated, consistent and informed care delivery. Governance arrangements are strong and support the delivery of safe, good-quality care. Managers carry out regular audits and quality assurance activities, which effectively identify areas for improvement and help maintain standards. Systems for monitoring and reviewing falls demonstrate good oversight, analysis and shared learning across the service.

The provider actively seeks feedback from people and their families through meetings and online platforms. The Responsible Individual (RI) visits in line with regulatory requirements and completes quarterly reports to support oversight. The RI also completes six-monthly quality of care reviews, which help ensure standards are maintained and people's views inform service development.

The service has clear and accessible policies and procedures, which provide staff with practical guidance. Complaints arrangements are well established, and people and families understand how to raise concerns or provide feedback. Families told us communication with the management team is good and that they feel well informed. These arrangements promote transparency, accountability and an open culture, which supports people's safety, well-being and confidence in the service.

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.