Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Peniel Green Care Home

Peniel Green Care Home, 216 Peniel Green Road, Peniel Green, Swansea, SA7 9BD

01792773034

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

The inspection visit took place on 07/07/2026

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:	34
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 Good



Environment Good



Leadership & Management Requires Improvement

Summary:

Peniel Green Care Home is a care home providing accommodation, personal care and nursing care for up to 34 people. The home is situated in Peniel Green, Swansea, with access to local amenities, community resources and opportunities for people to maintain connections with the local area. People also benefit from access to secure outdoor spaces and a range of activities and community engagement opportunities. Based on our findings, we have rated Well-being as Good, Care and Support as Good, Environment as Good, and Leadership and Management as Requires Improvement.

During our inspection, we found people were supported by a caring and committed staff team who knew them well and promote their well-being and independence. People and relatives spoke positively about the home, describing it as welcoming and homely. Feedback demonstrates people are listened to and are able to influence aspects of daily life, including activities and food provision. We saw positive interactions between staff and people throughout the inspection and found people are supported to access healthcare services when required.

The home is generally clean, comfortable and well maintained. However, our review of care records identified that care plans, risk assessments and daily recordings do not always fully reflect people's current needs or consistently evidence the care and support provided. Whilst we did not find evidence that people are receiving unsafe care, improvements are needed to strengthen care planning and recording systems. An Area for Improvement (AFI) was identified within Care and

Support.

Leadership arrangements have supported improvements in several areas, including staff training and development. However, governance and quality assurance systems do not always effectively identify or address issues relating to care records, recruitment documentation and oversight of quality assurance processes. An AFI was identified within Leadership and Management, and this theme is rated as Requires Improvement.

Findings:

Well-being — Good

People experience positive outcomes because they are supported to exercise choice and control over their daily lives and maintain their independence. People appeared comfortable, relaxed and at ease in their surroundings. We observed respectful interactions between people and staff throughout the home. Staff took time to engage with people in a patient manner and demonstrated a good understanding of their preferences, and individual needs.

People are treated with dignity and respect and are supported by staff who know them well. People and their relatives consistently provided positive feedback regarding the care and support they receive. One relative told us, *"Staff are brilliant, everyone I have met has been lovely,"* whilst another described the home as *"very homely."* Feedback from relatives indicate they feel welcomed by the service and are confident staff treat people with kindness and consideration. Throughout the inspection we saw staff speaking respectfully with people and responding promptly when assistance or reassurance was required.

People maintain relationships and participate in activities that are meaningful to them. The service provides opportunities for people to engage in activities both within the home and the local community. People told us they enjoy the range of events available and value opportunities to spend time with relatives, friends and other people living at the home. Relatives confirmed they could visit at times that suit them and described the home as welcoming and inclusive. We observed visitors spending time with people both indoors and in outdoor areas during the inspection.

People's views are sought and acted upon, helping them influence the way the service is run. We found good examples of people being involved in decisions affecting their daily lives. People told us they had raised concerns about meal choices through residents' meetings and felt their views had been listened to and acted upon. Two people spoke enthusiastically about their campaign to improve the lunchtime meal and told us changes had been made following feedback from people. They explained that having successfully influenced lunch options, their next aim is to improve the choice available at teatime. This demonstrates people feel confident expressing their views and that the service responds to feedback provided. The example also showed people are actively involved in shaping their environment and experiences within the home.

People benefit from living in a home where their well-being is promoted through positive relationships, meaningful engagement and opportunities to influence decisions. Feedback from people, relatives and our observations throughout the inspection provided assurance that people are listened to, treated with respect and supported to achieve positive outcomes. Overall, we found

people experience good outcomes because they are supported by caring staff who promote their dignity, independence and quality of life.

Care & Support — Good

People receive care and support from staff who know them well and understand their individual needs, preferences and routines. Throughout the inspection, we observed positive interactions between people and staff. Staff provided support in a kind, and respectful manner and took time to respond to people's requests and preferences.

People appeared comfortable in the presence of staff and were observed receiving support in a way that promoted their dignity and independence. Relatives consistently spoke positively about the care provided. One relative told us, *"They look after her very well,"* whilst another said, *"I can't fault them."* These comments reflect the positive experiences shared by people and families during the inspection.

People are supported to maintain their health, well-being and personal outcomes. Records demonstrate involvement from a range of healthcare professionals, including GPs, community nurses and specialist services. We saw evidence that referrals are made when required and that professional guidance is incorporated into the support provided. Staff were able to explain how they monitor people's health and recognise changes which may require additional support or medical intervention. Relatives told us they are kept informed about significant changes in their family member's health and are confident concerns will be acted upon appropriately. This provides assurance that people receive support to access healthcare services and maintain their health and well-being.

People benefit from care and support that is responsive to their needs and delivered by staff who understand them as individuals. Staff we spoke with demonstrated a good knowledge of the people they support and were able to describe individual preferences, and the support required to achieve positive outcomes.

We reviewed a sample of care plans, risk assessments, medication records and daily records. Whilst care plans generally reflect people's assessed needs and provide guidance for staff, we identified areas where documentation requires strengthening. Care plans, risk assessments and daily records do not always provide a clear and accurate reflection of people's current needs, outcomes and the support provided. In some cases, information lacked sufficient detail, records had not been updated promptly, or daily recordings do not consistently demonstrate how care and support has been delivered. We also found some risk assessments do not fully reflect identified risks or provide sufficiently detailed guidance to support consistent care delivery.

Overall, people receive care and support from a caring and knowledgeable staff team who understand their needs and are committed to promoting positive outcomes. Our observations, discussions with people and feedback from relatives provided assurance that people were receiving the care they required. However, outcomes for people require improvement because care

plans, risk assessments and daily records do not always fully reflect people's current needs or clearly demonstrate the care and support provided. We expect the provider to make improvements and will follow this up at the next inspection. An Area for Improvement (AFI) has been identified in relation to the provider's arrangements for maintaining accurate and up-to-date care plans, risk assessments and care records.



Environment

Good

People live in an environment that promotes their safety, wellbeing and independence. We found the home to be comfortable, welcoming and generally well maintained. People moved freely around the service throughout the inspection and were observed using communal areas, spending time with visitors and accessing outdoor spaces. Bedrooms are personalised and communal areas are suitably furnished to support people's needs.

People benefit from premises and facilities that are suitable for the service provided. The home offers a range of communal areas where people can socialise, participate in activities or spend time quietly. People and visitors were observed using both indoor and outdoor spaces during the inspection. Management had identified opportunities to further enhance the outdoor environment. The garden room was temporarily being used for storage following a recent event and therefore was not being used to its full potential at the time of our visit. The small lounge was also observed to be underutilised at the time of the inspection. The provider acknowledged this and outlined plans to make better use of the space to support people's social engagement and choice of communal areas.

People are supported in an environment where risks to health and safety are identified and managed. We reviewed maintenance and safety records and found appropriate arrangements are in place to service and monitor equipment and premises. Records demonstrate that checks relating to gas safety, electrical installations, portable electrical appliances, water safety, emergency lighting, fire equipment and lifting equipment had been completed within required timescales. Fire safety arrangements are well organised, hoist and sling checks were available, and substances hazardous to health are stored securely. People benefit from arrangements that promote their health and wellbeing through the safe preparation and handling of food. The service holds a Food Standards Agency food hygiene rating of 5, indicating very good standards of food hygiene

People benefit from effective arrangements for the maintenance of the environment and equipment. The maintenance person demonstrated a clear understanding of their role and responsibilities and described effective systems for identifying, prioritising and responding to maintenance issues. Essential replacement equipment, including spare mattresses, slings and cushions, are available to ensure equipment can be replaced promptly when required.

Overall, we found the service to provide a safe, comfortable and suitable environment for people. Whilst the inspection identified some minor issues, including clutter within one communal area that reduced available space and created a potential trip hazard, these had not significantly impacted on people's experiences of the service. We therefore found that people generally benefit from an environment that supports their wellbeing and promotes their safety.

Leadership & Management Requires Improvement

People are supported by a management team that is committed to promoting their well-being and delivering person-centred care. Staff spoke positively about the support they receive from the manager and described them as approachable and available to provide advice and guidance. Staff told us they receive regular supervision and appraisal and have opportunities to contribute to the development of the service through meetings and day-to-day discussions. Throughout the inspection, managers and staff demonstrated a commitment to supporting people and maintaining a welcoming and homely environment.

People benefit from staff who are supported to develop the knowledge and skills required for their role. We found arrangements are in place for staff induction, mandatory training, supervision and competency assessments. Training compliance is generally good, and staff are knowledgeable about the people they support. Staff described positive working relationships within the team and told us they feel supported to carry out their responsibilities. These arrangements help promote consistency of care and support for people living at the service.

People receive care and support from a service where effective leadership, governance and quality assurance arrangements are in place to monitor quality, drive improvement and ensure compliance with regulatory requirements. The provider has established systems to monitor the quality and safety of the service, including audits and oversight visits completed by the Responsible Individual (RI). However, we found governance and oversight arrangements are not always effective in identifying, monitoring and addressing areas requiring improvement. This is evidenced by care planning and risk assessment documentation needing strengthening, and shortfalls in the monitoring of Disclosure and Barring Service (DBS) renewals and limited evidence that quality assurance actions were consistently followed through to completion.

During the inspection, we identified care planning and risk assessment records that do not always fully reflect people's current needs and the support provided. These issues had not been identified through existing auditing processes. We also found a number of staff DBS checks had expired and, whilst risk assessments were implemented during the inspection whilst renewal applications were progressed, this demonstrated weaknesses in governance arrangements for monitoring recruitment records. Furthermore, we are not fully assured that actions arising from quality assurance activities are consistently monitored and reviewed to ensure completion. We found RI quality assurance reports are largely descriptive and do not consistently demonstrate evaluation of service quality or the impact of improvement actions on outcomes for people.

Overall, we found a committed management team and a workforce that felt valued and supported. However, improvements are required to strengthen governance and quality assurance

arrangements to ensure issues are identified promptly, monitored effectively and addressed without delay. An Area for Improvement (AFI) has been identified in relation to the effectiveness of the provider's quality assurance and oversight arrangements. This is because governance systems are not always effective in identifying and addressing the issues found during this inspection.

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
Outcomes for people require improvement because care plans, risk assessments and daily records do not always fully reflect people's current needs or clearly demonstrate the care and support provided.	07/07/26
The provider must strengthen governance and quality assurance arrangements to ensure systems effectively identify, monitor and address areas requiring improvement, including care planning, risk assessment documentation, recruitment records and the completion of quality assurance actions.	07/07/26

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

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