



Plas Cwm Carw Care Home



Plas Cwm Carw Care Home, Oakwood Lane, Port Talbot, SA13 1DF



01639 890224



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

The inspection visits for this service took place between 25/09/2025 and 03/10/2025

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:	66
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

Requires Improvement



Care & Support

Requires Significant Improvement



Environment

Good



Leadership & Management

Requires Significant Improvement

Summary:

Plas Cwm Carw Care Home is in the centre of Port Talbot close to shops and other amenities. People feel happy in the home, where their individuality is respected. They enjoy positive interactions with care staff, although inconsistencies in practice can affect daily experiences and compromise people's health, safety and well-being. This requires improvement.

People do not consistently receive appropriate care and support from skilled and knowledgeable staff. This is putting people at risk of harm and requires significant improvement. Practices in relation to medication management and infection prevention and control also need to improve.

The home has good facilities to support people's needs and daily routines. The building is secure and in a good overall state of repair. Work is underway to install suitable locks on bathroom facilities and eliminate environmental hazards where possible, which must continue.

The management of the service requires significant improvement. The service has not had consistent leadership, which has impacted negatively on the working culture, standards of practice and service development. The staff induction, supervision and appraisal process also requires improvement. Interim managers are fully committed to addressing these issues. CIW is currently processing an application in respect of a change of Responsible Individual (RI).

Findings:



Well-being

Requires Improvement

People are mostly content in their home. Care staff respect people's wishes and support them to make daily decisions. Personal plans identify people's views and preferences, although these must be captured during routine reviews to ensure plans remain suitable. People are satisfied with the care they receive and have access to medical and specialist services to promote their health and well-being. However, infection control and medication procedures need improvement. Care staff support people's hygiene needs effectively and maintain good-quality records in relation to this. People told us *"It's fine here... I like it"* and *"Quite happy... nothing they can do any better"*. The home is secure and appropriately maintained. It has good facilities to support individual routines.

People are being put at risk of harm as care staff do not always understand their individual needs or deliver care in line with personal plans. Significant improvements are needed in relation to care planning and handover procedures, the staffing skill mix and systems of audit. Managers must also ensure staff receive effective support to undertake their roles. Staff know how to report concerns regarding people's welfare and are confident managers would take these seriously. Managers reflect on safeguarding concerns with the staff team to support practice developments.

People enjoy socialising at mealtimes. The service has a new seasonal menu which caters for a wide range of dietary preferences. Requests for alternative meals are also accommodated. We saw foods of various textures being served in an appetising way. People enjoy their meals and are encouraged to eat well. One person said, *"Oh, it's lovely!"* during their lunchtime meal.

The service hosts many group activities and events, including themed parties, coffee afternoons, pottery classes and live entertainment. These provide stimulation and help people build friendships while having fun together. However, there is scope to further develop the home's approach to activities. The recorded activities each person undertakes varies significantly and there is limited evidence that people enjoy regular outings and access to the local community, as set out in the home's statement of purpose. This is a key document explaining what the service aims to provide and how. A relative also told us *"They promised outings, but they rarely go out"*.

People value their relationships with staff. Feedback we received includes *"Staff are good, they are friendly"* and *"They're good as gold, they really are. I like them all"*. However, staffing pressures are affecting the quality and continuity of care people experience and people do not have a named nurse or key worker, as referenced in the home's statement of purpose. Staff morale is also low due to inconsistencies in management. A relative said, *"Big turnover of management... Morale is on the floor; they're under so much pressure"*. Interim managers are working hard to recruit to staff

vacancies, assign staff to designated communities, boost morale and improve the working culture.



Care & Support

Requires Significant Improvement

People are not consistently cared for in a way that supports their health, safety and well-being. Standards of care and support require significant improvement because care staff do not always know how to effectively manage risks and support people in line with personal plans. We observed people to be at increased risk of choking as care staff failed to follow nutrition and hydration plans. Care staff told us they do not receive a verbal handover at the start of their shift and do not always know the people they are caring for. These issues have led to safeguarding intervention to protect people from harm. The service has recently implemented an electronic care planning and recording system, although inconsistencies in practice have resulted in delayed medical tests and poor-quality records regarding some care intervention. Some personal plans also lack detail and contain inaccuracies, meaning care staff may not have access to the guidance they need to support people safely. We have therefore issued a Priority Action Notice, and the provider must take immediate action to address these issues.

The service makes appropriate referrals to health services where people require additional input and advice from specialists. These include GPs, Occupational Therapists, the local mental health team and Speech and Language Therapy (SALT) team. The service also holds daily 'flash meetings', giving senior staff the opportunity to share updates and essential information about events within the home and any changes to people's health and well-being. Records show that people consistently receive their prescribed medicines, which are stored securely and kept under review. However, medication stocks are not always recorded accurately, and the required improvements are not made following internal audits. Medication systems therefore require improvement to ensure people benefit from a timely supply of medication and effective systems of audit. We expect the provider to make these improvements.

The service is working closely with health protection officers to improve standards of hygiene and infection control. We found communal and private rooms to be generally clean and hygienic. We observed staff using and disposing of personal protective equipment (PPE) correctly when undertaking personal care and cleaning duties. However, we found some beds and mattresses to be soiled despite regular checks taking place. Some equipment was also being stored in bathroom facilities. These issues require improvement to reduce infection risks, and we expect the provider to take action. The service was awarded a food hygiene rating of 3 (generally satisfactory) in March 2025. A manager told us the company has completed a full catering audit to address any food safety issues and improve the overall dining experience.



Environment

Good

The premises is safe and secure. Internal keypads are also in place to prevent people accessing private and hazardous areas without the necessary support and supervision. Call bells and sensor equipment allow care staff to monitor people's movement and help keep them safe, in line with personal plans. We tested a sample of safety equipment and found it to be working correctly. We also saw that windows above ground level are restricted to reduce the risk of significant falls. Records show that a fire risk assessment was carried out by an independent company in February 2025. The acting RI assured us all recommended actions have been completed. Fire safety checks are carried out routinely and specialist equipment is serviced and inspected as recommended.

The home has four separate communities across two floors where people with similar care needs are supported. People reside in their designated communities, although may spend time in other areas for activities and events. Each community has its own communal space, dining area and bathing facilities plus quieter areas where people can relax. Some bathroom facilities require improvement because they are not fitted with suitable locks, which may compromise people's safety, privacy and dignity. We also observed in some ensembles and communal bathrooms several loose wooden panels where nails were exposed, which may cause injury. The acting RI and manager assured us these matters would be addressed.

The service has invested in a new intercom system which has improved how people can contact each community. Other upgrades include a new call bell system, furniture and flooring. We were informed that bedrooms are continuing to be upgraded when they become vacant. Managers routinely complete environmental assessments and can request repairs and upgrades from the maintenance team via an electronic database. We were assured that all necessary works are approved and prioritised as needed.

The service has a good range of facilities, including adaptations and dementia-friendly features to support safe freedom of movement. Noticeboards are used to display information about upcoming meetings and activities. There are various leisure items for people to enjoy, including large portable activity tablets, radios, televisions and sensory-based equipment. People told us they are pleased with the facilities in their own rooms. Where required, staff support people to move to alternative rooms to promote their social and emotional needs. We saw that bedrooms reflect people's own tastes and interests. Communal rooms are also appropriately decorated and include some traditional furnishings and other homely features. People have access to two enclosed gardens where they can relax or enjoy outdoor activities and entertainment.



Leadership & Management

Requires Significant Improvement

The management of the service requires significant improvement. The home is being run by interim managers while vacant manager and deputy manager posts are filled. We found that the lack of consistent leadership has affected staff morale. One staff member said, *“I think the thing that’s needed most is leadership... We really need somebody to come in and lead, we know we’ve got work to do”*. The service regularly uses agency workers to cover staff shortages and staff turnover has also been high, with several staff having recently left or started employment. These matters have impacted the overall skill mix of the staff team. Additionally, the current handover process does not adequately inform and alert care staff to the risks and needs of the people they are allocated to support. Systems of audit have also been ineffective as managers have failed to progress internal action plans to address shortfalls in practice. As such, the service is not being operated with sufficient care, competence and skill, which is affecting the continuity and quality of care people experience. We have therefore issued a Priority Action Notice, and the provider must take immediate action to address these issues.

The quality and development of the service is being closely monitored. Interim managers are working with commissioners and other professionals to improve standards and are committed to developing and embedding a positive and compassionate culture. Planned developments include reviewing shift patterns and adjusting staffing levels, assigning staff to work in designated areas and refining leadership roles to include oversight of handover procedures. Staff are open to new and improved ways of working and feel that current managers are approachable. Senior managers are transparent when assessing standards and identifying actions to drive forward improvement. They are in regular contact with the service to offer support and monitor day-to-day operations.

People are not always cared for by staff who are adequately inducted and supported to undertake their roles. Records show that new staff have faced delays in completing a programme of induction. Despite unrest and pressure within the staff team, managers have missed opportunities to formally meet with staff to offer reassurance and support, address practice concerns and identify how staff can develop personally and professionally. The staff induction, supervision and appraisal process therefore requires improvement, and we expect the provider to make these improvements.

The service recruits and vets staff appropriately to ensure they are fit to work in care. There is ongoing work to improve the administration process, so recruitment information and documentation is easily accessible. The service has employed a new administrator to support with this. Managers are working with staff to increase training compliance, with most having completed their mandatory courses. The service is also rolling out a more in-depth dementia training programme, which staff have found particularly valuable.

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
The service must consistently maintain good standards of hygiene and infection control to minimise infection risks.	25/09/25
The service must handle people's medicines safely and effectively, ensuring accurate records are retained in relation to medication stocks and audits are effective in addressing any issues.	25/09/25
Bathroom facilities must be fitted with appropriate locks to promote people's privacy and dignity and any environmental hazards presenting a risk to people's safety must be reduced as far as is reasonably practicable.	25/09/25
The service must ensure people are cared for by motivated staff who promote and embed a positive working culture and are committed to their professional growth and development.	25/09/25

Summary of areas for Priority Action	Date identified
People are at risk of harm and ill health because they do not consistently receive care and support in accordance with their personal plans and these plans are not always accurate or sufficiently detailed. People are not being consistently supported by care staff who understand their individual needs and how to safely manage risks to their health and well-being.	25/09/25
People are not receiving a consistent, reliable service supported by effective systems for care planning, assessment and review. People do not always benefit from safe staffing arrangements and effective quality and audit systems which review progress and inform the development of the service.	25/09/25

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