



Maes Y Dderwen



Charles Street, Tredegar, NP22 4AF



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www.shaw.co.uk

The inspection visit took place on 10/02/2026

Service Information:

Operated by:	Shaw healthcare (Cambria) Limited
Care Type:	Care Home Service Adults With Nursing
Provision for:	Care home for adults - with personal care, Care home for adults - with nursing, Provision for mental health
Registered places:	24
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

Good

Summary:

Maes-Y-Dderwen is a purpose-built nursing care home that provides specialist support focused on recovery. The service supports up to 24 people aged 18 and over.

In this inspection we found wellbeing, and care and support, to be good. This is because people are treated with dignity and respect and are supported to focus on what matters to them. People and their individual needs are at the centre of the service provided, and support is planned around each person.

The environment has been rated as good because it supports people to live independently and make choices about their daily lives. We identified one area which needs improvement and the provider told us they are taking action and expects the issue to be resolved quickly.

Leadership and management at the service is rated as good because of the positive and effective leadership in place. Provider-wide management and governance arrangements further supports the service in making sure people receive good care and support.

Findings:



Well-being

Good

People have a good quality of life because care staff support them to stay healthy, safe, and in control of their own lives. People can choose when to get up, get dressed, and move around the home freely. People told us care staff are “marvellous”.

The service runs health groups for women’s and men’s health. These groups are led by the manager and are open to both people living in the home and staff. They talk about different health topics, such as heart health and menopause.

Care staff support people to take part in everyday activities and to learn new skills. People choose activities they enjoy, both inside and outside the home. Some people go on trips, such as visiting railways. Others enjoy shopping or going out for meals. People are also free to choose not to take part. Support is planned to help people build confidence, independence, and life skills, while managing risks safely.

Care staff support people to attend health appointments when needed. The service understands this can be difficult for some people and works to reduce barriers to good healthcare. The service is building links with local health services, and nurses have had extra training so some health checks can be carried out at the home.

People are supported to follow daily routines which help them feel well, such as eating regularly and sleeping well. The breakfast club helps people start the day in a calm and supportive way. Most people now have breakfast every day which many didn’t choose to before the breakfast club was introduced.

Staff respect people’s relationships and understand how important they are. Support plans include information about family, friends, and other important people, and how care staff can help people keep these relationships.

Staff understand their duty to keep people safe and know how to recognise, and report concerns about abuse or neglect and have completed safeguarding training. Records show overall, the service follows the correct procedures to protect people who are unable to make certain decisions, and guidance is put in place to keep them safe.



Care & Support

Good

People receive good care and support. Before someone moves into the service, their needs are assessed. We were told, and saw evidence, the service gathers information from professionals already involved with people and, where appropriate, from family members or representatives. Most risk assessments are in place at this stage. The manager reviews this assessment and related records a week after the person moves in.

People have their own personal plan which explains their needs and guides care staff on how to support them. These plans include information about people's preferences and life history, and we saw the level of detail in the plans varied between people. People are encouraged and supported to be involved in reviewing their personal plans if they wish. We were told this often happens through informal conversations rather than formal meetings, to make it easier for people to take part. Some records of these conversations are kept. The manager is leading a pilot project, to help people set goals and work towards their own personal outcomes. This aims to help people be more involved in planning their support and have more control over their lives.

Support is based on recovery and active support approaches. During the inspection, we saw care staff treating people kindly, with respect, and offering them meaningful choices throughout the day.

People are referred to health and other professionals at the right time and are supported to follow the advice given.

People are supported to stay safe from abuse and neglect while also being encouraged to make their own choices and become more independent. People's rights to choose their relationships and make decisions about their own lives are respected. There are clear policies to guide staff, and managers are available to offer advice and support. Records show the service takes action when concerns are raised.

Medicines are stored safely and correctly. Records show people receive their medicines as prescribed to help them stay well. When regular checks are needed, care staff support people to attend and take part in these appointments.



Environment

Good

People live in a good environment which meets their needs and supports their independence. There are 24 single bedrooms with washing facilities. These are arranged into four smaller shared living areas. Each shared living area has six bedrooms, a shared living and dining area, and a kitchenette. People can use the kitchenette to make their own meals and light snacks. There are also toilets and bathing or showering facilities in each cluster. One bathroom is designed to support people with bariatric needs. The environment is designed to help people develop or maintain independent living skills within a supportive setting. Because the facilities are accessible, staff can adapt support easily when people's needs change.

The core part of the service includes a central kitchen which provides a choice of freshly prepared meals each day. The kitchen has been awarded a rating of five by the Food Standards Agency, which means food hygiene standards are very good. There are also shared areas where people can relax, socialise, and take part in activities.

People have their own rooms which they are able to personalise to reflect their own tastes and interests. The decoration and colour scheme throughout the service has been chosen to create a calm and relaxing environment. One corridor is known as "affirmation alley" and has positive messages displayed on the walls. There are also displays to reflect the Maes Y Dderwen community and help people feel a sense of belonging. Easy-read activity timetables are displayed to help people make choices, and people's personal goals are also proudly shown, when people are happy for these to be shared.

There is a large garden for people to use. We were told the space is used during the spring and summer for relaxing and taking part in gardening activities such as planting bulbs and growing vegetables. The building is non-smoking, with designated smoking areas located outside in the garden.

When we visited, the entrance was secure and visitors were asked for identification. The entrance and shared lounges are welcoming, comfortable, and clean. Some bathrooms and shared toilets showed signs of wear and tear, including damaged seals, which could increase the risk of infection. The manager has identified some kitchenettes need replacing and has raised this with the provider. We also found damage to parts of a kitchenette and areas which require a deep clean. There are some errors in the building evacuation plans. Because of these issues, outcomes for people require improvement and we expect the provider to make the necessary changes.



Leadership & Management

Good

The leadership and management of the service is good. There are effective systems in place to make sure the service runs smoothly and people receive good care and support. These systems provide information to the Responsible Individual (RI), which helps them regularly check the quality of care at the service.

During the inspection, we found there were enough support and nursing staff to provide care in a timely and respectful way. There is currently a vacant Occupational Therapist post, and recruitment is ongoing. We were assured this has not affected the care people receive. The management team take a hands-on approach and are involved in day-to-day support, helping to model good practice. The manager is committed to supporting people to live well and works to remove barriers to good health as part of everyday practice.

The provider has clear recruitment and vetting processes to make sure staff are suitable to work with adults at risk. New staff complete an induction when they start, which includes the required training. Training and supervision records show staff keep their knowledge and skills up to date through regular training and one-to-one supervision meetings. The RI checks training compliance during formal visits and quality of care audits, as having a skilled and supported staff team is a priority.

Staff told us they feel positive about their roles and well supported by the management team. Staff said they are confident in the manager and their ability to run the service. The provider values staff and recognises their work through provider-wide awards, where staff are nominated for their dedication and achievements.

There are suitable and up-to-date policies in place to support the safe and effective running of the service. We were told staff can easily access these policies through an online system.

The management team informs the service regulator about notifiable incidents in a timely and open way. The service keeps an up-to-date record of complaints, including the actions taken and the outcomes. The RI reviews complaints and safeguarding reports during formal visits and quality of care audits.

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 may not achieve positive outcomes because some risks to peoples health and safety had not been identified.	10/02/26

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

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