



Plas Cae Crwn



Plas Cae Crwn Care Home, Park Street, Newtown, SY16 1EW



01686625734



www.shaw.co.uk

The inspection visits for this service took place between 12/01/2026 and 13/01/2026

Service Information:

Operated by:	Shaw healthcare (Cambria) Limited
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care
Registered places:	40
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

Requires Improvement



Leadership & Management

Requires Improvement

Summary:

Plas Cae Crwn care home is located within the market town of Newtown. It is close to the nearby shops, library, amenities and local transport links. Rooms to the rear of the building have views of the garden. Gardens are maintained throughout the year with people encouraged to participate in both the planning and upkeep of the grounds.

Wellbeing is good. We found people to be safe and happy. Staff have good relationships with people, relatives and professionals visiting the service.

Leadership and management requires improvement. The service needs to improve its governance arrangements and make sure that internal audits are completed in a timely manner.

Care and support is good. People are protected from harm and abuse. Personal plans are good. They provide clear guidance for staff on the care and support needs of people. People's medication

is safely managed.

The environment requires improvement. We did not find consistently clear procedures which identify which staff are trained as fire marshals. Personal emergency evacuation plans (PEEPs) and the emergency 'grab box' could not be quickly located and were not appropriately stored in an easily accessible place in the event of an emergency.

Findings:



Well-being

Good

People live healthily and safely with control over their lives. We found people to be safe and happy. Staff have good relationships with people, relatives and professionals visiting the service

People are supported to cultivate safe and healthy relationships. We saw care staff and people engaging at mealtimes. It was also a time where people were sitting together in groups socialising with each other. Relatives and friends are encouraged to visit. We were told, "Yes my sister and her husband come here often, they are always made welcome" and "*It's a nice, friendly place to live. I have made some friends here.*"

People are supported to maintain their physical and mental health and emotional well-being. We saw some activities being carried out with people. These included exercises, music, a party and a dancing evening. The service employs an activities co-ordinator. During the inspection, we saw the activities coordinator conducting individual activities in people's rooms.

People are safeguarded from abuse and neglect. People are provided with a secure environment where they always feel safe. There are effective safeguarding procedures in place which staff understand. Risk assessments provide clarity and consistent guidance and information to staff. These adapt and are updated around the needs of people being supported, with staff having access to ongoing internal and external specialist support. A visiting professional told us, "*The care is excellent- staff really care about people. I like coming here and come a few times a week. No concerns on how they manage health and wellbeing.*"

People live in accommodation that supports their well-being outcomes. People have access to indoor and outdoor spaces which are used consistently in accordance with the weather. We read health and safety audits including fire safety, infection control and a range of environment checks. These help keep people safe. We were assured that general fire safety improvements would be implemented. We will follow this up at our next inspection.



Care & Support

Good

Personal plans are good. They provide clear guidance for staff on the care and support needs of people. While personal plans are reviewed regularly by care staff, involvement from the individual, their family or representative is not always evidenced. People's wellbeing outcomes are not consistently recorded when outcomes are met.

People receive support in a dignified and respectful way. We were told, *"I love all the staff, they know how to look after me."* Care staff interact positively with people, gently offering encouragement when they need it and people respond well to this. They clearly know people well and know what is important to them. People told us, *"They are really good and kind. They look after me very well"* and *"I love living here, staff are so good and kind. My relatives are always made to feel very welcome."* This is also supported by the comments from relatives & visiting professionals.

People are protected from harm and abuse. A relative told us, *"It's an amazing home the care workers are amazing."* Another told us, *"This place is our lifesaver, excellent service."* There are thorough risk assessments in place. The service provides effective safeguarding training. Policy and procedures are in place and are followed by the staff.

People's medication is safely managed. People receive their medication as prescribed. Staff have training relating to medication management and their competency to administer medication is regularly assessed. We saw that in some cases, medication audits had not been conducted. This has been an area identified by the service as requiring improvement. The service has provided assurances this is being addressed.

People's risk of infection is minimised. There are good supplies of personal protective equipment (PPE) made available throughout the service, these are being used by staff. Staff are trained and there is an effective policy in place that staff were aware of. We saw a good supply of cleaning products.



Environment

Requires Improvement

People live in an environment with appropriate and well-maintained facilities and equipment. The home benefits from attractive gardens which surround the premises. People have access to this outdoor space, which is safe. The building is separated into two distinct areas, the dementia care and residential areas.

People's rooms are nice, clean and homely. We saw several rooms which people had personalised with photographs, ornaments and other items of their choosing. Bedroom doors are different colours to help people orientate. Some also had names of the people living there and photographs of any interests placed on the doors. We didn't see any memory boxes being utilised. The home was very clean throughout. There was a dedicated domestic team in place who engaged well with people living at the service.

Fire safety procedures need to improve. We saw fire risk assessments are in place. There have been evacuation simulations and checks of fire safety equipment. However, we did not find consistently clear procedures which identify which staff are trained as fire marshals. During the inspection, the interim management arranged for urgent training to be provided.

Personal emergency evacuation plans (PEEPs) and the emergency 'grab box' could not be quickly located and were not appropriately stored in an easily accessible place in the event of an emergency. The management and care staff were also unclear on its contents. We did not see PEEPs were consistently reviewed in a timely manner. While this falls short of what we would expect, we received assurances that PEEPS would be reviewed and updated swiftly.

Outcomes for people require improvement because fire marshals are important in making sure that people are made safe during an evacuation. We expect the provider to make improvements and we will follow this up at our next inspection.



Leadership & Management

Requires Improvement

We did not see robust supervision of management. The service needs to improve its regular audits of all aspects of the service. The responsible individual (RI) reports are detailed, evidencing regular visits to the service. However, we found limited evidence of any audits conducted by the service manager.

We examined the records held by the service regarding the 'deprivation of liberty safeguards' (DoLS) authorities. These were incomplete and need strengthening. The DoLS tracker was not being employed effectively.

Outcomes for people require improvement because these audits are important in making sure that the service is effectively managed. The responsible individual must supervise the management of the service.

The interim management team began to put in place improvements during our inspection. We expect the provider to continue to make improvements and we will follow this up at the next inspection.

We found there have been some recent significant operational management changes at the service. We did not see continuity and consistency in the management team. Additional resources have been placed in the service with the introduction of a new deputy manager, supported by an operations manager and a service support manager. This new team, who are all new in post, will take time to embed and we will expect to see improvements continue and stability of the management of the service maintained.

People are supported by staff with the necessary expertise, skills and qualifications to meet people's care and support needs. The training of care staff is good. Staff records contain detailed information about the training that is offered to care staff. We were told, "*Yes, very good training*" and "*I had a good induction.*"

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
Fire safety evacuation arrangements need to improve to ensure the health and safety of individuals are identified and reduced so far as reasonably practicable.	12/01/26
The service providers must ensure clear arrangements are in place for the oversight and governance of the service in meeting the best possible outcomes for people.	12/01/26

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

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Welsh Government © Crown copyright 2026.

*You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gov.uk
You must reproduce our material accurately and not use it in a misleading context.*