Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Primrose Cottage

Barry

01446 502551

https://amethysthealthcare.co.uk

The inspection visits for this service took place between 16/09/2026 and 23/09/2026

Service Information:

Operated by:	Amethyst Healthcare Ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for learning disability, Provision for mental health
Registered places:	3
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:

Primrose Cottage is a small care home situated in the Vale of Glamorgan. People living at the service have easy access to good transport links and local amenities, which they frequently use. People experience excellent well-being outcomes because they live healthily and safely with control over their lives. They experience highly positive outcomes because they feel valued, respected and included. They receive support with meaningful activities, communication needs and health needs to achieve their personal aspirations and goals. Care and support outcomes are good, people experience successful health, well-being and safety outcomes because they receive person-centred support from care staff who know them well.

The service environment is good, and supports people's daily routines in clean, well-maintained and homely premises. The accommodation supports people's well-being outcomes by providing an environment where they experience independence, accessibility, choice and control.

Leadership and management are good. We found there to be mostly effective quality assurance, with strong engagement, and clear accountability resulting in a provider committed to service improvement. Governance arrangements are generally effective and have contributed to improved outcomes for people.

Findings:

Well-being — Excellent

Without exception, all people are treated with dignity and respect and achieve excellent well-being outcomes. Whenever possible, people play an active part towards their daily routines. The support they receive ensures they maintain independence as much as possible during day-to-day tasks and decision making. We saw care staff interacting with people in ways which enables their participation. There is a clear commitment from the provider and all care staff to ensure people are listened to. We saw excellent examples where people are encouraged to build on their strengths. This included being more independent with their daily health needs, experiencing work type activities and increasing their confidence in the community. All people have advanced exceptionally well in their personal development since moving into the service. The provider is working towards delivering a service in Welsh. One person told us how they are answering the telephone and using basic Welsh words to greet people. People enjoy multiple opportunities to socialise and celebrate key events together.

People are greatly supported to live well and achieve self-directed outcomes and told us of the positive and transformative impact this has on their well-being. The service offers people choice in their daily activities, which follows their personal plans, hobbies, interests and aspirations. People are experiencing new opportunities, such as being involved in the interview process for new care staff, going on holidays, taking part in weekly swimming sessions and taking a more active role in their daily outcomes. The service is providing people with enriching experiences, giving them opportunities to socially interact and develop and learn new skills. Regular resident meetings, activity planning, menu planning and social events ensure people have meaningful opportunities to exercise choice and influence daily life within the service. People told us they are happy and they feel valued and listened to.

People are protected and safe from harm and abuse. People's comments and feedback to us consistently indicate they feel safe, respected, supported and able to express their views. Where people require additional safeguards, appropriate authorisations are applied for and embedded in everyday practice at the service. The responsible individual (RI) is available to people on a weekly basis and values their feedback which informs service and practice development. Where people have raised concerns, the provider takes appropriate action to ensure people always feel safe and comfortable at the service.

Care & Support — Good

The service provides a good standard of care and support. Care staff and service leaders know and understand people well, which supports consistent and reliable daily outcomes. The service produces a personal plan which informs care staff of a person's care and support needs. We found the plans contain good detail about the person, such as their personality, their likes, hobbies, and the wider network of those important to them. People are fully involved, whenever possible, in reviewing their personal plans. We found risk assessments to be insufficient to fully inform and guide care staff. Although care staff know people very well, we discussed the potential risk with the RI. They have taken prompt action to review and update the documents.

People receive support to manage their physical health. We observed several documents which demonstrate people receive timely, appropriate support to meet their primary health care needs, but appointment outcomes were not always evident. People told us of their experiences about how well supported they are to attend important health appointments. Records show prompt action is taken following concerns about a person's well-being. The service encourages people to be independent in managing their daily health outcomes, such as being more independent with some medications, or managing their incoming mail from health professionals. We found the service follows advice from health services such as GP's and clinical professionals.

People's medication is safely managed and administered by trained and competent care staff. Daily medication records are complete. People access other medical professionals to review medication, and the service acts on their professional advice when there are changes. We observed people to look well because they receive consistent daily support to maintain their hygiene and personal grooming standards in-line with their preferences. People access home cooked meals made with fresh produce, and drinks and snacks are readily available. People told us the food is very good, they enjoy planning the menu using cookbooks and some like to shop for the ingredients. The service meets the needs of people with additional support to maintain a good nutritional in-take in-line with clinical advice. Care staff receive additional training and awareness to provide support to those with specific dietary needs.

People are protected as much as possible from the risk of infection because the premises and equipment are kept clean and hygienic. Care staff complete relevant training and understand their responsibilities; we observed infection control practice to be good throughout the home.

Environment — Good

People experience positive outcomes because they live in a safe, clean, comfortable and personalised environment where health and safety arrangements and environmental oversight supports their well-being. The provider has established systems to minimise infection risks, maintain the premises and equipment, and monitor safety, enabling people to achieve their outcomes in a homely and welcoming environment. Care staff keep people safe and check the identity of visitors and keep a record.

The home was observed to be clean and well maintained throughout. We found a structured and consistent approach to maintaining environmental standards. Care staff receive appropriate health and safety, and food hygiene training, with good compliance levels. Sufficient Personal Protective Equipment and cleaning supplies are readily available. We found effective environmental oversight, ensuring standards are maintained and improvements identified where necessary. People are actively involved in decisions about their home, and the service demonstrates a person-centred approach by learning from feedback and adapting the environment to reflect people's preferences.

People live in accommodation which promotes dignity, independence and quality of life. Bedrooms are highly personalised and reflect individual interests, preferences and identities. Communal areas are comfortable, welcoming and well used. People have access to suitable indoor and outdoor spaces, they can choose where they spend their time, and benefit from a relaxed atmosphere where visitors are welcomed. There is a rear accessible garden where people socialise. People told us they enjoy the garden and how they have been included in discussions around what they want in it, such as raised beds for plants, or activities to keep them occupied. People are highly satisfied with the environment and how it positively impacts their well-being. We saw people sitting together in the dining area, with several cookbooks open whilst planning their menu. It was a social and collaborative activity; people were supportive of each other and enjoyed chatting and exchanging food ideas.

People's records, medication and hazardous substances are securely stored, and security arrangements balance safety with people's rights and privacy. The provider has considered the Welsh active offer, and alongside notice boards in English, there is signage throughout the home in Welsh.

Leadership & Management — Good

The service benefits from clear governance arrangements which supports the delivery of safe and effective care. There have been recent changes to management, and we discussed with the RI the importance of embedding consistency in key roles at the service for people and care staff. There are mostly effective quality monitoring systems in place, and feedback from stakeholders informs service development. The RI completes formal visits to the service to speak with people and care staff. These visits focus on evaluating the impact of care on people's lives. The RI acts when needed should people raise any concerns or worries and this is a strength of the service. We found missed opportunities in quality assurance activities to evidence they consider the consistency and quality of health records and risk assessments. We discussed this with the RI who is taking immediate action to review and strengthen their processes. The RI completes a quality-of-care review which largely meets the regulatory requirement. The review informs the provider the service is working effectively to meet people's needs.

The service provider ensures timely notifications are sent to the relevant authorities, such as the regulators or local authority safeguarding teams. The provider monitors concerns, complaints, compliments and safeguarding matters. Safeguarding matters and concerns are thoroughly investigated, and the provider operates with a duty of candour and a willingness to act, make changes to practice and develop the service in response to matters raised.

Recruitment processes are well-managed, ensuring people receive support from suitably vetted care staff. Disclosure and barring certificates are in place. Eligible care staff are registered with Social Care Wales, the workforce regulator. Records of mentoring and shadowing for new staff were not available; however, care staff receive timely supervision. We found the quality of recent supervision records to be highly detailed. Training compliance is generally good, with identified gaps monitored through supervision. Care staff receive training in core topics, and we found most specialist topics are completed to meet specific care needs. The provider is actively working to embed a positive, open and transparent culture. Ongoing communication with care staff reinforces safeguarding responsibilities, whistleblowing arrangements, duty of candour and the Social Care Wales Codes of Professional Practice. Overall, feedback from care staff told us they value teamwork and are somewhat supported in their role. We shared with the provider how care staff would like further consideration to working hours and learning and development opportunities. Whilst we did not see impact on people at inspection the RI understands their responsibility to engage with care staff and continue to develop a positive work culture.

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.

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