



Maes Y Coed



Bangeston Hall, Pembroke Dock, SA72 4RX



02920029922

The inspection visits for this service took place between 19/11/2025 and 20/11/2025

Service Information:

Operated by:	Pembrokeshire Resource Centre LTD
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for learning disability
Registered places:	5
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

Requires Improvement



Environment

Good



Leadership & Management

Good

Summary:

Maes Y Coed provides care and support for adults with learning disabilities in a homely environment. Overall, people living at the service experience positive relationships with care staff and feel safe and respected. Well-being is good, as people are supported to maintain independence, daily routines, and access health services. The service promotes choice and encourages family involvement, contributing to positive outcomes.

Care and Support requires improvement. Personal plans and risk assessments are generally well-structured and provide guidance for care staff, however staffing shortages and sickness have affected continuity of care. This has limited opportunities for community engagement and meaningful activities for some people. Outcomes for people require improvement because people are not consistently supported to take part in meaningful activities that matter to them, and we expect the provider to make improvements.

The Environment is good. Accommodation is clean, well-maintained, and personalised, creating a welcoming atmosphere. Regular safety checks, food hygiene practices, and plans for outdoor improvements demonstrate a commitment to maintaining and enhancing standards.

Leadership and Management are good and provide effective oversight. Governance arrangements are strong, with robust quality assurance systems, effective recruitment, and training compliance is high. Care staff feel supported and have access to development opportunities, fostering a positive culture focused on continuous improvement.

Findings:



Well-being

Good

People living at the service experience positive relationships with care staff, who treat them with dignity and respect. We observed care staff using communication methods suited to people's needs, which helped individuals feel understood and valued and supported. People told us they enjoy living at the service and feel comfortable with care staff. For example, one person expressed pride in sharing details about their interests and spoke about activities they enjoy.

People are encouraged to develop independence through tasks like laundry, baking, and cleaning. Records and photographs show participation in community activities, including visits to local attractions and voluntary work. These activities promote choice and control over everyday life.

Health and well-being are supported effectively. People are registered with local health services and attend appointments as needed. Easy-read cookbooks promote healthy eating, and people are encouraged to prepare meals that support a balanced diet. Activity planners are in place for most people and provide choice and variety in daily routines.

Some people's voices are heard through monthly meetings, which give individuals the opportunity to share their views and influence decisions about their care and daily life. On our visit one person said *"I like living here, it is a good place. I know who to talk to if there is a problem."* The service actively supports people to maintain strong and meaningful relationships with those who are important to them. Care staff facilitate regular contact through family home visits and visits to the service, helping families remain involved in people's lives and promoting emotional well-being.

Safeguarding arrangements are robust, and care staff understand how to respond to concerns. Systems are in place to ensure people are protected from harm. The provider is working towards meeting the Welsh Active Offer by developing systems and resources to promote the use of the Welsh language within the service. Care staff are encouraged to use incidental Welsh where possible, and plans are in place to further embed bilingual communication in daily practice.

Overall, people's well-being outcomes are supported through respectful care, meaningful engagement, and safe daily routines. People feel safe, valued, and able to make choices about their lives.



Care & Support

Requires Improvement

People receive care and support that meets many of their needs, but improvements are required to ensure consistency and continuity. Personal plans are generally well-structured and written in the person's voice, providing guidance for staff on how to support people's outcomes. Risk assessments and behaviour support plans are detailed and promote positive risk-taking, helping people maintain a sense of well-being. Health profiles are maintained and reviewed regularly, and people are supported to attend health appointments. Medication systems are safe, with appropriate storage and recording practices, and staff receive training in administration.

Pre-assessments and provider assessments are thorough and demonstrate how the service intends to meet people's needs. We found evidence that the provider has improved assessment processes since the last inspection, and this area for improvement has now been achieved. Transition planning is strong, and people have opportunities to settle into the service with appropriate support.

Despite these strengths, continuity of care requires improvement. Staffing shortages and sickness have impacted the ability of care staff to follow weekly activity planners consistently. For some people, planners were not in place, resulting in limited opportunities for community engagement and meaningful activities. Daily records show that certain individuals spent most of their time indoors, with few outings recorded. This lack of structure affects people's ability to achieve personal aspirations and maintain social connections. Outcomes for people require improvement because people are not consistently supported to engage in meaningful activities and we expect the provider to make improvements.

While most daily notes are detailed, the quality varies, and gaps were identified in recording activities and outcomes. Where planners are missing, there is no clear guidance for care staff on alternative activities, which limits choice and independence. Although monthly meetings provide a platform for people to share their views, participation is inconsistent. We were told by the manager they are working closely with professionals to develop systems to ensure all people's voices are being heard.

Deprivation of Liberty and Safeguarding (DOLS) referrals are made appropriately and ensure people's liberties and rights are upheld. Protocols for epilepsy management are clear and provide care staff with clear guidance on how to support people effectively with their identified health needs.

Overall, care and support is delivered safely, but improvements are needed to ensure people experience continuity of care and consistent opportunities to achieve their well-being outcomes.



Environment

Good

People live in accommodation that supports their well-being outcomes. Flats are personalised with photographs, artwork, and items of personal interest, creating a homely and welcoming atmosphere. We observed that most areas were clean, tidy, and well maintained. Where clutter was present, staff explained strategies in place to encourage people to keep their spaces organised. This demonstrates a proactive approach to maintaining standards and promoting independence.

Kitchens are well equipped and stocked with a variety of food items. Opened products are labelled, and fridge temperatures are recorded in line with food safety requirements. Bathrooms are designed to promote independence, with suitable equipment available to assist people with personal care. These features help people maintain dignity and choice in their daily routines.

Health and safety checks are completed regularly. Fire safety systems, gas safety certificates, and Portable Appliance Testing (PAT) are all up to date. Cleaning rotas are in place and followed consistently.

Outdoor spaces are immediately available for each downstairs flat, and plans for improvements, such as creating a patio area, show the provider's commitment to enhancing the living environment for people. These developments will further support opportunities for relaxation and social engagement.

Control of Substances Hazardous to Health (COSHH) items, such as cleaning products, were not stored securely on the day of inspection. However, this was resolved immediately by the manager, and an action plan implemented to ensure compliance is maintained through regular spot checks. This demonstrates a commitment to safety and risk management. The environment is generally warm and comfortable, with adequate lighting and ventilation throughout.

Overall, the service provides a clean, and well-maintained environment that promotes independence and supports people's well-being. People benefit from living spaces that reflect their preferences and cultural needs, and the provider takes appropriate steps to maintain and improve the physical environment.



Leadership & Management

Good

The service benefits from strong leadership and effective governance arrangements. Quality assurance systems are robust, with regular Responsible Individual (RI) visits and comprehensive quality of care reports. These reports analyse feedback from people, families, staff, and professionals, ensuring continuous improvement is embedded in practice.

Policies and procedures are clear, up to date, and reflective of current national guidance. Supervision records show most staff receive regular one-to-one sessions, providing opportunities for reflection and development. Staff meetings are well attended and documented, demonstrating open communication and collaborative problem-solving. Care workers told us they feel supported by managers and have access to training that equips them with the skills needed for their roles. The training matrix shows high compliance with core training requirements, and additional learning opportunities are available to meet people's specific needs.

Recruitment processes are safe and thorough. We saw evidence of Disclosure and Barring Service (DBS) checks, references, and identity verification. The majority of care staff are registered with Social Care Wales, and plans are in place to support those who are working towards registration. Induction and ongoing development are prioritised, with many staff enrolled onto a relevant qualification for their roles and responsibilities.

Leaders maintain a positive culture that values equality and inclusion. Feedback from families and staff indicates confidence in the management team and good lines of communication. Care staff told us "*We support each other as staff.*" Systems for monitoring performance and responding to issues are effective, and contingency plans are in place to manage staffing challenges.

Overall, leadership and management arrangements are strong, fostering a safe, supportive environment for people and staff. Governance processes ensure accountability, transparency, and continuous improvement, contributing to good outcomes for people.

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 are not consistently supported by adequate numbers of care staff, and the provision of planned, meaningful activities needs improvement to ensure individuals experience positive well-being outcomes.	19/11/25

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

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