



## Grove View



263a Birchgrove Road, Birchgrove, Swansea, SA7 9NA



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<https://accomplish-group.co.uk>

The inspection visits for this service took place between 25/02/2026 and 05/03/2026

## Service Information:

Operated by:	Accomplish group 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:	9
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

**Excellent**



Environment

**Good**



Leadership & Management

**Excellent**

## Summary:

People experience excellent well-being in Grove View. They benefit from warm, trusting relationships and a strong sense of belonging. Individuals are encouraged and supported to lead full, active lives, including education, volunteering, hobbies, and personal goals. Their voices are central for day-to-day decisions, and they are empowered to make meaningful choices that shape their lives. The home maintains a calm, friendly, family-like atmosphere where people feel valued and well supported, including during periods of crisis.

People receive excellent and exceptionally person-centred care and support at Grove View . Personal plans are clear, detailed, and regularly reviewed, capturing identity, preferences, aspirations, and risks. Staff demonstrate strong knowledge of each person's support needs, including mental and physical health, communication, and positive behaviour support. Health and activity monitoring is robust, medication systems are safe and consistent, and staff respond quickly to incidents. Evidence shows people are supported to progress, recover, and build independence.

People are supported in a good environment, that's homely, well-maintained, and safe. Bedrooms and shared areas are personalised and welcoming, with people having a say in the décor and improvements. Outdoor areas, security measures, and accessible facilities contribute to safety and comfort. Regular checks, risk assessments, and recent upgrades ensure good compliance and a high-quality environment.

Leadership and management is excellent because leaders are visible, and highly effective. Staff feel supported, valued, and encouraged to develop, with strong training compliance and high morale. Governance processes, audits, and RI visits demonstrate effective oversight, continuous improvement, and a clear commitment to positive outcomes for people.

## Findings:



### Well-being

**Excellent**

People live healthily, safely, and with a strong sense of control over their lives, supported by highly personalised care planning and proactive risk management. Personal plans are detailed, strengths-based, and clearly capture each person's preferences, aspirations, and what matters to them. People are actively involved in shaping their support through regular keyworker meetings and reviews, ensuring plans remain current and meaningful. Staff understand people's mental and physical health needs well, supported by thorough documentation of appointments, monitoring, and specialist guidance. People are encouraged to make choices, build independence, and pursue their goals related to education, volunteering, leisure activities, and long-term ambitions. Daily records show consistent engagement in purposeful routines, with staff promoting autonomy, maintaining safety.

People are safe and protected from abuse and neglect through strong safeguarding practices and dynamic risk assessments. Individuals report feeling safe, and staff show vigilance and professionalism during periods of heightened risk. Safeguarding concerns are reported appropriately, analysed, and used to strengthen practice, with risk assessments updated promptly following incidents. Staff demonstrate empathy and patience during crises and advocate strongly for people when external support is delayed or insufficient. Medication systems are robust, with accurate recording, clear protocols in place, and consistent daily and weekly checks. People know how to raise concerns in ways that suit their communication needs, and staff encourage openness and honesty. The overall culture is cohesive, protective, and grounded in dignity and rights.

People are supported to build and maintain safe and healthy relationships both within the home and the wider community. The home has a warm, homely, family-like atmosphere, with feedback from people and staff highlighting positive relationships, shared laughter, and mutual support. Staff sensitively help individuals strengthen positive relationships and navigate more complex emotional situations. Where appropriate, staff encourage financial independence with safeguards in place for those who need them. People consistently report feeling valued, listened to, and understood.

People live in a well-maintained environment that enhances safety, comfort, and independence. Bedrooms are personalised, and individuals contribute to decisions about décor and improvements. Recent upgrades, including new wet rooms and a refurbished laundry room, have improved accessibility and dignity. The property offers open-plan communal areas, independent flats, and secure outdoor space that residents use and enjoy regularly. Routine safety checks, fire safety systems, and maintenance audits demonstrate strong oversight. The layout and facilities support varying levels of need, including safer spaces for people at higher risk of self-harm.



People receive consistently excellent quality of care and support they need to achieve their personal outcomes. We looked at care files and personal plans and found the person's voice is well-embedded throughout the plans. There are "About Me" sections within the plans that read as though written or directed by the individual, reinforcing dignity, choice, and autonomy in their support arrangements. Documentation is clear and detailed enough that unfamiliar staff could confidently deliver safe and informed care. Records are detailed, regularly reviewed, and demonstrate meaningful engagement with the people supported. Documentation consistently promotes safe practice, independence, and positive well-being outcomes. Overall, the personal plans and systems in place seen, reflect excellent record-keeping and facilitate continuity of support.

People are safe and protected from abuse and neglect and are informed about how to raise concerns in a way that suits them. Risk assessments are extensive, meaningful, and tailored to each person's individual circumstances, linking clearly to real behaviours, triggers, and protective strategies. This breadth and depth of assessment indicates excellent foresight and ensures staff are well-equipped to support people safely at all times of need. The provider has an up-to-date safeguarding policy in place that reflects the Wales safeguarding procedures. Care staff have completed safeguarding training and understanding their roles and responsibilities to report any concerns they may have. The systems and documentation in place demonstrate safe practice, strong safeguarding measures, and a well-coordinated approach to maintaining people's well-being.

There are very effective systems in place to manage and oversee medication at the service and maintain people's health. Medication is stored securely with locked facilities and regular temperature checks. Medication charts are accurate with no unexplained gaps in routine medication, and usage of medication to be taken only when required is clearly recorded. Weekly checks, daily counts, and routine audits ensure any issues are quickly addressed. Controlled drugs are managed robustly with correct storage, accurate registers, and required dual signatures. Clear protocols guide ordering, returning, and disposing of medication, and consent is appropriately documented. Staff receive regular medication training, with additional support provided after any errors. These strong systems ensure safe, consistent practice, and health-related records remain thorough and reliable.

People's risk of infection is minimised because the service has strong infection prevention and control measures in place, supported by routine monitoring and comprehensive policies. Infection control policies were last reviewed in December 2025 and found to be up to date and robust. Staff receive regular training, with infection control included in mandatory programmes and high levels of compliance recorded. Care staff use Personal Protective Equipment (PPE) appropriately and there is a stock of this available in the service.



## Environment

Good

People live in an environment with appropriate and well-maintained facilities and equipment to help them achieve their well-being outcomes while identifying, mitigating and reducing health and safety risks. The service is situated away from the main road and has its own driveway to access and parking. The service has two buildings, one which is the main building where the communal areas, office and most of the en-suite rooms are, and the other building is two self-contained flats. The home is clean, comfortable and presented to a high standard, with communal areas that feel homely and welcoming. Bedrooms are personalised to reflect individual preferences, and people have full control over how their spaces are decorated. Since the last inspection, the service has completed notable upgrades, including two new wet rooms and a full refurbishment of the laundry room. Outdoor areas are well maintained, offering a garden with seating, planters and space for people to engage in planting and gardening activities. There is a visitors' book in place for all those visiting the service to sign on entering the main building and leaving. CCTV and secure electric gates provide additional safety, while still respecting people's privacy and autonomy.

A comprehensive programme of environmental checks and servicing ensures the building remains safe and in a good state of repair. Fire safety systems are routinely tested, and records show consistent monitoring of fire panels, fire doors, emergency lighting and regular drills. Legionella and water temperature checks are up to date, and essential certificates, such as gas safety, PAT testing and electrical inspections, are current with clear renewal dates scheduled. COSHH items and sharps are stored securely in locked cupboards, and maintenance needs are addressed promptly through an external contractor. The provider's in-house Health and Safety Team conducts formal audits, most recently scoring 86%. The oversight mechanisms in place, ensure the environment remains safe, compliant with relevant health and safety legislation, and responsive to emerging risks.



## Leadership & Management

Excellent

The service demonstrates consistent and strong organisational arrangements and governance that directly support people to achieve positive outcomes. There are robust quality assurance processes in place, including regular quarterly visit by the responsible individual and the bi-annual quality of care reviews. Monthly management audits, and a structured programme of safety, medication, finance and governance checks are in place to ensure the service operates effectively. These are complemented by up-to-date policies and procedures, a comprehensive SOP that accurately reflects current practice, and clear systems for reporting incidents, complaints, and notifications in a timely and transparent manner. Staff describe highly supportive leadership, consistent communication, and opportunities to provide feedback through meetings, surveys, and informal discussion. Oversight from both the management team and the Responsible Individual is consistent and well-documented, ensuring that learning from incidents, safeguarding enquiries, and staff feedback is used to drive continuous improvement. Together, these governance arrangements create a well-led service where organisational systems work cohesively to maintain high-quality care and enable people to work towards their personal goals.

People are supported by staff with the necessary expertise, skills, and qualifications to meet people's care and support needs. Staff files show robust recruitment checks, including validated references, up-to-date DBS records, verified employment histories and clear evidence of completed inductions. Training compliance is high across both mandatory and service-specific areas, and staff consistently report feeling well supported, with regular supervision, annual appraisals and strong encouragement to develop professionally. Training matrices demonstrate that staff maintain competence through a wide range of learning opportunities, including safeguarding, medication, mental health, positive behaviour support, autism awareness, active support and other specialist courses relevant to the needs of the people they support. Staff meetings take place regularly, ensuring consistent communication, shared learning and alignment in practice. Feedback gathered from staff highlights confidence in the management team, a positive team culture, and a strong sense of professional support, all of which contribute to skilled, knowledgeable and effectively deployed staff who can meet people's individual needs safely and compassionately. Comments included: "*Grove View is an amazing place to work and has always made me feel I belong.*" "*Our home is full of fun, and you will often hear laughter if you visit.*" and "*It feels like family... it's a positive and happy workplace.*"

## 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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