



## Glamorgan Care Ltd, Danygraig House



Glamorgan Care Ltd, Danygraig, Porthcawl, CF36 5SR



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[www.danygraighouse.co.uk](http://www.danygraighouse.co.uk)

The inspection visits for this service took place between 03/03/2026 and 04/03/2026

### Service Information:

Operated by:	Glamorgan Care Limited
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for mental health
Registered places:	48
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:

People experience positive well-being outcomes. They are supported to make informed choices about how and where they spend their time. People are supported to maintain their health and are offered a variety of activities both within the home and in the local community.

The service provides consistent and reliable care. People living at the service express satisfaction with the care and support they receive and describe positive relationships with staff. Personal plans are in place; however, improvements are required to ensure these plans comprehensively reflect each person's care and support needs.

The environment supports people's well-being. The home is clean, comfortable, and well maintained. The provider conducts regular maintenance and repairs to ensure the environment remains safe and suitable for its purpose. Measures are in place to ensure the home is secure and protected from unauthorised access.

Leadership and management are effective. Staff receive appropriate training and are well supported in their roles. Recruitment practices are safe and thorough, and governance and oversight systems are in place to support the running of the service.



## Findings:



### Well-being

Good

People benefit from regular opportunities to maintain meaningful connections with their family and friends. They are supported to sustain existing relationships with those who are important to them. During our inspection, we observed relatives visiting their loved ones. People are provided with opportunities to engage socially both within the service and in the wider community. Communal areas are accessible, enabling people to take part in activities facilitated by dedicated activity coordinators. We also saw people are supported to access the local community; for example, on the day of our visit, some people were accompanied on an outing to a local pub. We were informed work is underway to introduce regular resident meetings, which will provide a forum for people living at the service to discuss matters such as planned activities and other aspects of daily life.

Safeguarding measures are in place to protect people and keep them safe. Staff are safely recruited to ensure they are suitable to work with people at risk. Staff receive appropriate safeguarding training and demonstrate a clear understanding of the procedures for identifying and reporting concerns. The service has an up-to-date safeguarding policy that aligns with the Wales Safeguarding Procedures.

People are offered a good choice of meals and are supported with their nutritional needs. People told us they are satisfied with the quality of the food provided. We observed people are offered a range of nutritious options, and daily menus are displayed with photographs to help people make informed choices. During our observation of the lunchtime period, we noted there were sufficient staff available to serve meals and provide assistance where required. Kitchen staff have access to clear guidance on preparing meals for people who require modified diets. However, improvements are needed to ensure systems for monitoring food and fluid intake are sufficiently robust and consistently applied.

People live in an environment that is suited to their needs. The home is clean, comfortable, and well maintained throughout. People have access to a variety of communal areas in addition to their own bedrooms, which are personalised according to their preferences. The external grounds are also accessible and are maintained to a high standard. A programme of ongoing repair and maintenance is in place to ensure the environment remains safe, functional, and in good condition.



## Care & Support

## Requires Improvement

People are supported by an established and experienced team of care staff. The service has a low staff turnover rate, which contributes to good continuity of care. During the inspection, we observed positive and respectful interactions between staff and people living at the service. Staff were attentive and responded to people's needs in a timely and caring manner. People we spoke with provided positive feedback about the care they receive. One person said, *"The carers are good, I get on well with them,"* while another commented, *"The staff are good; they do a good job."* Relatives visiting on the day of our inspection also expressed satisfaction with the service. One relative told us, *"I think the care provided is very good. My dad's well looked after, and his needs are being met."*

Prior to admission, a pre-admission assessment is completed to determine whether the service can meet the person's needs. Following this, a personal plan is developed in collaboration with the person and, where appropriate, their representative. A review of selected personal plans indicates improvements are required. Some plans lack sufficient detail and do not fully reflect people's needs or clearly outline the measures required to manage identified risks. We found Deprivation of Liberty Safeguards (DoLS) authorisations are in place where necessary. However, the specific conditions attached to these authorisations are not always clearly incorporated into care documentation. This means care staff may not have access to information that accurately reflects a person's legal restrictions or care requirements, which could place people at risk of harm. We discussed this with the provider and identified it as an area requiring improvement. We expect this to be addressed by the time of the next inspection.

Medication practices within the service are good. Medicines are stored and administered safely, in line with established procedures. An up-to-date medication policy is in place, helping to support safe and consistent practice. However, improvements are needed in the recording of the effects of 'as required' (PRN) medication, as this was not always completed consistently. We discussed this with the provider, who assured us that action would be taken to address the issue. The service maintains positive working relationships with the local GP practice, enabling timely access to medical advice and intervention when required. The GP undertakes a weekly visit to review any emerging health concerns. We spoke with one professional who was visiting the service on the day of our inspection; they told us, *"I have no issues with the quality of care provided here. I think it's very good."*



## Environment

Good

People benefit from living in a clean, comfortable, and well-maintained environment. The home is divided into four separate areas, each of which has its own lounge and dining room. During the inspection, we observed that all areas were appropriately furnished and decorated. Corridors are free from clutter, allowing people to move safely around the service. The building is arranged over two floors, with lift access available to the upper level, which supports people with reduced mobility to navigate the home with ease. Bedrooms are spacious and can be personalised with people's own belongings, helping to create a sense of familiarity and homeliness. Each bedroom is equipped with ensuite toilet facilities. Communal bathrooms are also available and fitted with appropriate specialist equipment to meet the needs of people who require additional support. The home is set within well-maintained gardens. Outdoor seating is provided, and we observed people making use of this space during the inspection.

The service demonstrates a strong commitment to maintaining the environment and ensuring that facilities remain in good condition. Current safety certification is in place for key utilities, including gas, electrical installations, and fire safety systems. Risk assessments are completed for relevant areas, such as fire safety and legionella management. Personal Emergency Evacuation Plans (PEEPs) are in place for people, setting out the most appropriate methods of supporting them to evacuate safely in the event of an emergency.

Domestic staff are on site daily and follow structured cleaning schedules, helping to ensure the home remains clean, hygienic, and well presented. The kitchen has achieved a Food Standards Agency hygiene rating of five, indicating very good standards. Laundry facilities are suitable for the size of the home and there is a plentiful supply of cleaning products which are stored in accordance with Control of Substances Hazardous to Health recommendations. Environmental audits are undertaken to identify any emerging issues requiring attention. During our visit, we carried out a visual inspection of the environment and did not identify any obvious hazards.

Security arrangements are in place to protect people. The home is secure and measures are in place to prevent unauthorised access. Visitors are required to make themselves known on arrival, and staff ensure all visitors sign in and out of the premises in line with procedures.



## Leadership & Management

Good

People are supported by staff who have the appropriate skills, knowledge, and qualifications to meet their care and support needs. Training records show care staff have up-to-date training in core areas. Recruitment practices are robust. A review of personnel files confirmed that the service completes all legally required pre-employment checks before appointing new staff, including references from previous employers and Disclosure and Barring Service (DBS) checks. New staff undertake a structured induction, which provides them with an introduction to the service's expectations and enables them to shadow experienced members of the team. Following induction, care staff are registered with Social Care Wales, the workforce regulator, ensuring they are qualified and competent.

Care staff told us they enjoy working at the service and feel well supported in their roles. One staff member commented, "*The manager is good; she's supportive, friendly, and easy to speak to.*" Staff reported receiving supervision every three months in addition to an annual appraisal, as required by regulation. Records we reviewed confirm staff receive regular and structured formal support.

Quality assurance processes are in place to monitor the standard of care provided and to drive improvements where required. The Responsible Individual (RI) visits the service regularly and completes quarterly monitoring reports, which include feedback from people living in the home and staff. Policies and procedures are available to staff, are reviewed periodically, and reflect current statutory requirements and best practice guidance. A clear statement of purpose outlines the nature of the service and the type of care and support it provides. A service user guide is also available, offering useful information such as how to make a complaint and access advocacy services. A quality-of-care review is completed every six months, in line with regulatory requirements, providing an opportunity for the service to reflect on and evaluate its performance. We reviewed the most recent quality-of-care report and found it includes an analysis of safeguarding matters, complaints, and identifies areas of good practice as well as areas for improvement.

## 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
We identified a risk to people's health and safety due to a breach of regulation 21(2). Support plans and risk assessments must contain accurate up to date information so that staff can provide appropriate care and support. In addition systems for monitoring food/fluid intake need to be suitably robust and completed consistently.	03/03/26

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

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