



Arolygiaeth Gofal
Cymru
Care Inspectorate
Wales

Inspection Report

1A Stockwell Road



1a Stockwell Road, Pembroke Dock, SA72 6TQ



01646687517



www.orbis-group.co.uk

Date(s) of inspection visit(s):

19/06/2025, 16/06/2025

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
Registered places:	5
Main language(s):	English
Promotion of Welsh language and culture:	The service provider is not meeting the Welsh language and culture needs of people and this requires improvement.

Ratings:



Well-being

Good



Care & Support

Good



Environment

Good



Leadership & Management

Good

Summary:

The service provides support for up to five adults with learning disabilities and complex needs. People receive support to be as independent as possible with their day-to-day lives. They are provided opportunities to engage in meaningful activities, voluntary work and health appointments which result in good well-being outcomes.

The care and support people receive is good. Care staff are kind and respectful and knowledgeable of the people they are supporting. Assessments are undertaken to ensure the service is suitable to support people with their ongoing needs. Personal plans are written in the voice of the person and provide clear guidance to support people to achieve their goals and aspirations.

The environment is good and is suitable to meet people's needs. People's bedrooms are personalised, and communal areas are warm and comfortable. A maintenance system is in place to identify works to be undertaken, and the provider is working closely with an internal maintenance

team to action any outstanding issues.

The leadership and management of the service are good. Management are committed to supporting people and care staff at the service. Governance systems are robust, and the Responsible Individual (RI) provides effective oversight of the service. Care staff receive training to ensure they have the skills to carry out their roles effectively.

Findings:



Well-being

Good

People receive support to be as independent as possible, and their views and opinions are respected. Care staff receive training in communication methods which are specific to people's needs and understanding and ensure their voices are heard. We saw positive interactions between people and care staff which were kind, respectful and dignified. People receive support to make informed choices, and weekly planners offer a range of meaningful activities which support social, emotional, and physical well-being. We saw photographs of people participating in favoured hobbies such as attending musicals, beach walks and bowling. We also saw photographs of people engaging in independent living skills tasks such as cooking, gardening and shopping. Care staff encourage people to identify opportunities, such as volunteering to support their skills and development. People told us they enjoy going on holidays and benefit from a break away from the service which promotes positive well-being.

People told us they like living at the service and spending time with care staff. One person told us; *"I like living here, I like the staff."* Family members spoke positively about the service and told us, they felt their loved ones are safe and receive good care and support. Family members told us; "I sleep every night knowing (person) is looked after," and "Care staff are excellent." People receive support to visit family members and ensure they are in regular contact through telephone calls.

People are encouraged to lead healthy lifestyles and receive support to make choices of balanced meals when developing menus. Meal choices have been visually formatted and developed to support people's needs and understanding. Opportunities to engage in recreational activities such as long walks, swimming and dancing promote people's physical well-being.

Monthly meetings are carried out and provide a platform for people to express their views and wishes on how the service is delivered. Questions have been developed in an 'easy read' format to ensure people understand and their voices are heard.

Care staff have good knowledge of the people they are supporting and understand their responsibilities to ensure people achieve their goals and aspirations. People told us they feel safe and can speak to care staff if they have any concerns. Care staff understand their responsibilities when raising safeguarding concerns and receive suitable training.



Care & Support

Good

People have access to information on what the service has to offer, leisure opportunities, safeguarding information and how to make a complaint. A guide has been visually developed and in a format which is suitable for people's needs and understanding.

The service provider carries out assessments to determine the suitability of the service and to ensure people can be supported in-line with their care and support needs. Information is gathered from a range of sources, including people, family members and stakeholders. Assessments are kept under regular review and inform the development of personal plans. Clear guidance is provided to care staff on how to support people with their daily routines and are written in the person's voice. They are strength-based, regularly reviewed, and identify people's care and support needs to achieve good well-being outcomes.

Behavioural plans follow a Positive Behavioural Support (PBS) model of care and provide guidance on how to support people to maintain a positive sense of well-being. Identified risks are assessed and mitigating measures promote safety to people and care staff. Daily routines are documented by care staff and include details of people's personal care routines, food diaries and recreational activities. Some records are not always completed consistently which the provider informed us they are currently addressing.

People are assisted with their ongoing health needs and receive support by care staff to attend appointments. They are all registered with a General Practitioner (GP), Dentist and opticians. Care staff support people with their specialist health needs and have access to Community Learning Disability Team (CLDT), Psychiatry and Epilepsy. Health profiles provide details of people's medical needs and how to support people with their emotional and physical health.

Effective medication systems are in place to store, monitor and record administration. Care staff are suitably trained in the administration of medication and weekly audits are completed which provide oversight and consistency of good practice.

People are suitably assessed under Deprivation of Liberty and Safeguarding (DoLS) and referrals are made in a timely manner. People are safeguarded and they can be assured their liberties are maintained.

The service provider is working towards the 'Welsh Active Offer, more than just words framework' and is making a significant effort to promote the Welsh language. The service has developed some communication methods in Welsh, celebrate St. David's Day and promote Welsh words and their meaning.



Environment

Good

The home is designed to ensure it is suitable to meet people's needs. Bedrooms are personalised and people choose how they like their rooms decorated. People have photographs of family members, personal items and pictures of favourite singers which is reflective of their personal interests. Suitable storage is provided for people's clothes and furniture to make their bedrooms comfortable. We found some of the equipment and furniture within people's bedrooms looked tired and in need of replacement. The service provider has taken action following the inspection to have these items replaced. Cleanliness of bedrooms is an ongoing issue and is regularly addressed in staff meetings. The provider is working diligently with people, care staff and agencies to provide a good standard of cleanliness within the home.

Bathrooms are clean and are stocked with hand washing items to promote good hygiene. The kitchen area has suitable equipment for people to use when making meals. Cupboards are well stocked, fridge and freezer temperatures are recorded and foods labelled once opened. The service has a Food Standards Agency score of 3 (satisfactory rating), although are awaiting a further inspection following improvements with their food hygiene practices. The dining room provides a large table with plenty of seating for people to sit and have meals together. The living room has a TV, an area for people to sit and play games and engage in arts and crafts if they wish.

The outside area has a spacious patio area with seating overlooking an estuary which is well used by people. There is a large grow bed where people grow herbs, flowers, and an apple tree. Outdoor equipment such as archery and tennis sets are available for people to use on nicer days.

Fire safety checks are carried regularly to ensure people's safety, and equipment is serviced regularly. A fire risk assessment is regularly updated, and people have Personal Emergency and Evacuation Plan's (PEEP's) in place which provide guidance to care staff on how to support during an emergency. Health and Safety checks are regularly completed and servicing of electrical, boiler and Portable Appliance Testing (PAT) have been undertaken.

There are maintenance systems in place which identify servicing and repairs. The provider has introduced a long-term development plan to improve some areas of the service in need of attention. The manager is working closely with an internal maintenance team to ensure repairs are carried out in a timely manner.



Leadership & Management

Good

The service provider has effective governance systems in place and the RI has a good oversight of the service. RI visits are undertaken regularly, and reports provide valuable information of consultation with people, care staff, families and stakeholders. Internal auditing systems are carried out by the provider and focus on reviewing the quality of care delivered to the people living at the service. Analysis of systems and processes such as safeguarding, staff training and records are undertaken, and actions are identified to improve the delivery of the service. A six monthly quality of care report provides a review of feedback obtained from a range of parties, auditing systems and visits. Scrutiny is provided within quality of care reports which identify trends, patterns, and developing areas of the service to improve people's positive well-being outcomes.

Care staff feel supported by the manager and told us they receive regular supervisions and appraisals. Records indicate they are mostly carried out in a timely manner and identify training needs for care staff. Care staff told us; *"(Manager) is great and very supportive"*, and *"(Manager) is amazing and very supportive."* Care staff undertake training suitable for their role and responsibilities and nearly all are up to date. They are required to undertake the All-Wales Induction Framework (AWIF) during a six month probationary period and register with Social Care Wales (SCW) the workforce regulator. From the care staff we spoke with, all had achieved a qualification suitable for their role and felt they could progress within their roles.

Team meetings are carried out monthly and minutes provide information of discussions held on key areas such as care and support, environment, and actions to improve well-being outcomes for people. The service ensures people have the required number of care staff on shift support them with their care and support needs. Staffing shortfalls are covered by the service's permanent care staff or supplemented by other services provided by the organisation, ensuring continuity and consistency of care for people. We saw effective recruitment and vetting checks for care staff to ensure they are safe to work with people at the service.

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.

Welsh Government © Crown copyright 2025.

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.