



Inspection Report on

Ty Penrhos

**Ty Penrhos
2 Beddau Way
Caerphilly
CF83 2AX**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

18/02/2025

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About Ty Penrhos

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Hafod Housing Association Ltd
Registered places	83
Language of the service	Both English and Welsh
Previous Care Inspectorate Wales inspection	
Does this service promote Welsh language and culture?	This service is making a significant effort to promote the use of the Welsh language and culture or is working towards being a bilingual service

Summary

People receive kind and considerate care and support, and people are generally happy with the service they receive in an environment which promotes their well-being. The service makes every effort to get to know the person. Some people are supported to have very good outcomes, including improved health and mobility. A comprehensive well-being programmes support people to do things which make them extremely happy. There is oversight of the care and support, but the provider is improving this through the continual development of electronic recording systems. This will include a review of nutrition, fluid and pain management. Personal plans are in place and reviewed regularly.

A compassionate manager is supported by a stable team to run the service smoothly. They follow organisational systems to audit and manage the service. The staff are recruited following safe procedures, are trained and competent in their roles. Some regular agency workers are used to supplement the team, working mainly to support individuals who require this level of oversight. The provider is considering the staff skill mix and shift patterns to ensure stronger working teams.

The provider has a responsible individual (RI) who has good oversight of the service and quality of care delivered. Some auditing tools currently used are not identifying some issues within the service, but the RI is fully aware of this and working with electronic system providers, local health boards and the management team to ensure this is rectified. The RI is approachable, is passionate about good care and carries out their regulatory duties.

Well-being

People, children and their families understand what care, support and opportunities are available to them to promote their well-being. The provider has a 'statement of purpose' and 'service user guide' to let people know what to expect from the service. These are available in Welsh. A detailed assessment takes place before someone chooses to stay at the service, giving everyone time to ask questions and agree what care and support needs to be provided. A social media page tells people and their families what's happening in the service and the well-being coordinators provide weekly plans of scheduled activities. People are offered daily choices, including where to be and what to eat and if they would like their medication. When people find it difficult to understand more complex matters, they have the help of family members or advocates to make decisions. The service communicates well with families to keep them informed. Care workers and nurses help people to understand their health options by being present at meetings with health professionals. This gives people reassurance as the staff member can help them recall and understand the information from such meetings.

The provider helps to keep people safe from abuse and neglect. Safe recruitment processes are followed, making sure all staff members are fit to work with people. All staff have suitable induction, training and supervision to confirm their competencies. The environment and equipment are routinely monitored and tested. The provider is in the process of decorating, replacing lights and other items to improve the environment. While we found the environment to be generally safe, this is going to be more robustly reviewed with increased auditing to pick up issues. This is also the case for electronic records which are in the process of being fully transferred over from paper-based systems. Audit improvements are nearly finalised to support better oversight of care and support, but in the interim, the management and clinical lead consider people's health and well-being.

People are supported to stay as healthy and happy as possible. The home has a suitable number of qualified nurses supported by a team of care workers. Medication is administered by the nursing staff and is generally monitored for its effectiveness. Professional health workers are involved in the review of people's care and support, providing expertise to guide staff on best practices to follow with someone. A GP visits the service weekly to review people who have been identified by the service as requiring additional health support. Some records are not showing the full care and support provided, for example, details around the nutritional intake. The provider is reviewing all nutrition and fluid provision to better accommodate people's tastes and preferred mealtimes. The service has good opportunities for people to maintain their mental health and well-being through a comprehensive programme of activities.

Care and Support

The service provides people with very good opportunities to improve their well-being through organised activities. Two well-being coordinators are being joined by a third to provide activities which engage people, promote socialisation and a sense of achievement. People know which activities will be taking place in different parts of the home or community through weekly planners advertised in each area, and through informative staff. People receive appropriate support to access the activities. Photographs show people taking part in events, and we saw people thoroughly enjoying a visit from the nearby primary school children who shared their poems. People make strong friendships during the arranged social gatherings. When people prefer not to take part in group activities, more individualised support is provided, such as supplying books in a person's preferred language. The service has access to a minibus which is well-used to support people to go out and about, and we saw photographs of people visiting a nearby garden centre.

People and their relatives are involved in shaping the care and support they would like to receive. The service consults people or their relatives as part of an assessment, personal plan writing and reviewing process. People and their family or representatives are encouraged to give feedback about their care and support as part of continual improvement. Most people are very happy with the service they receive and are helped to achieve their identified outcomes. People who live with dementia or those who find it difficult to voice their opinions are supported through family members or advocates. There are well organised systems to apply for representation when a Deprivation of Liberty Safeguard (DoLS) needs to be considered. A cook has made every effort to consult with people to see how food can be improved. The RI and managers have identified how they will address nutrition, fluid intake and mealtimes following some less favourable feedback about food provision, and this process has started.

The service mostly promotes people's physical and mental health. The service involves health professionals to support with people's medical needs when required, including those who support with risks around choking, skin conditions and dietary needs. The service follows the guidance of the professionals, working in partnership to achieve the best possible outcomes such as improved mobility or weight gain. People who require involvement of the mental health team receive this, and their medication is kept under review. Medication is audited, but the manager is looking at the administration of pain relief medication, especially medication which can be given when required, and how this can be better monitored for its effectiveness. Electronic systems are still being developed so daily notes and other records are more easily analysed to help identify people who may be at greatest risk, for example, those who are not meeting the required fluid intake each day. There is minimal impact as people are mostly supported by a staff team who know them well. We are advised by the manager there is a good working relationship with the GP who visits the service weekly to review any people they may have concerns about, and they work together to promote people's health.

Environment

The layout and location of the home promotes people's well-being. People can access a nearby pub and local shops. People mostly enjoy going further afield to places of interest. The home arranges this through their well-being coordinators. The home has wide corridors, lifts and space for people to move around. People can freely move between different areas of the home if it is safe to do so. Security measures are in place to help keep people safe, including a signing in register and doors which open with a pass key. Safe access in and out of the home ensures people who require support to enjoy the community can do so safely. Pleasant courtyard gardens and balconies offer people outdoor space in warmer months. A central space known as 'The Street' provides a meeting place for socialisation and events. We found a variation in the presentation of bedrooms, with many having highly personalised rooms, with a few having more sparse accommodation. The deputy manager explained this is a matter of choice of the person and their family representatives. Where people choose, they have personal items of interest around them.

The provider has systems in place to monitor and maintain the environment and equipment. The home currently has one full time maintenance person. A second person is currently providing cover elsewhere as a priority. This has meant some ongoing renewing and redecorating is taking longer than originally anticipated. There is no major impact on people and the provider assures us there is additional support available to ensure outstanding work will be completed soon. Routine audits and schedules of cleaning and maintenance take place. We found most of the environment in a good, clean condition. Some matters we found were brought to the attention of the management and they took immediate action to address this. The presentation of people's rooms during the day is the responsibility of care workers. We found variation in the attention to detail with this. Equipment and services, such as gas and electricity are checked and tested as required to maintain a safe environment.

People have access to the equipment they require, and this is in good order. Many people living in the home require specialist equipment which is secured through referrals to the local health board. The home provides some equipment and the need for this is reviewed daily. We saw the home was quick to respond in providing some specialised equipment for one person to support their well-being.

Leadership and Management

The provider has arrangements in place to oversee the service and provide relevant support. A responsible individual (RI) visits the service, considers the quality of care by speaking to people and staff to understand their experiences of the service. The RI also considers documented information when reviewing the performance of the service. Currently there is a transfer of information from paper-based systems to electronic. The provider continues to develop the electronic system to support better oversight. This includes improving auditing around clinical measures to inform actions required. The RI has assured the regulator this is near completion, with only a slight delay due to innovative working with the local health boards to ensure the information being produced is in alignment with their requirements. The provider has policies and procedures which are readily available for staff to follow. A 'statement of purpose' and 'service user guide' are informative and kept up to date, providing people with an outline of what the service can offer. Key information is available in Welsh and the provider asks people if they would like their service delivered in Welsh. The RI is highly respected, with staff telling us they are approachable, proactive and very supportive.

An experienced manager and wider management team run the service smoothly and mostly have oversight of the day-to-day service delivery. Management work closely as a team, developing good systems to ensure all parts of the service are well organised. Audits are completed rigorously but the systems currently in place have not picked up some issues we found during our inspection. Immediate action was taken to address this. Staffing levels are arranged in accordance with people's needs. While we found this is mostly appropriate, we saw some people impacted by a lack of more senior staff availability and use of agency staff in one area. The management have given assurances this will be considered going forward to ensure a better skill mix within each area of the home. We saw team leaders throughout the service meeting daily to share important information and most staff inform us there is excellent teamwork within the service to support people's well-being.

The service recruits, trains and supervises staff appropriately, encouraging them with their personal development requirements. The organisation has a specialist department to manage the safe recruitment of staff. We saw appropriate documentation on personnel files including checks to show staff are fit to work with people. We saw good, documented evidence of staff being inducted into the service and receiving mandatory and additional training. Improvements have now been made to ensure all staff receive relevant supervision with their line manager. This gives staff opportunities to discuss their developmental needs, including training, qualifications and career opportunities. The service is highly successful in supporting care workers to develop, some of whom progress to be nurses.

Summary of Non-Compliance	
Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	
6	The service provider is not ensuring that the service is provided with sufficient care to prevent impact on people	Achieved
36	Care staff do not receive formal one to one supervision with their line manager as frequently as required	Achieved

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