Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Ty Melin Residential Home for the Elderly

Ty Melin Residential Home, 412-420, Cowbridge Road East, Cardiff, CF5 1JL

02920230657

www.tymelinresidential.co.uk

The inspection visits for this service took place between 11/09/2026 and 17/09/2026

Service Information:

Operated by:	Mary Griffiths
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care and support for people with a physical disability, Care and support for people with mental health needs, Care and support for people requiring short-breaks or respite care, Care and support for people with a learning disability, Care and support for people living with dementia
Registered places:	34
Main language(s):	English
Promotion of Welsh language and culture:	The provider is not promoting the Welsh language and culture needs of people, and this requires improvement.

Ratings:

Well-being	Good
Care & Support	Good
Environment	Requires Improvement
Leadership & Management	Good

Summary:

Since the last inspection the service has implemented several improvements, these consider well-being, care and support, the environment and leadership and management. The service has listened to feedback and focused on people's well-being and experience. They have implemented new activities and places for people to socialise. A new activities staff member provides regular opportunity for people to access the community. Goals and aspirations are now more person-centred, the service continue to work on this and drive improvement. One relative said, "*Could not be more grateful for the service they provide, and the way in which it is delivered."* Well-being is 'Good'.

Care and Support is 'Good'. Plans are detailed and informative. Risk assessments are in place which identify clear ways to reduce risks. Medication is appropriately administered in a safe way. Infection control measures are in place, and the service are developing improved systems to

maintain sufficient oversight of this. Care staff are consistent and we received consistent high praise for them. One relative said *“The most important thing for us is that the staff really care about X.”*

The service has worked hard to address improvements in the Environment. Areas where we identified risk have been actioned and there is ongoing work in relation to decorating and managing wear and tear. The service has implemented some systems to help plan and prioritise work however we found ongoing work is required to ensure accurate, sufficient and effective oversight is maintained. The Environment ‘Requires Improvement’

The service has listened to our feedback and made several changes to improve the service. We saw a clear financial investment to drive improvement. The Responsible Individual (RI), team of managers and administrators have worked together to take action, positively impacting people’s experience of the service. Whilst we note some improvements in relation to effective and sustainable oversight, Leadership and Management is ‘Good’ overall.

Findings:

Well-being — Good

People benefit from a provider who listens and acts. We found that regular resident meetings mean people can share their views and ideas, following a suggestion from residents a pub has been set up in an unused lounge area. The area has a traditional pub feel, with tables and chairs, drinks and snacks in addition to a juke box machine and dart board. One member of staff told us *"Residents appear happier and have more activities to do since the pub being put in."* There is an activities planner in place which includes art, bingo, pub games, music and movement, one to one activities, Holy communion, baking class and karaoke. One lounge has been turned into an 'Activities room' there are board games and activities available and accessible. Relatives praised the service and care staff saying, "*Carers provide excellent one to one with X,"* and "*X is very well cared for and treated more like a member of the family,"* and "*They send me videos of her dancing."*

People are treated with dignity and respect by care staff who know them well, one relative said, *"The staff know my mother and me, and we know them." W*e saw choices are offered and staff approach people with kindness and understanding. People appear to hold good relationships with care staff, and several have worked at the service for many years providing consistency and continuity. One relative told us, *"The very low turnover of staff is wonderful."* Relationships are promoted through activities and events, bringing people together. We saw relatives visiting on the day of inspection. Relatives describe their loved ones as 'happy' and settled'. The service has appointed a dedicated staff member for activities ensuring people have the opportunity to regularly access the community and attend events. One relative told us, "*I know she's in the best place possible".*

People told us they like their rooms and some are very personalised. We saw efforts to improve people's sense of belonging by offering choices in paint colours so rooms can be individually decorated and personalised. There are a range of areas people can relax in with others or use their bedrooms to have privacy. There are plans in place to ensure the environment considers dignity and infection control, such as new bathrooms being fitted. The service continues to drive improvement at the service considering people's well-being outcomes. There is evidence to show the service is committed to supporting people to develop individual goals and aspirations alongside their required health outcomes. There is some Welsh signage in the home, and the manager told us the Statement of Purpose is available in Welsh. The Statement of Purpose has been reviewed and updated. We discussed with the provider ways to enhance the Welsh Active offer.

Care & Support — Good

People and their relatives praised the service. Feedback viewed continuously describes care and support as 'Excellent'. Relatives told us, "*X is very settled and happy,*" *"It's very good care and personalised,*" "*I cannot fault the care my mum receives",* and "*We receive a phone call whenever there is an issue with health, medication or other issues.*" Personal plans are much improved; there is an electronic system in place to help record information. One staff member said, *"The residents are a priority to everyone."* Some documents we viewed such as a 'Life history' is extremely detailed and person centred; this helps care staff understand the person and their interests. We discussed with the service utilising this information to aid in supporting people identify achievable and person-centred outcomes relating to hobbies, activities and interests. Documents are regularly reviewed to ensure they are up to date.

Daily records are good and evidence care and support is mostly carried out in line with the person's plan. One relative told us, "*They do take really good care, X is always clean and tidy, smartly dressed*." Care staff record accidents and incidents, and this information is reviewed by management, who identify any patterns and addressing potential improvements. We discussed with the manager to ensure they are clearly recording their oversight of records to show actions taken. Relatives told us in the event of an incident, communication is excellent and managers act *"Swiftly, efficiently and with care."* Risk assessments are much improved with specific details on measures on how to reduce potential risks.

Medication is well managed. There are organised systems in place which aid staff administering medication. Documents are clear and include important information about the person including their picture, date of birth and any allergies. Care staff receive the required competency checks, to ensure their skills and knowledge remain up to date. The service has sought additional training for senior staff to enable timely assessments to be carried out. We saw health professionals are involved in the service, and managers told us they are quick to seek support if they need to. The GP visits weekly and we saw the involvement of Dieticians, Speech and Language Therapy and Dentists. Commissioners gave positive feedback regarding the home's improvement.

Infection control has been considered and action taken following our previous inspection. The service has recruited more domestic staff to aid in cleaning. The service has been inspected by the Food Standard agency and received the score of 5, meaning the service has 'very good' hygiene standards. Personal Protective Equipment (PPE) is available at stations throughout the home, providing easy access for care staff. We saw care staff using PPE appropriately. We noted daily checks and audits on the environment are not always accurate. We discussed with the manager delegating responsibilities to enable layers of oversight of infection control.

Environment — Requires Improvement

The home is welcoming and appears clean and is inviting. One relative told us, *"Every member of staff greets me as a friend, make me feel so welcome."* The home is close to local amenities, and we saw some people enjoy going out to local shops and parks independently or with support. Several rooms have ensuite facilities which are clean and some rooms are very personalised. There are several places for people to sit and relax around the home, including lounges and dining areas. There is a small outdoor space available at the rear of the property. The service has made several improvements to the service since our last inspection. Areas of significant wear and tear have been addressed; there is ongoing painting and decorating being carried out. One staff member told us, *"The colour and decor on the walls brightens the place up and improves moods."* There is a new staff room available ensuring staff have a place to safely store their belongings and can enjoy their break. The maintenance person attends the home weekly, ensuring jobs can be completed in a timely manner. A planned maintenance schedule helps the service identify works in advance; we discussed ways to improve this to ensure priorities can be identified and actioned swiftly.

The home is comprised of several buildings, with separate staircases and corridors, leading to different communal areas of the home and people's bedrooms. The provider is investing in the service to drive improvement and ensure it is safe. There are new bathrooms ordered, ongoing decorating, new dryers and kitchen work surfaces purchased. In addition, the fire panel system is being updated. Health and safety systems are in place. Fire wardens have received further training to ensure they know their responsibilities. We found personal emergency evacuation plans have been improved and include more detail. We discussed with the provider considering areas of potential risk identified, such as steps at the back of fire exits and uneven ground in the garden. Fire drills are carried out and managers told us how they use role play to imagine real life emergencies ensuring their equipment and plan is effective. There is firefighting equipment throughout the building which is checked by external agencies.

The home receives regular health and safety checks and servicing on equipment to ensure it is safe to use. Oversight has improved and systems in place to aid governance. However, the service needs to ensure that thorough oversight is maintained of the environment. We found some audits completed not to be accurate and areas of potential risk which had not been identified by the service. The fire risk assessment in place identifies several areas requiring action. Whilst we note the RI is taking action; we discussed proactive ways they could identify issues themselves. Whilst the home is clean, we found some areas to be missed and require a deep clean. This remains an area for improvement, and we expect the provider to make the improvements.

Leadership & Management — Good

We saw several improvements have been made across the service. Managers have listened to feedback and taken action. The Deputy manager told us, "*It has been positive, we've all pulled together,"* and the manager told us they are working hard to drive improvement. The service continues to work on embedding systems and oversight processes to ensure these identify improvements. The training matrix in place provides a clear overview for managers to identify any gaps or improvements. We saw that areas of improvement in relation to training have been addressed. Care staff receive their supervisions and staff meetings. Most staff told us they feel supported by managers, saying "*They make sure the staff are being taken care," "Always make time for us," and "We have meetings to make sure everyone is okay."* Staff told us that the manager and RI are visible at the service, listening to feedback and investing in the service, they have both worked at the service for several decades. One staff member said, *"The leadership, from the managers to the owners, genuinely care about the people here."* The RI completes their regularity duties, gaining feedback from people and staff as well identifying improvements required. We discussed with the management team ways to improve their auditing systems to make these more thorough, robust and to ensure quality over quantity.

People and their relatives describe care staff as "*Amazing," "Marvellous,"* and *"Wonderful."* Most care staff enjoy their roles and said, "*I love working for Ty Melin," "I can honestly say this is one of the best companies I have ever worked for"* and *"I wouldn't go to another company."* Staff are appropriately registered with Social Care Wales, the workforce regulator and complete a Disclosure and Barring service check. Staff members are supported to progress and develop, completing new qualifications. The manager is booked onto training to develop knowledge, and we discussed resources available to promote continuous development and learning. One relative said, *"I cannot speak highly enough of the staff."* Rotas show that staffing levels are reflective of the services statement of purpose and that managers cover when required to ensure staffing levels are maintained. Some staff told us they sometimes feel 'short staffed', especially during times of annual leave and sickness. We discussed with the provider considering the deployment of staff during busy times and the need to ensure staffing levels are reviewed and remain sufficient.

The service has considered the leadership structure and employed an additional administrative team member, as well as developed key worker roles. This aids in managing the day-to-day running of the home. The service is in the process of embedding layers of oversight to help ensure governance systems are accurate, effective and robust.

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 could be placed at risk if the provider cannot rely on their systems to aid them in identifying improvements required in order to improve the quality of care.	11/09/26
People may be at risk as there is insufficient oversight of the premises to reduce risk and enhance people's experience.	23/02/26

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

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