



Ty Dyfan



Ty Dyfan, St. Brides Way, Barry, CF63 1DU



01446736086

Date(s) of inspection visit(s):

17/06/2025, 25/06/2025

Service Information:

Operated by:	Vale of Glamorgan Council Adults and Children's Services
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:	27
Main language(s):	English
Promotion of Welsh language and culture:	The service provider anticipates, identifies, and meets the Welsh language and culture needs of people.

Ratings:



Well-being

Good



Care & Support

Good



Environment

Good



Leadership & Management

Good

Summary:

Ty Dyfan Residential Care Home is based in Barry and can accommodate 27 residents with residential and personal care needs. Care documentation has improved since the previous inspection and is reflective of people's care needs, although we identified where some improvements are required. Care staffing levels are good; care delivery is provided in a timely manner and care staff have good understanding of people's needs. Staff receive general mandatory training with additional training carried out in specific areas. People live in an environment which is homely and pleasant and where recent improvements have been undertaken and ongoing. The home environment is secure. Infection prevention and control processes are in place to reduce the risk of infectious diseases being spread throughout the home. The Responsible Individual (RI) is available at the service on a regular basis ensuring quality assurance is undertaken. People live in an environment that is safe, clean, and fit for purpose. The service works with external agencies and notifies the Regulator of incidents and safeguarding matters in a timely manner to ensure the service is acting in people's best interests.

Findings:



Well-being

Good

People are treated with dignity and respect. Care staff know the people they support extremely well and provide care with kindness and respect. Care staff are appropriately trained and have the knowledge required to meet people's needs. The RI has good oversight of the service and is available at the home mostly on a regular basis and carries out quality assurance monitoring in line with regulatory requirement. People receive care without delay, care staff levels are good ensuring they have enough time to do their jobs and to take time with visiting professionals and families. People receive their medication safely and in line with their prescribed medication and have access to health care services when required, however we found some improvements are required.

People have the support they need to maintain their physical, mental, and emotional health and their needs are anticipated. We looked at a sample of care documentation and found improvements had been made. Care files are important documents which should outline a person's entire needs, and the actions required from staff to meet those identified needs. We found the documentation evidenced important information to guide care staff in relation to people's preferences, personal care needs and medical conditions. Personal plans mostly provided guidance on personal likes and dislikes, social interests, daily routines, as well as all aspects of life the person needs support with. We discussed with the manager where further improvements should be made.

People have a good choice of meals to suit their nutritional needs and preferences. Kitchen staff have a good understanding of people's likes and dislikes. The service has a hygiene rating of five (very good) from the Food Standard's Agency. People's dining experience is a sociable time which people enjoy. The dining area is pleasant, light, and airy, and we saw people sitting spending time and chatting.

People are protected from harm and abuse. The home has a robust safeguarding policy in place and staff receive training in the safeguarding of adults at risk of abuse. Care staff we spoke with told us they are happy working at the service and feel supported by the management team. We found the home is well maintained with improvements and refurbishments ongoing throughout. Safety checks are completed and fire safety taken seriously. Personal Emergency Evacuation Plan (PEEPs) are available; however, we noted improvements are required to reflect the people living at the service. Care staff are recruited safely and pre-employment checks carried out. Care staff, where required are registered with Social Care Wales, the workforce regulator.



Care & Support

Good

People receive care and support at the right time. Ty Dyfan has good staffing levels that ensure people do not wait for support. Care staff have good understanding of people's needs and engage with people positively. People we spoke with told us "*Staff are kind and caring,*" and "*I am well looked after here.*" We observed staffing levels sufficient to meet the needs of people and we saw staff responding promptly to people's needs throughout the visit. We saw several people who chose to remain in their rooms, supported with good staff presence and access to a call bell. People are assisted in a timely manner with dignity and respect, and we saw people acknowledged and listened to, to ensure their emotional needs and wishes were met. Personal care documentation overall contained the required information, and we discussed where further improvement could be made to ensure continuity. We were assured this matter would be addressed. We saw evidence in care files of support from other visiting professionals such as GP and dietician. Applications are made, and records in place, in relation to Deprivation of Liberty Safeguards (DoLS) for people who do not have the ability to make decisions about aspects of their care.

People have a voice to make choices about their day-to-day care. People spend their time doing things that matter to them and mostly have their own daily routines and have options to choose from regarding available activities. Although there are no designated activity staff, we saw care staff had time to sit and spend time with people throughout the visits. We were told that special occasions are celebrated and external entertainment such as singers visit on a regular basis. People have a choice of meals and drinks to support their nutritional needs and told us the meals are good. We observed the lunch time meal experience and saw people enjoying the various meals provided. Care staff and kitchen staff have a good understanding of any specific dietary requirements. We saw several instances where care staff were very caring and understood how best to communicate with people living at the home.

Medication is overall well managed. The service has systems in place for medicines management. People receive their medication as prescribed by staff who are trained in how to administer medication safely and there is an up-to-date policy in place. We discussed the medication administration charts (MARs) required more robust auditing to ensure all the required information is documented as required. The service promotes hygienic practices and manages risk of infection, and we saw staff wearing personal protective equipment when required.



Environment

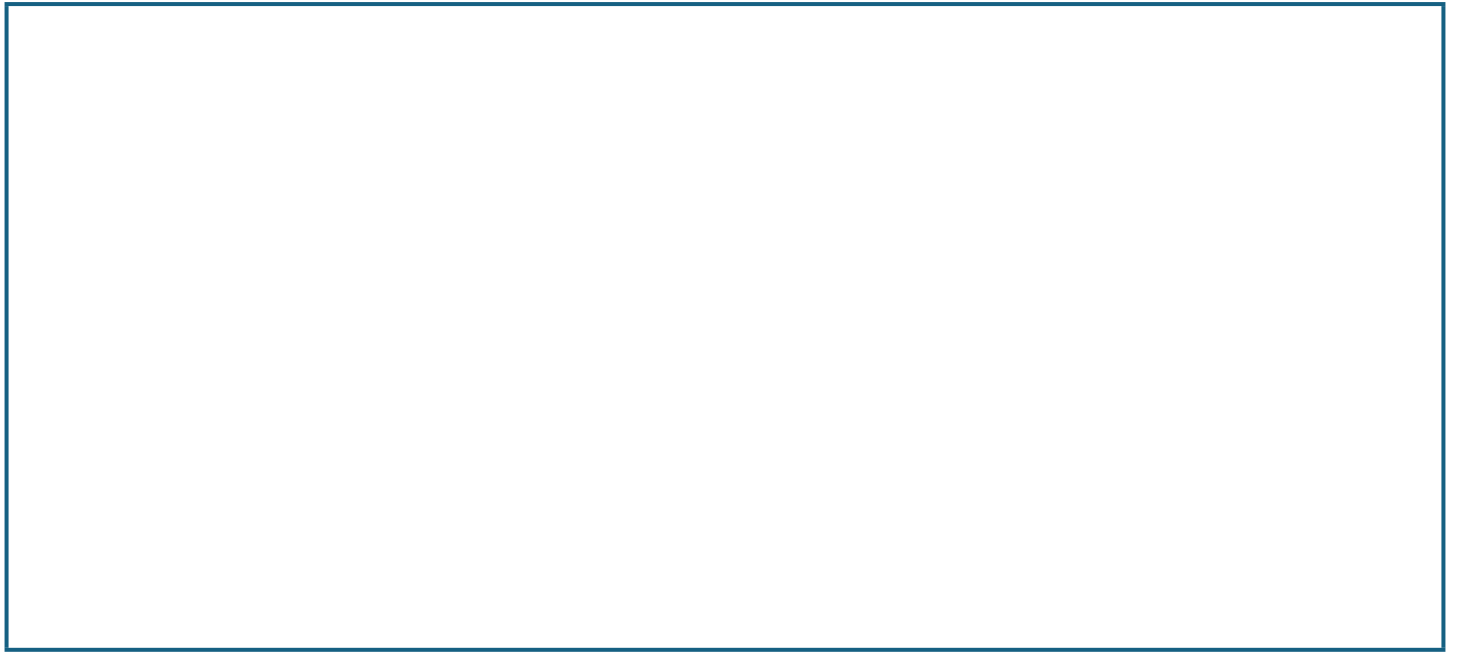
Good

People's needs are met because the providers systems for monitoring and maintaining the physical environment and equipment in the home is robust. We saw visitors welcomed into the home each visit who were complimentary about the service and the care provided. Comments included *"It is homely here; staff are kind and helpful.* Staff told us they felt improvements to the environment had made a difference one staff told us *"It is pleasant to work here, I would not work anywhere else, I have been here many years."* The home felt clean and fresh with no malodours throughout. The Food Standard Agency (FSA) has awarded the service a rating of five (very good).

People can be assured they live in a suitable environment. Ty Dyfan Care Home is located in a residential area of Barry that benefits from local amenities and good transport links. The home is set over two floors accessible by a passenger lift or stair lift. There is ample communal space including a large lounge and dining area that enables people to spend time together and participate in group activities. People are encouraged to personalise their rooms to make them as homely and comfortable as possible.

People live in a safe environment. On arrival our identification was checked, and we were asked to sign the visitors book before we were permitted entry. This indicates that visitors to the service are monitored to ensure only authorised people have access. We did a tour of the home and found the environment to be safe. Hazards have been reduced as far as possible; window restrictors are in place and harmful chemicals are locked away safely. There is a fire risk assessment in place and all residents have a personal emergency evacuation plan (PEEPs) in place which guides care staff on how to support people in the event of an emergency. However, we identified where improvements are required regarding PEEPs which the manager addressed immediately. The building is generally well maintained, and all safety checks including gas and electricity safety testing are completed within legal requirements.

The home is welcoming, and we observed people spending quiet time alone or with others in the various communal areas. People told us they enjoy spending time in the large gardens and about the organised garden parties which take place in the warmer weather. We saw the gardens required attention and the RI told us this was due to be carried out the following week.





Leadership & Management

Good

People are supported by care staff who are appropriately trained. We viewed the recent training record and saw most training was up to date. Induction and mentoring of new care staff work well, and staff retention at the service is good. We spoke with staff during our visit who told us they found the management team supportive and approachable. Staff we spoke with told us they enjoy working at the home and feel valued and listened to. Policies and procedures for safeguarding and whistleblowing are accessible. The RI spends time most days at the home and engages with staff, relatives, and residents seeking feedback. This demonstrates the RI undertakes formal monitoring as legally required.

Quality assurance takes place regularly and includes seeking the views of the people who use the service and/or their families. The manager told us they were looking to strengthen and improve their current quality assurance processes which indicates that the provider is committed to providing a quality service and making improvements where required. There are policies and procedures in place for the smooth running of the service and to guide care staff of what is expected of them.

People have access to information. A statement of purpose (SOP) is available which reflects the service's vision. Staff are supported to register with professional bodies such as Social Care Wales the workforce regulator. Care staff are happy working at the service and speak highly of the organisation and comments included *"I care for everyone here as if they are my own, I know if there is something wrong."* Care staff receive a formal supervision in line with regulatory requirements and are able to speak with the manager or deputy manager at any given time.

People can be assured that staff are safely recruited. We examined a selection of care staff personal files and found that they contain the required information including identity checks and full employment histories. Pre-employment checks such as Disclosure and Barring Service (DBS) certificates and references are applied for prior to employment commencing. These checks are important as they determine a person's suitability to work with vulnerable people. All pre employment documentation is stored at the Local Authority offices.

The management team work with external agencies and notify the Regulator in a timely manner to ensure the service is acting in people's best interests.

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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