



Ty Iscoed



Ty Iscoed Home For The Elderly, Woodland Drive Newbridge, Newport, NP11 5FQ



01495243189



www.caerphilly.gov.uk

The inspection visit took place on 15/06/2026

Service Information:

Operated by:	Caerphilly County Borough Council Adults and Children's Services
Care Type:	Care Home Service
	Adults Without Nursing
Provision for:	Care home for adults - with personal care
Registered places:	30
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

Good



Environment

Good



Leadership & Management

Good

Summary:

Ty Iscoed is a 30-bed care home located in Caerphilly County Borough. The service provides residential care, including long-term and short-term stays, for people living with dementia. The home offers a comfortable environment with communal living areas, accessible outdoor space and opportunities for people to maintain links with family, friends and the wider community.

We found people are treated with kindness and respect by staff who know them well. People are supported to make choices about their daily lives and take part in activities that promote their well-being. The service maintains positive links with the local community and provides opportunities for people to remain socially engaged. People receive care from staff who are committed to meeting their needs. Appropriate arrangements are in place to support safeguarding, medication management and infection prevention and control. The environment is clean, welcoming and supports people's privacy, dignity and independence. Ongoing improvements to the premises

demonstrate a commitment to enhancing people's experience of living at the home.

The manager and responsible individual provide clear direction for the service and have identified areas for further development. They demonstrate a commitment to continuous improvement and are responsive to feedback.

We identified areas for improvement relating to staff training and supervision. The manager and responsible individual acknowledged these areas and have started to implement improvements. We will consider the progress made during the next inspection. Overall, we found positive outcomes for people and rated all four themes as good.

Findings:



Well-being

Good

Staff promote people's well-being by offering meaningful choices throughout the day. People choose how they spend their time and take part in activities that matter to them. This includes choosing meals, pursuing hobbies and accessing opportunities in the community. During the inspection, staff asked people about their meal preferences and responded in a kind, respectful and caring way. People choose whether to eat with others in the dining room or independently, supporting their comfort and autonomy.

Staff support people to maintain a positive sense of well-being through a balance of planned activities and meaningful day-to-day interactions. During the inspection, people took part in a session led by an external provider. They sang, danced and engaged with sensory scarves. People appeared to enjoy the activity and participated with enthusiasm.

The service provides a varied programme of seasonal and cultural activities. People celebrate occasions such as St David's Day, St Patrick's Day and Mother's Day. Staff support people to access the local community using a shared bus. Recent trips included visits to Big Pit. The service has developed positive links with the local community. Children from the local primary school and representatives from the local church visit the service to take part in crafts and social activities. These opportunities help people maintain relationships and strengthen their sense of belonging.

Staff arrange a range of events within the service, including silent discos and visits from entertainers. They also create opportunities for people to spend time with family and friends. These experiences support people's emotional and social well-being.

Further development is needed to ensure people's personal well-being goals are recorded and reviewed consistently. This would help staff evaluate outcomes and demonstrate how they support people to achieve what matters to them. During inspection there was no impact on people as staff know people well.



Care & Support

Good

Staff keep people informed about their care and any changes to the support they receive. People told us they feel involved and updated about matters that affect them. Professionals also provided positive feedback about the service. One professional told us their thoughts based on working with the service, *“Your team are always vigilant, and I know if they have any issues, they will raise them. This is always positive and reassuring.”* Relatives described staff as welcoming and friendly and said they feel relaxed when visiting.

Staff follow appropriate recruitment processes, including pre-employment checks. The service ensures staff complete Disclosure and Barring Service (DBS) checks and are registered with Social Care Wales. Staff complete safeguarding training and follow the service’s safeguarding policy. The service also has systems in place to help keep people safe.

People are protected as much as possible from the risk of infection. Premises and equipment are clean and hygienic, and food hygiene practices are good. The service has arrangements in place to assess, manage and reduce the risk of infection. Roles and responsibilities are clearly defined and reflect current national guidance.

The manager completes regular medication audits to monitor practice and support safe medication management. The service demonstrates an open approach to learning from incidents and near misses, helping to improve practice and reduce future risks.

Staff provide care and support that meets people’s needs. However, care planning and recording systems require further development to fully reflect personalised care. Care plans do not always provide sufficient detail about people’s preferences, life histories and personal outcomes. Improving care records would provide better assurance that staff consistently deliver person-centred care.



Environment

Good

The service promotes people's well-being by providing an environment that supports privacy, dignity and choice. The design and layout of the home enable people to choose how and where they spend their time. People can spend time independently, socialise with others or meet with visitors in a range of communal and private areas.

The manager has made improvements to the internal environment. This includes updating décor in communal areas and corridors to create a more welcoming setting. There are plans to continue these improvements, including replacing carpets with wooden flooring. This will improve the appearance of the home and support effective infection prevention and control.

The manager has reviewed how available space is used to promote social interaction. During the inspection, the manager described further developments to increase communal areas and create spaces that reflect community settings. Relatives spoke positively about these plans and felt the proposed changes would improve people's experience of living at the service.

Staff maintain outdoor areas that are safe, accessible and welcoming. Recent improvements include additional seating beneath trees and raised flower beds. These changes support people to spend time outdoors and take part in activities in a comfortable and inclusive environment.

People personalise their bedrooms to reflect their preferences and identity. They choose colours, furnishings and personal belongings to create familiar surroundings that are important to them.

The service has security arrangements that help keep people safe while promoting independence. An electronic entry system controls access to the building. Staff monitor visitors and confirm the purpose of visits when required. Relatives told us staff are welcoming and said they feel comfortable when visiting the service.

The provider ensures the premises comply with relevant legislation and national guidance relating to health and safety, fire safety and environmental health. The service also meets Food Standards Agency requirements and achieved a food hygiene rating of 5 at its most recent inspection.



Leadership & Management

Good

The manager and responsible individual (RI) demonstrate a commitment to improving the service. They have identified areas for development and have established plans to support improvement. These plans set out priorities for the service and provide a clear direction for future development. The service has systems in place to gather feedback from people, relatives and professionals, helping leaders understand people's experiences and identify opportunities for improvement.

There are effective arrangements for the oversight of medication. The manager regularly reviews medication records and identifies any errors or areas for improvement. Where issues arise, the manager addresses these with staff through reflective discussions to promote learning and reduce the risk of recurrence. When patterns of errors are identified, staff receive additional training and competency assessments to support safe practice.

People benefit from the support of a key worker. Key workers complete regular reviews to ensure staff have up-to-date information about people's needs and preferences. This helps staff understand people well and provide care that reflects their individual circumstances. Information gathered through key worker reviews is intended to inform personal plans and keep them current. However, we found the quality and accuracy of information recorded within personal plans was not always consistent. There was no identified negative impact on people during inspection. However, the manager recognised this and intends to strengthen oversight arrangements to improve the quality of care planning and recording.

The provider has policies and procedures that are appropriate to the needs of the service. The provider reviews these regularly to ensure they reflect current legislation and national guidance. This supports staff to understand their roles and responsibilities and promotes consistent practice across the service.

People may be at risk of receiving inconsistent care and support because staff do not receive regular supervision or complete up-to-date training to ensure they have the knowledge, skills and support required to carry out their roles effectively. The manager and RI are aware of these shortfalls and have started to address them. Continued progress in this area will help strengthen staff development, improve oversight and provide greater assurance that people receive consistent care and support. We will review the impact of these improvements at the next inspection

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 are not necessarily supported by staff who are appropriately supervised or provided with training appropriate to their role. no impact identified during inspection however there is a potential impact from this.	24/03/22

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

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