Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Troed Y Rhiw

Troed-y-Rhiw House, Troed-y-Rhiw Road, Mountain Ash, CF45 4LD

01443 473520

The inspection visit took place on 14/11/2025

Service Information:

Operated by:	Rhondda Cynon Taff 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, Provision for learning disability, Provision for mental health
Registered places:	24
Main language(s):	English
Promotion of Welsh language and culture:	The service provider makes an effort to promote the use of the Welsh language and cultural, or is working towards a bi-lingual service.

Ratings:

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

Summary:

Troed y Rhiw is a service operated by the Local Authority for older people living with dementia and older people with residential care needs. It is located in a residential area of Mountain Ash, within close distance to local amenities and facilities.

People's well-being is good. People are treated with dignity and respect. People are supported to stay healthy by care staff who know them well, with people reporting they are happy at the service. Care and support requires improvement. The service needs to ensure support is always provided in a way which protects people's well-being and safety, and ensures medication is safely managed. The environment is good, providing a well-maintained home for people to live in. Ongoing investment helps create a homely setting. The leadership and management of the service requires improvement. Improvements have been made with the service ensuring care staff are up to date with mandatory training and receiving regular supervision. Staff report they feel well supported. Improvements are needed to management oversight to ensure any risks to the health and safety of individuals are identified and reduced as much as possible.

Findings:

Well-being — Good

Troed y Rhiw supports people to maintain their well-being. People are treated with kindness and dignity and encouraged to maintain their independence and use their strengths. All feedback from people and families about the service and the lives they lead is very good. We were told "*It is the best home I have lived in, and I have lived in a few*". People can do the things they wish, with a variety of activities and opportunities arranged for them. The service supports people to make their own choices, for example getting up and going to bed when they want, doing the activities they want, and spending time with visitors. Where people have difficulty communicating or making decisions, the service works closely with people's families, representatives and professionals to ensure decisions are in the person's best interest. The service has very good lines of communication with relatives, keeping them informed and involved. Relatives advise they can visit their family member whenever they wish.

There are clear personal plans in place for care staff to follow with input from external health professionals. Professionals told us they have seen an improvement in people's health since they moved to the service. People are supported to receive their prescribed medication as directed. Appropriate infection control measures are used. The service is kept clean throughout. Healthy meal options are provided, with staff understanding specific dietary requirements and how to meet these.

The service's safeguarding procedures help promote people's well-being. Where people need a secure environment to help keep them safe, this is in place. Information on how to raise a complaint is available in the service user guide. Families and people say they are comfortable the service is safe. Recruitment checks and procedures are completed and followed for all care staff. We saw risk assessments in place to help keep people and staff safe.

People live in an environment which supports their well-being. There are sufficient communal areas which are clean, homely, and allows people to spend time together. People's rooms are personalised according to their preferences, promoting a sense of familiarity.

Care & Support — Requires Improvement

Care and support requires improvement. Most interactions were kind and positive. People told us they are happy with the care and support. People and relatives are complimentary about the service, stating, "*I am well looked after*" and were extremely complimentary about the service. Personal plans are person-centred with evidence of people being involved in their care and reviews. We saw relative input in files, enhancing people's histories and preferences. The files are clear how to support the person to achieve their personal outcomes. Where there are language barriers or communication needs, detailed plans are in place. There is evidence people's living skills and independence is being promoted. Appropriate referrals are made to external health professionals and advice is followed. Professionals we spoke with stated "*I can rely on them to follow advice*" and they "*would be happy for my loved ones to come here*". However, improvements to care and support are needed. We saw an instance of incorrect manual handling being used, which could have put the person's well-being at risk. This is an area for improvement, and we expect the service to take timely action to address this.

The service takes measures to try and protect people from harm and abuse. Most staff understand their safeguarding responsibilities and were confident if they raised a concern, it would be dealt with swiftly by management. Incidents and accidents are recorded correctly, and the service reports safeguarding issues to relevant partner organisations. Deprivation of Liberty Safeguards (DoLS) applications are made where people lack mental capacity to make decisions about their care.

Improvements are needed to the service's medication policy and how medication is managed. Updates are needed to the service's medication policy to ensure it is in line with best practice. The service needs to administer and manage medication in line with its medication policy at all times. This is an area for improvement, and we expect the service to take timely action to address this

The service has appropriate infection control measures in place, and staff understand their responsibilities. The service has an infection control policy. Staff have access to a supply of appropriate personal protective equipment. The service takes part in external infection control audits. Laundry facilities are appropriate, clinical waste is managed correctly, and the service has achieved a Food Hygiene Rating of 5, meaning 'very good'.

Environment

Good

Troed y Rhiw is a single storey building close to local amenities. Visitors are required to sign in on entry and upon leaving. The service has two communities, one in a secure setting supporting people who live with dementia, and the other for people needing general residential care and support. Each community has its own garden. People take part in growing vegetables in the summer which are then used in the kitchen. People have access to communal areas for socialising and activities, and their rooms are personalised. We observed each community using its dining room at mealtimes. The service is homely, and communal lounges are carpeted where possible. We saw a lounge being redecorated to a very good standard and people were given choice of décor. The service is well-lit with plenty of fresh air.

The service has sufficient bathroom and bathing facilities throughout. The service offers specialist beds and manual handling equipment for those who need it. All equipment is serviced and audited, and repairs are completed in a timely manner. Routine maintenance is managed. Maintenance records confirm completion of utilities testing such as electrical items, gas, and water facilities.

All substances hazardous to health are stored securely. There are fitted window restrictors in all bedrooms to maintain safety. Fire exits are clear of clutter and obstructions, with obvious trip hazards not being present. Personal evacuation plans are in place and are accessible in the event of an emergency.

Leadership & Management Requires Improvement

The service has oversight and governance arrangements in place to support smooth running. At the last inspection we found staff training records were unclear, and care staff were not receiving regular supervisions. We found improvements have been made. Care staff now receive regular supervision, and we saw training is taking place with staff generally up to date. Care staff we spoke with said they feel management are approachable, they feel supported, and feel they have completed sufficient training to do their job safely. One care staff we spoke with stated the manager is "*brilliant*" and "*very respectful*".

The correct recruitment arrangements are in place. Care staff files contain all legally required information. Disclosure and Barring Service checks are being completed. New staff receive induction training and undertake a probation period. The rota showed target staffing levels are being met, and this was reflected on the day. Care staff understand their duties in key areas, such as safeguarding and infection control. All care staff are registered with the workforce regulator, Social Care Wales.

Auditing and quality assurance processes are used to identify areas for improvement, and to address what is working well. Improvements are needed around aspects of health and safety auditing and oversight. The service needs to complete regular fire drills in accordance with government guidelines. We were not provided any evidence of this. The service needs to be assured people and care staff are aware of how to evacuate the building safely in an emergency. This is an area for improvement, and we expect the service to address this in a timely manner.

The service is open and transparent, and reports required updates to Care Inspectorate Wales and other relevant organisations where necessary. The Responsible Individual (RI) undertakes their role and visits the service every three months to speak with people and staff. The RI completes six-monthly quality of care review reports. Policies and procedures are in place to promote safe practice, and most key policies such as for safeguarding and complaints are aligned with statutory requirements and best practice guidance. Feedback from people and staff is encouraged and there is evidence of meetings taking place. People and staff we spoke with advised they can raise any issues.

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's health and safety may be placed at risk by the service not adhering to health and safety guidance.	14/11/25
People's safety and well-being is not always protected and maintained.	14/11/25
People's health and well-being may be placed at risk by not adhering to the relevant policies and procedures.	14/11/25

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