



Ty Soberton



Cardiff



02920400657



www.gofalcymrucare.com

Date(s) of inspection visit(s): 06/08/2025

Service Information:

Operated by:	Gofal Cymru Care Ltd
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:	4
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 culture, or is working towards a bilingual service.

Ratings:



Well-being

Good



Care & Support

Good



Environment

Good



Leadership & Management

Good

Summary:

Ty Soberton is a care home service for up to four individuals, operated by Gofal Cymru Care Ltd. It is located in an urban area with access to local amenities and within commuting distance of nearby towns and cities.

The inspection found that people living at the service are achieving good outcomes. The manager and care staff promote a person-centred model of care, and people are supported to engage in meaningful activities and maintain important relationships.

The environment is homely and personalised, and governance arrangements support continuous improvement. Some minor improvements were identified which the provider addressed promptly.

Findings:



Well-being

Good

People experience a positive sense of well-being, supported by a person-centred approach that promotes dignity, and choice. Inspectors observed positive interactions between people and care staff. People participate in meaningful activities such as regular swimming, museum visits, and community outings. The manager successfully advocated and secured bespoke swimming activities for people. We heard people express enjoyment and we observed people smiling and interacting with care staff using gestures and body language that reflected connection with care staff.

Communication needs are met through a range of approaches such as verbal interaction, objects of reference, and other communication methods. While Picture Exchange Communication System (PECS) is not currently in use, care staff understand each person's preferred communication style and respond with empathy and attentiveness. People are supported to make choices about their daily routines, meals, and activities. Activity planners are in place and promote healthy lifestyles and social engagement.

The service is working towards the Welsh Language Active Offer. Cultural and religious celebrations such as St David's Day, Eid, and Easter are recognised and celebrated, and Welsh-themed activities are integrated into the service.

People are registered with universal health services and medical support is accessed as needed. Records are maintained of health appointments.

Care staff have completed safeguarding training and care staff spoken with told us they understand their responsibilities. People live in a secure environment with systems in place to raise concerns.

Relationships with family are actively promoted, with regular contact and visits. Feedback from relatives was positive, one relative told us, "*[Their] life is now one [they are] happy in. They celebrate life with [them] and that is priceless.*"

The home environment is suitable and supports people's well-being. Minor improvements were identified in hygiene practices, such as ensuring the availability of handwashing supplies, which were addressed promptly.



Care & Support

Good

Care staff provide good quality care and support that meets each person's individual needs. Personal plans are detailed, person-centred, and reviewed to reflect changing circumstances. They include clear guidance for care staff and reflect people's preferences and routines. The service uses a Positive Behaviour Support (PBS) model, and plans identify triggers, coping strategies, and least restrictive practices.

Provider assessments are completed, and admissions are carefully planned, ensuring the service can meet each person's needs. Pre-admission assessments involve consultation with families, professionals, and the person themselves where possible. Both the manager and Responsible Individual complete in-person assessments prior to confirming the suitability of the service. Risk assessments are in place.

Medication is safely stored and administered, with audits and oversight in place. We identified temperature monitoring in storage areas required strengthening, the provider responded immediately to resolve the issue. Care staff training in medication administration and diabetes care is ongoing, with imminent plans to increase the number of trained staff. The rota ensures that at least one trained care staff member is present on each shift.

The process for incident reporting has recently been strengthened and is robust. Behaviour monitoring forms, body maps, and reflective accounts are completed and reviewed by the manager. Lessons are learned, and actions are taken to improve practice.

People are supported to access health services, attend appointments, and engage in activities that promote physical and emotional well-being. Activity planners offer a balanced mix of calming, high-energy, and community-based experiences. People are encouraged to develop independent living skills personal to their needs, such as cooking and some aspects of personal care.

Deprivation of Liberty Safeguards (DoLS) authorisations are in place for all people, with restrictions documented, reviewed, and least restrictive practices applied. The service supports positive risk-taking.



Environment

Good

The environment is comfortable and personalised to meet the needs and preferences of the people living there. Bedrooms are decorated according to personal tastes and include sensory items that support emotional regulation. Communal areas are welcoming and promote independence, with sufficient seating, activity spaces, and access to outdoor areas.

Health and safety systems are in place and regularly reviewed. Fire risk assessments, equipment servicing, and maintenance logs are up to date. Care staff complete weekly checks and respond promptly to issues. Personalised emergency evacuation plans are in place for all people who require them, and emergency procedures are clearly documented.

External cameras are in use to support safety. External doors are secured with keypads, and window restrictors are fitted where necessary. Control of Substances Hazardous to Health (COSHH) items and sharps are mostly stored appropriately, any inconsistencies identified during inspection were addressed immediately.

Bathrooms and en-suite facilities are accessible. During inspection, some areas lacked handwashing supplies; the service began to address and are working to ensure consistent availability of hand hygiene products.

Outdoor spaces are safe and accessible, with seating. People are supported to spend time outside and they access community spaces and the garden in the neighbouring service. Plans are in place to enhance the environment further, including the installation of a trampoline and the development of a sensory garden. Systems regarding clinical and hygiene waste disposal have recently been reviewed.

Maintenance and decoration are ongoing, with input from people about colours and furnishings.



Leadership & Management

Good

Leadership and management arrangements support the delivery of good quality care and promotes continuous improvement. The manager is a dual manager and oversees another service nearby, dividing their time equally between both services. They are supported by a team leader, and senior care staff. Care staff told us they feel valued and well-supported. Supervision is held bi-monthly, and team meetings take place quarterly. Care staff are encouraged to reflect on practice and contribute to service development.

The Responsible Individual (RI) visits regularly and completes reports, identifying areas for improvement and celebrating achievements. RI visits include consultation with care staff, families, and professionals, and feedback is used to inform service development. The RI has implemented changes based on learning and inspection from other services, demonstrating a commitment to reflective practice and improvement.

Quality assurance systems are in place, including audits of care records, health and safety, and medication. The service is moving to a digital platform to enhance record-keeping and communication, including a feature that allows for sharing updates and images with families. Care staff recruitment is robust, with clear oversight of visa status, qualifications, and training. All care staff are either registered with Social Care Wales or are in the process of registering.

Training compliance is closely monitored, with any gaps identified and training scheduled imminently. Care staff receive supervision and annual appraisals. Feedback from care staff surveys was positive.

The service is currently fully staffed, with no vacancies or reliance on agency workers. The rota is managed effectively, ensuring that care staff with the right skills are allocated to each shift. Contingency plans are in place for emergencies.

The service responds to complaints; the RI completes investigations and implements measures to reduce impact. Spot checks carried out by the manager have increased, and care staff have received guidance on managing environmental concerns.

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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