



Ty Ddol Awel



2 Ddol Road, Dunvant, Swansea, SA2 7UB



01792207529



<https://nationalcaregroup.com/view/ty-ddol-awel/>

The inspection visit took place on 29/01/2026

Service Information:

Operated by:	Integra Community Living Options Limited
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for mental health
Registered places:	5
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 Ddol Awel is a small home for people with mental health support needs. It is set in a residential area outside Swansea. People living in Ty Ddol Awel seem happy and are supported to have choice and be as independent as possible, meaning they enjoy good well-being.

A positive culture is evident in the home. Staff and people were very welcoming and open and wanted to give feedback. Care and support is positive with an enabling approach. This theme has a good rating.

Since the last inspection improvements have been seen to the environment with maintenance works, redecoration and replacement of flooring. People took pride in showing us their home.

Staff spoken to appeared knowledgeable and experienced and were passionate about their work and the company ethos and values. The manager and Responsible Individual (RI) have worked

towards staffing a full team with recent recruitment. They are hopeful the increase in staffing levels will further increase people's outcomes being met. We saw information about the service, such as the Statement of Purpose (SoP), is updated regularly and all policies seen were up to date.

Overall, the four themes achieved a good rating reflecting a service that strives to enhance and improve.

Findings:



Well-being

Good

People have opportunities to do what is important to them. The staff at Ty Ddol Awel capture meaningful activities well. We saw craft and cooking photos as well as people enjoying the festive season in their home. Some people chose to create their 'journey' books. Within these they created their wish list such as day trips they wanted to complete and cooking or craft activities.

People are informed and have choices with their day-to-day activities and in relation to the outcomes they want to achieve. Information available to people includes a guide for people living at Ty Ddol Awel. Information within this includes the complaints and compliments policy and information around advocacy. It is available in other formats, plain language and offered in other languages. At the end of the guide is a feedback form to share views on the information guide.

People told us about the trusting relationship they have with staff. Safeguarding training is face to face and up to date for all staff. Staff spoken to were confident with how they would deal with any safeguarding concerns or queries. Information is available to people around advocacy and how to raise a complaint or concern. The provider also encourages them to share feedback about the home and we saw a feedback QR code on display in the reception area.

People are enabled and encouraged to have positive relationships with people they live with and people who are important to them. Openness is facilitated in house meetings whilst ensuring people show respect towards each other, making it a safe place to speak.

Staff know people very well and it is clear their training and knowledge ensures they empathise and respect people whilst supporting them sensitively. We also saw people relaxed with staff and a sense of humour was seen in conversation. One person told us, *"You can have a laugh with the staff – they have a sense of humour"*. People highly recommended the home and told us, *"The staff are amazing"*.

The environment and setting enable people to be as independent as possible and supports their well-being outcomes. People can access local towns and the city of Swansea to pursue their interests including shopping, attending sports venues and enjoying time out for meals and coffee. The manager told us *"We do promote people's independence as much as possible – we are about rehabilitation, the bus pass is a must, we have a car and we use taxis when needed"*.



Care & Support

Good

The provider completes good assessments and arranges transition visits to ensure people settle well into Ty Ddol Awel. Full consideration is given to other people living at the home to ensure compatibility. Since the last inspection a digital care planning system is in place. Personal plans are person centred and very detailed. Risk assessments are linked to the relevant aspect of the personal plan. They detail the risk, likelihood and possible impact and how they can be managed/reduced. A record of monthly key worker reviews was seen which in turn informed three monthly reviews. People are involved and discuss their outcomes or things on their 'wish list'. People told us, *"The reviews have been led by me"* and *"They would go through all the goals I want to achieve"*.

People are referred to medical professionals as required and supported with specialist follow up appointments. We saw a person and a staff member return from a medical appointment. We observed the staff member ensure the person felt empowered and was in control of their appointment and the outcome. Throughout the inspection we saw a theme of staff seeking consent and ensuring individuals have their choice maintained.

Medications are stored securely. One member of staff has the keys at all times and twice daily balance checks of medication are completed along with room temperature checks. Weekly medication audits take place and monitoring of stock balances determines future prescription orders. Medication spot checks are completed with care workers and annual competency checks. If learning needs are identified further training and competency checks are completed. People are supported to be as independent as possible with their medication. Individual goals are identified and worked towards. We observed staff respect and support people to take their medication safely whilst promoting independence. An example of person-centred care was people's medications were given at times to suit their routine and preferences. This was when agreed with the prescribing practitioner.

The staff pride themselves on ensuring people move into the home at the right pace and right time for them. They told us; *"The organisation do tend to recognise having the right person at the right pace – right skill mix and right client mix"* and we saw how people's individuality is respected. One staff member told us, *"Everybody is an individual – they are who they are now"*.

When asking staff what works well, they told us; *"Communication works really well – there is always communication – something minor has or hasn't happened – all staff share the information"* and *"Team meetings happen regularly"*.



Environment

Good

People live in a home with well-maintained facilities. We saw checks for electricity installation and gas service. A fire risk assessment is in place and refers to the relevant checks and maintenance completed by the provider. Personal emergency evacuation plans (PEEPs) are completed with all individuals.

Since the last inspection there have been some improvements to the home including some rendering works at the back of the property and new kitchen units and flooring throughout. Redecoration throughout the home has also been completed and people have been involved with deciding colour schemes. All communal areas of the home were clean and tidy. We viewed one person's own living area with their permission. People told us about the artwork in their lounge and the contribution they made – they were very proud to call it their own. Staff told us *“It is their home and we want it to show this”*.

There is a Welsh and multifaith room, that is also used as a quiet room. People can access information about religions, Welsh culture and history and neuro diversity. Bilingual signage is in place around the home. Currently there are no Welsh speakers living in the home however the opportunity to have literature bilingually is available.

The provider completes regular audits and internal quality assurance processes that enable them to identify upcoming works required to ensure the home is well maintained. The rear garden is maintained and tidy. Discussions were had regarding a possible bin store to house rubbish bags. The staff also told us about ongoing work to paint the shed and maintain the outdoor smoking shelter.

People live in a home which they are encouraged to make their own. Ty Ddol Awel feels homely and comfortable and representative of the people who live there.



Leadership & Management

Good

There is clear governance and effective oversight of the service. Staff and people are positive about the manager and RI and their availability. The manager has a daily presence in the home and the RI visits frequently and completes quarterly records of visits and a six-monthly quality care review report. The six-monthly reports reflect what is working well and how improvements can continue; however, we advised the RI to ensure sensitive information within the report is anonymous considering people outside the organisation may request to view this. Routine organisational meetings support continuous monitoring of quality assurance outcomes, identifying trends, incidents and improvements.

Overall, the provider works towards ensuring staffing levels are as stipulated in the Statement of Purpose; however, this has not always been consistent over the past six months. The provider recognises this and successful recruitment means the team are now working towards the required staffing numbers. The manager and staff are positive there is going to be a real focus and drive around people's activities and individual outcomes with the new staffing levels. The consistency, experience, and knowledge of the core staff team have been invaluable in supporting new starters, contributing to continuity of care and improved outcomes. Feedback includes *"We were on the low side – now we have new starters"*. The manager told us *"We are getting there now. The staff are brilliant"* One person told us, *"Staffing has been consistent"*.

Recruitment processes overall are good. Full employment histories are explored, gaps accounted for, and references obtained. Registration with Social Care Wales (SCW) is verified. One Disclosure Barring Service (DBS) check had not been received before a staff member began working, but a risk assessment was implemented, and the RI confirmed this was an isolated incident linked to delayed processing.

Staff report feeling well supported, describing a positive culture where well-being is prioritised. A structured three-day induction and opportunities for shadowing help new staff settle confidently into their roles. Training compliance is strong, with 100% completion of mandatory courses including mental health awareness, bipolar awareness, health and safety, fire safety, and food hygiene.

Supervision is intended every two months; however, records show an average of three sessions over the past year, along with annual appraisals. The regulatory requirement is for quarterly individual supervision plus an annual appraisal. The manager aims to restore two-monthly supervision once recruitment stabilises fully. All staff were very positive about their individual circumstances being considered and told us about the work-life balance they felt very supported to have. Feedback included: *"They recognise transferrable skills"*; *"I am in the first place I have ever been allowed to be me"* and *"Everyone is amazing"*.

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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