



Inspection Report on

Ty Ynysawdre

**Ty Ynysawdre
Heol-yr-ysgol Tondy
Bridgend
CF32 9EG**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

10/01/2025

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About Ty Ynysawdre

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Bridgend County Borough Council Adults and Children's Services
Registered places	15
Language of the service	Both
Previous Care Inspectorate Wales inspection	14 July 2023
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

Care staff at Ty Ynysawdre provide care and support to people in a warm and friendly way. The service provider has responded to an increase in some people's needs by adding extra staff at times when assistance with tasks is highest. The staff team has been stabilised by additional support from staff from other services the provider runs. Core members of the care staff team are competent, and knowledgeable about the people they support. However, some documentation does not reflect what is required for every person to get the right care at the right time. The environment is well maintained, and care staff are implementing plans to make it more dementia friendly. The manager and team leader have good oversight of the care being provided, and make appropriate referrals to health professionals quickly, when needed. The Responsible Individual completes quarterly monitoring visits, using feedback from these to inform a biannual quality of care report.

Well-being

People are supported and encouraged to make decisions about their daily routines where they are able. Whilst we were at the service, we saw that people can get up when they want and choose when and where to have their breakfast. People can move freely around the home and staff support people to mobilise when needed. There are organised activities and events, but we also saw staff engaging with some people naturally throughout the day, playing board games and chatting. At lunchtime, we saw people being shown the meal options as plated meals so they could choose their food and their portion size in relation to what they were shown.

Care staff at Ty Ynysawdre support people to be as healthy as they can be. We saw regular contact and referrals to GPs, community nurses, and specialists such as Speech and Language Therapists and Occupational Therapists. A few people living in Ty Ynysawdre have increased needs as their physical health has deteriorated. Care staff have documented these appropriately and management have requested nursing assessments to ensure these people are in the right setting for the care they need. Advice and guidance from professionals is included in risk assessments but needs to be reflected in people's personal care plans. Medication is stored appropriately and administered as prescribed by two care staff. We observed part of a medication round and saw no issues with staff competency. Management monitor care staff's medication competency throughout the year. A medication policy is also available in the service for additional guidance if needed.

There are systems in place to protect people from potential harm or abuse. Care files we sampled showed up to date risk assessments, identifying risks of harm to individuals or others and what intervention is required to minimise those risks. However, this also needs to be included in people's personal care plans. Management make referrals to the Local Authority safeguarding team when required, and notify the regulator of these. Care staff are up to date with safeguarding training. There is a safeguarding policy in place at the service for additional guidance if needed.

No one in the service currently requires their provision in Welsh. The service provider advised that documentation can be translated if needed, and care staff are all given the opportunity to enrol on funded Welsh language courses if this is an interest of theirs.

Care and Support

During our visit, we saw warm and caring interactions between care staff and the individuals living in Ty Ynysawdre. We observed people reaching their hand out to touch and hold hands with staff as they walked past, talking to staff about their worries and showing warmth and gratitude to care staff's responses to them. One family member visiting told us: *"They are kind and compassionate, communicative and honest. As my [loved one]'s needs have increased, the staff have moved up to meet them every time"*. There appeared to be good relationships between care staff and relatives.

Care staff do not always have the information they need to provide people with the right care at the right time. We observed care staff to be knowledgeable about the people they support, and able to anticipate their needs and preferences. However, we sampled care files of people with complex needs and found that they did not contain pertinent information about change in need, or in some cases did not include areas of need that it is integral that staff meet in a particular way. Risk assessments were up to date and included risks around these areas of need, however people's personal care plans were not in line with this. This means that new starting staff, or staff who may not usually work at the service, would not know important information about people unless they were informed of this by other staff members. We informed the provider that people's care plans required improvement, and we will follow this up at our next inspection. Supplementary charts and daily notes are filled out consistently.

People's dietary needs and preferences are adhered to. All the food for the residential community is made in the main kitchen of the extra care complex and brought to people in the dining room of Ty Ynysawdre. People can also eat in the main dining room if they wish. Kitchen staff showed good knowledge of individuals, and supported by care staff give people a choice of food that is in line with their diets.

There are systems in place to promote infection control and good hygiene. When we arrived, there were face masks for visitors at the door as a precaution due to high prevalence of influenza in the community. All staff were wearing appropriate personal protective equipment (PPE) during our visit. Domestic and laundry tasks are completed by Linc Cymru staff, with no issues raised by the service provider, and on the day we visited the home appeared clean and people were in clean clothes.

Environment

Care and support is provided in an environment that enhances people's wellbeing. Ty Ynysawdre is part of a wider complex owned and maintained by Linc Cymru. There are many facilities at the site, including a spa room, hairdressing salon, outside space and restaurant, which residents can use should they wish. Areas of the home which could contain hazardous substances, such as the medication room and laundry are kept locked. The home is secure from unauthorised access, and visitors are required to sign in and out.

The home is purpose built and has lots of space. All aspects of the home allow for the use of moving and handling equipment and aids. There is a communal lounge and dining room, and people have spacious bedrooms. The RI has identified that people would benefit from an alternative quiet area for times when the communal space is noisy or overstimulating. All bedrooms are ensuite and are personalised with people's belongings. The team leader showed us new door signs for people's bedrooms to replace the old ones which are not personalised. New, dementia friendly signs have also been made following advice and guidance from the specialist dementia team.

Maintenance of the property is completed by Linc Cymru. The manager can report maintenance issues and have them resolved by their contracting team. Fire equipment, gas and electrical safety checks are completed and all staff have fire safety training. The RI discusses matters to do with the property with Linc Cymru directly, and reports that at present there are no maintenance issues or concerns.

Leadership and Management

Care staff are working together to provide consistent care. Some individuals have had an increase in care needs due to deteriorating health which has placed time demands on the staff team. These demands have been exacerbated by long term sickness in the team. Management have responded to the needs of the staff team by adding an additional care staff member for the mornings, when care is more task orientated. Staff from the service provider's domiciliary care team have also been bolstering the staff team when needed.

During our visit, we spoke to a new starter member of staff who was on their second shadow shift of their induction. They told us: *"I've had an initial induction and have already done manual handling training. I have more training next week. Ty Ynysawdre feels very organised, the residents are lovely, and the staff have been great at showing me how to do things"*.

Care staff are appropriately recruited and vetted for their roles. The required recruitment information is gathered by the Local Authority (service provider) Human Resources (HR) department. References and Disclosure and Barring (DBS) checks are viewed by the manager before agreeing the final appointment. HR also alert the manager to when care staff's DBS are due for renewal. Care staff are up to date with most mandatory training, and gaps in refresher training are being addressed. The RI advised that the service provider is looking for more in depth and comprehensive training in dementia, to further develop their understanding and integrate this into people's day to day care and support. Supervision, competency checks and appraisals are completed regularly throughout the year between care staff and management.

There are quality assurance systems in place to monitor and promote ongoing development and improvement of the service. The RI gathers feedback from staff, visitors and people using the service during their quarterly monitoring visits, which feed into a biannual quality of care report. The RI has good oversight of the service and is working with management to build on the strengths of the service and work on any improvements that are identified.

Summary of Non-Compliance	
Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection.

Area(s) for Improvement		
Regulation	Summary	Status
15	Personal plans are not fully reflective of residents'	New

	current care needs.	
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