



Arolygiaeth Gofal
Cymru
Care Inspectorate
Wales

Inspection Report

Trycelyn Court



Trecelyn Residential Home, Trecelyn Court, New Bryngwyn Road,
Newport, NP11 4NF



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www.welcomecarehomes.com

The inspection visits for this service took place between 29/01/2026 and 30/01/2026

Service Information:

Operated by:	Wellcome Care Homes 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:	51
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:

Trycelyn Court is located in the small town of Newbridge, near Caerphilly. The service offers residential accommodation, care and support for up to 51 older people across two separate units.

People's wellbeing and the care and support they receive is good. People can make everyday choices and are given opportunities to take part in a range of activities. A good standard of care is provided, and people are treated with dignity and respect. Personal plans are available to guide staff how to best provide care. Moving forward, plans will include personal outcomes and people will be offered the opportunity to review their plans and outcomes.

The environment people live in is good, with ongoing investment in updating the building internally and externally. People have their own rooms and communal areas in which to spend time alone or with others. The leadership and management of the service is good because staff feel valued and supported by management. Auditing and monitoring of service delivery will be reviewed and include better evidence of analysis, and the difference service delivery makes to people's quality of life.

Findings:



Well-being

Good

People living at Trycelyn Court experience a good standard of well-being. A caring staff team work hard to ensure everyone feels valued, safe and content. People are encouraged and assisted by care staff to be as healthy as they can be. People's allergies, specialist diets and favourite food are known, and nutritional meals help people remain healthy. The service assesses people's care and support needs and any associated risks to their health and wellbeing. These are documented in personal plans, providing guidance for staff on how to support individuals with their needs. Care staff know the people they are supporting well and seek medical assistance quickly when required. People consistently receive their prescribed medicines to help them stay healthy.

People are encouraged to have control over their day to day lives where possible and make as many everyday choices as they can. This includes, for example, where and how to spend their day, and food and drink options. Managers put people's needs and wishes at the forefront of any decision-making. Plans are person centred, and include aspects of people's social histories, likes, dislikes and preferences. While opportunities for individuals to influence the running of the service are available, the re-introduction of residents' meetings will strengthen this further. A new programme of activities has been introduced across both units and, moving forward, the service intends to capture more robust evidence of how these activities support people's wellbeing.

There are systems in place to help protect people from abuse and harm. Risks to people are assessed and their safety is managed and monitored. Character and suitability checks of care staff are completed prior to starting in their roles. Accidents and incidents are recorded and monitored, with actions taken to minimise further occurrences. The provider has a safeguarding policy and guidelines for staff to follow. Where there are necessary restrictions made in people's best interests to manage their safety; these appear proportionate. Monitoring arrangements for the Deprivation of Liberty Safeguards (DoLS) will be strengthened to ensure all conditions are met and reviewed in a timely manner.

The service is working towards providing an Active Offer of the Welsh language. The service makes a concerted effort to celebrate Welsh history and culture. The service aims to facilitate requests for Welsh language documentation and support, although this is not currently required.

People live in an environment that supports their sense of security and belonging. Individual rooms are personalised, helping people feel at home. The environment is warm and comfortable, and suitable mobility aids are available to support people's independence and safety.



Care & Support

Good

Throughout our inspection, we observed positive engagement between staff and individuals, which contributed to people feeling relaxed and comfortable. People told us, “*Staff are lovely*” and “*Around when I need them*”, indicating they feel supported and reassured by the presence of staff. Feedback from relatives was also positive, stating their loved ones were well cared for and safe at the service.

There are systems in place to assess people’s needs prior to moving into the service, ensuring the provider can meet their care and support needs. These pre-admission assessments inform the development of personal plans, outlining how staff should support individuals on a day-to-day basis. While plans exist for all people, improvements are required to ensure they all remain accurate, person centred and reflective of individuals current needs. We identified plans are not always reviewed robustly, resulting in old and inaccurate information within them, which has the potential for the wrong care to be provided. People or their representatives are not routinely offered the chance to be part of the review process. In addition, not all plans include personal outcomes, meaning staff do not always have clear information about what matters to the person or how to best support them to achieve their goals and aspirations. Although improvements are required in the production and review of personal plans, the shortfalls identified did not have a direct impact on people’s well-being or the outcomes they experienced. People continued to receive a good standard of care and support.

People’s rights and liberties are generally upheld. Where restrictions are needed to keep people safe, the service does not always complete the required best interest assessments and decisions in advance of Deprivation of Liberty Safeguard (DoLS) authorisations being sought. Management have confirmed they will undertake a full audit to ensure any restrictions placed on individuals are justified and in their best interests.

People’s health is monitored to enable the service to act responsively to any change in their health and wellbeing. Appropriate referrals to health and social care professionals are made, with recommendations acted upon by the service. There are effective medication management systems in place. Medication Administration Record (MAR) charts are filled in correctly, confirming people receive their medication at the right time. Regular medication audits take place. The provider intends to strengthen these further to ensure practice remains safe and effective.

People’s risk of infection is minimised. The service effectively assesses, manages and prevents the risk of infections. Care staff are appropriately trained and competent in using personal protective equipment (PPE) and infection control practices. Effective daily cleaning schedules are in place.



Environment

Good

The location, design and size of the premises are as described in the statement of purpose. The service provider continues to invest in ongoing renovations and improvements to both the internal and external environments, helping to maintain a good standard of accommodation. We found the accommodation was warm, welcoming and well presented. Accommodation is provided across two separate units, each with their own communal lounge and dining area. People can choose to be either in the company of others or spend time alone and can move around each unit as they please, promoting independence and choice.

People have their own rooms which are clean, well maintained, and personalised to their own tastes. People have family photographs, pictures and trinkets in their rooms, which gives a homely and comfortable feel to their surroundings. There are sufficient toilet and bathing facilities available. In warmer weather, people can access large patio areas with outdoor seating, providing additional space for relaxation and social interaction.

People live in a safe environment, with checks being conducted on a regular basis to identify and mitigate risks to health and safety. Records confirm the routine testing of utilities and equipment. Fire safety tests and checks are completed on a regular basis. Personal emergency evacuation plans are in place and accessible to staff in the event of an emergency. Fire drills are completed on a regular basis. We found cleaning regimes and hygiene standards throughout the home to be good, with laundry services operating effectively. The service employs a team of domestic staff to maintain cleanliness standards in the home. All staff have access to personal protective equipment (PPE). The service had been inspected by the Food Standards Agency and had been given a rating of 5, demonstrating hygiene standards are very good.



Leadership & Management

Good

Leadership and management at Trycelyn Court is effective and focused on ensuring people experience good well-being outcomes. The statement of purpose and guide to services state what people can expect whilst living there, with the service reflective of the contents. The Responsible Individual (RI) maintains oversight and demonstrates a commitment to continuous improvement in quality assurance, governance, and auditing. They visit the service regularly to speak with people and staff to gather feedback about people's wellbeing and experiences. Quality of care reviews are completed every six months and identify what is working well and where further improvements can be made. The provider has submitted the required annual return, and the regulatory body is informed of incidents affecting service delivery.

The service manager has daily oversight of service delivery, supported by a deputy manager and a team of senior staff. The management team are visible, accessible and present in the service. The monitoring systems used focus predominantly on numerical data. Records show limited evidence of qualitative analysis or evaluative review to demonstrate how the service assesses the quality and effectiveness of care and support. This limits the ability to identify patterns, understand people's experiences, or provide assurance about the quality of outcomes and consistency or effectiveness of care and support. As a result, opportunities to drive improvement may be missed. Although improvements are required in the service's quality assurance systems, the shortfalls identified did not have a direct impact on people's well-being or the outcomes they experienced. Leadership and management oversight has ensured people continue to receive a good standard of care and support.

There are processes in place to support safe recruitment. However, not all staff files contained the required number of pre-employment references, and verification of employment histories requires strengthening. Action was taken during our inspection to ensure recruitment processes will be more robust moving forward. All staff had up to date Disclosure and Barring Service (DBS) checks. New care staff are supported to complete an induction to support them into their role. This includes completing mandatory training to ensure staff have the required knowledge and skills to support people at the service.

Staff receive regular formal one-to-one supervision with line managers to discuss practice and career development needs. Training records show most staff have completed core and refresher training in a timely manner. All eligible care staff are registered with Social Care Wales, the workforce regulator, demonstrating their suitability for practice. Care staff told us they are happy in their roles and feel supported by management. Staffing levels were sufficient during our inspection to meet people's needs.

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
The review of personal plans is not sufficiently robust resulting in inaccurate and out of date information remaining within them. Reviews do not include the individual or their representative or consider any progression towards achieving personal goals and aspirations.	22/01/26
Insufficient oversight of the management of the service resulting in systems used to monitor the service being focused on numerical data, and do not provide sufficient qualitative analysis to demonstrate how the service evaluates the quality of care and support being delivered.	22/01/26

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

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