Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Ty Cysgu Domiciliary

Ty Morfa, Bridgend, CF32 9AW

01656722769

Date(s) of inspection visit(s):

29/05/2025, 28/05/2025

Service Information:

Operated by:	Ty Cysgu Limited
Care Type:	Domiciliary Support Service
Provision for:	Supported Living
Registered places:	0
Main language(s):	English
Promotion of Welsh language and culture:	The service provider is not meeting the Welsh language and culture needs of people and this requires improvement.

Ratings:

Well-being	Excellent
Care & Support	Good
Leadership & Management	Good

Summary:

Ty Cysgu Domiciliary provides care and support to people living in their own homes in the Cwm Taf area.

People experience a good standard of person-centred care and support delivered by a stable team of care staff. Care documentation is comprehensive and reflective of peoples needs. Specialist plans devised by health care professionals are in place to offer guidance to care staff who support people with complex needs. In addition to this care documentation contains detailed information about people's personal histories, their likes / dislikes and preferences. People and their representatives tell us their experiences of being supported by the service is positive saying they are treated with dignity and respect.

Care staff feel very well supported, happy and confident in their roles. They receive the required levels of formal support and a combination of core and specialist training. Safe practice is underpinned by policies and procedures which are kept under review. There is a range of governance and quality assurance systems in place which help the service operate in line with regulation. The service is very well-led, and the management team have good oversight of service delivery.

Findings:

Well-being — Excellent

People have enriching experiences because they are supported to identify and achieve their goals. We saw care staff work with people to find out their likes, dislikes and interests. These are documented in people's personal plans. Personal plans also contain documented evidence showing people engaging in activities of their choice. We saw one person sets a specific goal of their choice on a monthly basis, for example, going to the shops or baking cakes. Care staff will then document the steps taken to achieve the goal. This is benefitting people's well-being by enabling them to feel a sense of achievement.

People are protected from abuse and neglect. Care staff are safely recruited with all the required checks completed prior to employment. Care staff receive training relevant to the needs of the people they support which supports the delivery of good quality care. Risks to people's health and safety are assessed. Care staff understand their safeguarding responsibilities. They know how to formally report any safeguarding matters when there is reason to believe a person may be at risk of harm and there are policies and procedures in place to support this.

With few exceptions people are treated with dignity and respect. We saw care staff treating people with warmth and kindness. People and their representatives provided us with positive feedback saying care staff are *"Amazing*". We saw one person has a dignity and respect statement in their personal plan. This document sets out guidance detailing the persons expectations in relation to the conduct of care staff working in their home. The service provides excellent continuity of care. There is little staff turnover. This means care staff get to know the people they support well and are able to build positive working relationships with them and their families. A relative of one person told us, *"Compared to other companies they bend over backwards; they have never let us down".*

Care & Support — Good

The provider uses strong established links with health care services resulting in people experiencing a very good standard of care and support. Where necessary, specialist plans are in place to support people with complex needs. We saw detailed clinical assessments and management plans which have been devised by health care professionals. These documents provide specialist direction to care staff depending on the individuals needs. For example, we saw specialist plans in place for percutaneous endoscopic gastrostomy (PEG) feeding and the management of epilepsy. In addition to this care staff receive specialist training in areas relevant to people's needs to ensure they are providing the right level of care and support.

People are supported by highly skilled staff who have a very good understanding of their individual needs and preferences. Personal plans set out people's care and support needs highlighting effective ways of supporting people and minimising risks to their health and safety. We spoke to the provider about strengthening personal plans, so they capture people's personal outcomes in relation to the care and support they receive. We saw personal plans are produced in conjunction with people and their representatives and are regularly reviewed to ensure information remains relevant as people's needs evolve.

Robust infection control measures ensure people are protected from the risk of infection. We saw care staff wearing the required personal protective equipment (PPE) when delivering care and support. Care staff have access to PPE and are trained to understand how to use it effectively. There is an up-to-date infection control policy, and the manager completes regular spot checks to make sure care staff are adhering to their responsibilities.

Support is available for people with medication needs. People's medication regimes are detailed in their personal plans. Care staff receive relevant training and regularly have their competency to administer medication assessed by the manager. There is a medication policy which is aligned with best practice guidance which helps support safe practice. Medication administration recording charts we viewed are filled in correctly which suggests people receive their medication as prescribed.

Leadership & Management — Good

People experience good quality care and support because the provider makes sure care staff are suitably qualified and trained. Care staff are trained to meet the needs of the people they support. The training provided is a combination of core and specialist training. Records we viewed show most care staff are up to date with their training requirements. Care staff we spoke to say the quality of training provided is good and it gives them the skills and knowledge needed to support people well. In addition to core and specialist training, care staff are encouraged to complete recognised qualifications in health and social care. We saw care staff are registered with Social Care Wales the workforce regulator. This is a legal requirement which confirms care staff have the right skills and qualifications needed for working in the care sector.

Care staff have regular one-to-one supervision sessions with their line manager at least quarterly, and an annual review to provide feedback and identify training needs. Care staff also attend regular team meetings where supported people and general operational matters are discussed. Care staff we spoke to say they enjoy working for the service and feel supported and valued in their roles. One said, *"The managers are good, there is an open-door policy, I can speak to them whenever I need to. They always deal with things promptly; I have a good relationship with them".*

The service provider has strict selection and vetting processes for hiring staff to ensure they are qualified and trustworthy. Personnel files we viewed show all the required pre-employment checks are completed before a position is offered to a potential member of staff. These checks include, employment history checks, references from previous employers and Disclosure and Barring Service (DBS) checks. On commencement of employment new staff must complete a structured induction which includes training and shadowing experienced members of the team. Care staff say this process is useful as it helps them understand their role.

The service provider oversees the quality of care through appropriate governance and quality assurance measures. Written information such as policies and procedures help to underpin safe practice. We saw these documents are kept under review and updated when necessary. Other written information we viewed included the statement of purpose and user guide. Both these documents give an accurate description of the service provided. The manager completes audits every three months and considers areas such as medication, infection control, and care documentation. The Responsible Individual (RI) visits the service in line with regulation and analyses information in relation to things such as incidents / accidents, compliments and complaints, safeguarding matters and staffing matters. Every six months a quality-of-care review is completed to assess the services performance and identify where improvements can be made.

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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