



Arolygiaeth Gofal  
**Cymru**  
Care Inspectorate  
**Wales**

## Inspection Report

### Llys Herbert



Ty-draw Road, Lisvane, Cardiff, CF14 0AW



03300 583247

The inspection visit took place on 23/03/2026

### Service Information:

|                                          |                                                                                                           |
|------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| Operated by:                             | Care UK Care Services Limited and WELL Cardiff<br>OPCO Limited                                            |
| Care Type:                               | Care Home Service<br>Adults Without Nursing                                                               |
| Provision for:                           | Care home for adults - with personal care                                                                 |
| Registered places:                       | 75                                                                                                        |
| Main language(s):                        | Welsh and English                                                                                         |
| Promotion of Welsh language and culture: | The provider promotes, anticipates, identifies, and meets the Welsh language and culture needs of people. |

## Ratings:



**Well-being**

**Good**



**Care & Support**

**Good**



**Environment**

**Excellent**



**Leadership & Management**

**Excellent**

## Summary:

Llys Herbert provides care and support to adults in a calm, welcoming home within a quiet area of Cardiff.

People experience good well-being supported through positive relationships, meaningful activities and safe care practices. We found people experience kind, respectful and person-centred care from staff who know them well.

Care and support is good. People's needs are assessed, care is planned in detail, and records show staff provide care and support in line with people's needs and preferences. A proactive culture of care is now in place, people's needs are being met, and risks are minimised.

We found the environment to be of an excellent standard, due to its high-quality decor and well-designed space, highly valued by people living in the home.

Leadership and management arrangements support excellent outcomes for people. The new management team has addressed all non-compliances identified at the last inspection. Delegation is clearer, working practices are more consistent, and record-keeping has improved and is enhanced. Quality assurance arrangements are robust, with detailed checks completed frequently, currently daily, by the management team. As a result, the culture and practices within the service have improved significantly since the last inspection.

## Findings:



### Well-being

Good

People experience respectful and compassionate care from staff who understand their needs, preferences and routines. People and relatives described staff as “wonderful”, “patient” and “very supportive”. We observed a calm and relaxed atmosphere throughout the service. This was echoed by feedback from visitors and relatives. Staff interactions were consistently kind and attentive. People were supported to maintain their dignity and privacy at all times.

People are supported to exercise choice about how their care is delivered and how they spend their time. Staff know people well and respect their right to change preferences. People are encouraged to personalise their rooms. We saw several bedrooms that were highly personalised with treasured photographs and belongings, which helped promote a sense of ownership, identity and belonging.

People feel listened to and supported. They spoke positively about the changes introduced by the new management team. People spoke very positively about the new Deputy Manager, who is described as visible and approachable and compassionate, kind and helpful. They regularly walk around the home to check in with people.

People are supported to maintain relationships with those important to them and to develop relationships with the people they live with. Visitors are consistently welcomed. Relatives spoke positively about the care and support people receive. A range of opportunities are available for people to come together. These include regular ‘coffee and chat’ sessions in the bistro café and group garden walks around the home. Protected time is provided in the lounge for privately arranged gaming sessions between people living in the home. Structured group activities are also offered daily within the home, enabling people to socialise and share experiences if they choose. People are supported to take part in group trips within the community.

People have opportunities to take part in meaningful activities that support their well-being. The activities coordinator ensures group activities are provided regularly on most days. These include visiting entertainers and falls prevention exercises. Where people choose not to take part in group activities, recording systems enable staff to monitor this. One-to-one engagement is then offered. The service has introduced initiatives to ensure more people can access meaningful experiences. This includes the ‘resident wishes’ initiative, which supports people to achieve personal goals. For example, a Welsh-speaking person living in the home who loves Welsh rugby, was supported to meet several players from the Welsh rugby team on St David’s Day and received a signed jersey. People are also supported to take part in community trips together, including visits to local museums in Cardiff. An intergenerational activity has also taken place with a local primary school.

The service recognises and promotes Welsh culture and language. Welsh signage and information are visible throughout the home. We were greeted in Welsh on arrival. The Deputy Manager spoke positively about learning Welsh and integrating Welsh language and culture into everyday life within the service.



## Care & Support

**Good**

People receive care and support that is planned around their individual needs. Care is delivered in partnership with people and, where appropriate, their representatives. Personal plans are comprehensive and are reviewed regularly. Care documentation clearly reflects people's needs, preferences and risks. Records show that relatives are involved and that their feedback is considered as part of ongoing reviews.

Medication systems are safe. Staff follow clear procedures for the ordering, storage, administration and recording of medicines. Systems support people to receive their medicines safely and as prescribed. Infection prevention and control arrangements protect people from harm. The service is clean and well maintained. Cleaning schedules are in place and followed. Audits and external reviews demonstrate effective systems. The provider identifies actions promptly and completes them in a timely way.

People are protected from harm and neglect. The provider has addressed the concerns identified at the last inspection. Significant improvements have been made following changes to staffing, including the appointment of a new management team. Staff now demonstrate improved knowledge and understanding of their responsibilities. Whistleblowing procedures are discussed and tested regularly. Staff told us they feel confident to raise concerns.

People receive effective support to maintain and improve their health and well-being. The provider records, monitors and analyses health information in line with best practice. Daily food and fluid records are completed accurately. Action plans are implemented promptly. Referrals to health professionals, including dietitians and district nurses, are made without delay. External health professionals spoke very positively about the service. They described improved outcomes and improved health and well-being for people.

Recording practices have improved significantly. Records are clear, accurate and consistently completed. We examined a range of people's records and found no significant gaps. Daily notes demonstrate proactive care and support delivered in line with assessed needs. Records show staff monitor people's well-being and take timely action when needs or risks change.

Staffing arrangements support safe care. We found no gaps in staff rotas. On occasions, staffing levels exceeded assessed minimum levels. This supports timely responses to people's needs, which we observed during the inspection. Staff worked well together and delegated tasks effectively, particularly during busy periods. People receive timely day-to-day care. We observed staff responding promptly to call bells, including during morning routines. People told us there are no delays in receiving care. Call bells are within reach for those able to use them. Falls monitoring equipment is in place and switched on. Staff carry out regular welfare checks for people who required closer observation.

Risk management arrangements are effective. The provider monitors falls, accidents and incidents and any signs of people becoming unwell closely. Records show a significant reduction in falls and incidents since the last inspection. The service has moved from a reactive to a proactive approach.



## **Environment**

**Excellent**

Llys Herbert provides excellent, well-maintained facilities. The service maintains a warm and fresh atmosphere throughout. The environment is extremely clean, inviting and homely. People consistently commented on the high standards of cleanliness. Small, intimate lounges and dining areas create a relaxed, home-like atmosphere and are well presented.

Staff actively engage people in discussions about their environment to ensure it reflects their preferences. Bedrooms reflect people's personal tastes and character. Dining areas are well prepared and attractively presented with flowers, cutlery, napkins and menus. People value the high quality of the environment and said they feel proud of their home and how it is maintained. Relatives told us they like the way they are always greeted warmly by reception staff.

People's privacy and dignity are prioritised in the design, layout and use of living spaces. Bedrooms are personalised and support a strong sense of belonging. Everyone we spoke with said they like their room. We observed that people have the necessary mobility equipment in their rooms, which supports independence and mobility.

The service has embedded an improved call bell system. This supports people's independence, reduces noise and contributes to a calm and relaxed atmosphere. Internal doors remain unrestricted, enabling people to access all areas of the building freely.

The home offers a bar, cinema, hairdresser and café. Several people enjoy socialising with relatives and friends in the café. This helps people to maintain important relationships and supports emotional well-being.

Garden and outdoor areas demonstrate excellence in design. They provide inviting and safe spaces where people can access nature freely. These areas enable people to go outside independently wherever possible. We observed people enjoying the spring sunshine in the gardens with staff. Regular garden walks have been introduced to help people remain connected with the outdoors.

The provider demonstrates a strong commitment to maintaining the premises and equipment to a very high standard. The housekeeping and maintenance team are responsive and readily available. Health and safety checks and risk assessments are in place, including fire safety and legionella management. Staff have access to the required training, equipment and guidance. Personal Emergency Evacuation Plans are in place to support people in the event of an emergency.





Leaders act to learn from mistakes. The new leadership and management team has transformed the service within a short period of time. They carry out daily checks and audits to maintain oversight and drive improvement. They complete comprehensive audits across all areas of the service. Audit findings are analysed in detail and actions are taken promptly to address shortfalls and sustain high standards of care. Positive outcomes for people were evident during the inspection, including a reduction in falls, accidents and incidents and significantly improved care delivery. The service uses tracking tools to monitor themes, actions and impact. Quality assurance leads complete internal mock inspections to test the performance of management teams which provides additional scrutiny and support continuous improvement. The manager also completes reflective analysis to support learning and ongoing development.

The Responsible Individual (RI) completes regular visits to the service. They produce detailed reports and recommendations, which are used to drive improvement. Quality of care reviews are completed regularly and inform the service improvement plan. Recruitment processes ensure staff are appropriately vetted before starting work. Staff receive the required training, as well as regular supervision and guidance. Most staff are registered with Social Care Wales, the workforce regulator.

Leaders work closely with external professionals and networks to strengthen practice and embed learning. External health professionals spoke very positively about the service and the new management team. They described the team as *“fabulous”*, *“brilliant”*, *“fantastic”*, *“well prepared”* and *“very engaged”*. Professionals told us people’s health and well-being has *“significantly improved”*, because of the new management team. They also described the atmosphere in the home as *“positive”* and said staff practices *“go the extra mile”*, and staff are *“always smiling, friendly and wanting to help”*, adding that *“it’s a joy to come to this home”*.

People are confident giving feedback because they know this is welcomed and responded to in a spirit of partnership. People using the service spoke very positively about the leadership and management team and described the new registered manager as *“highly effective”* and *“quick to act”*. Relatives told us that communication and information sharing from the senior and management team is *“excellent”*, and that relationships are based on close partnership working. We observed positive relationships and good rapport between the lead chef, the Deputy Manager and people living at the home. During the inspection, we observed a friendly atmosphere, with staff checking in with people and engaging warmly. They demonstrated a good understanding of people’s emotional needs and provided sensitive, person-centred support. In addition to this we

found concerns and complaints are also resolved quickly.

Overall, staff feedback is consistently very positive and reflected a service that is well led, stable and supportive. Staff described improved morale, clearer roles and effective teamwork, with one stating that “*everything has changed for the better*” and that staff “*know what we are doing now.*” Communication, record keeping and delegation were described by care staff has significantly improved, and staffing levels were generally described as sufficient to meet people’s needs. Most staff feel listened to and supported by management, with strong opportunities for learning and development. Senior staff highlighted that “*there is a genuine effort here to improve people’s quality of life and their experiences.*”

## 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.**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

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