Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Ty Coch Care Home

Ty Coch Nursing Home, 105 Station Road Llanishen, Cardiff, CF14 5UW

01923609609

The inspection visits for this service took place between 16/06/2026 and 17/06/2026

Service Information:

Operated by:	Amaya Care Homes (Ty Coch) Limited
Care Type:	Care Home Service Adults With Nursing
Provision for:	Care home for adults - with nursing, Provision for mental health
Registered places:	61
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	Requires Improvement
Care & Support	Requires Improvement
Environment	Good
Leadership & Management	Good

Summary:

Ty Coch Care Home provides residential and nursing care in the Llanishen area of Cardiff. The provider supports older people, including those living with dementia. Services include respite care, long-term nursing care, end-of-life support, and palliative care.

Well-being requires improvement because while staff know people well and provide dignified and respectful support, people, or their representatives, are not actively involved in identifying, developing or reviewing their own well-being outcomes.

Care and support requires improvement. While staff have good relationships with people, records and case recordings are not completed accurately. We cannot be assured people consistently receive care and support which fully meets their needs.

The environment is good because people live in a warm, vibrant and homely atmosphere which

promotes a sense of belonging.

Leadership and management is good because there is a committed and proactive management team who are focused on improving outcomes and experiences for people living at the service. Leaders demonstrate a good understanding of the service's strengths and areas for development and have established systems to monitor quality, safety and performance.

Findings:

Well-being — Requires Improvement

Most people are treated in a dignified and respectful manner, with staff providing care in a kind and compassionate way. During a mealtime observation we saw one person receiving kind, respectful and delightful support. The person was fully engaged, smiling and responding to care staff. We saw numerous examples of how people have developed strong bonds with some staff members, including maintenance and catering staff. People spoke positively about staff. One person told us "*Staff are polite and respectful."* Another said "S*taff know me well and know my routines and what I like".*

While staff know people well, records do not demonstrate that people are actively involved in identifying, developing or reviewing their own well-being outcomes. Support planning does not consistently reflect people's preferences, interests and aspirations. We acknowledge the provider has only recently taken over the service and has already identified areas requiring improvement. Work is underway to strengthen support planning and promote a more person-centred approach. However, these changes are not yet fully embedded. Further progress is needed to demonstrate people consistently receive care and support which reflects their individual preferences, needs and personal outcomes. Outcomes for people require improvement because people are not involved in identifying, developing or reviewing their well-being outcomes. This places people at risk of achieving poor well-being outcomes. We expect the provider to make improvements.

People told us they share their views and participate in decisions about their lives on a day to day basis, with regular resident meetings providing opportunities for engagement and discussion. We identified further opportunities to build on this positive foundation by strengthening participation. This includes enhancing access to information about independent advocacy services.

The provider demonstrates a commitment to supporting social interaction and maintaining important relationships. People told us, and we saw, visitors are welcome into the home. The provider has introduced opportunities to support social inclusion and community engagement. People told us they enjoy some of the activities such as live singers, schoolchildren visiting and choirs. These initiatives show efforts to reduce social isolation and provide opportunities for people to maintain social connections. People told us that the activity programme can be improved as some of the current activities do not suit their preferences. At the time of the inspection, there was no activities coordinator in post; however, the provider is actively recruiting to this role.

People told us they felt safe and we found safeguarding procedures were understood by staff and implemented appropriately.

The provider is working towards achieving the Welsh Active Offer. Welsh language signage, visual prompts and a Welsh "word of the day" initiative are evident throughout the home, promoting Welsh language and cultural identity.

Care & Support — Requires Improvement

We observed many positive and caring interactions between care staff and people living at the service. Throughout our inspection, we saw people treated with kindness and warmth. Care staff develop meaningful relationships with those they support. People appear comfortable in their surroundings and are well presented, clean and appropriately dressed.

While people are generally well-presented, recording systems do not always provide assurance personal care has been delivered in line with support plans. In some records it is unclear whether care was offered, declined or was not required. We found examples where support plans state people should be offered daily showers, but records evidence only a limited number of showers over several weeks. This means the provider cannot always demonstrate people's preferences and choices regarding personal care are being consistently promoted. One person told us "*I would like a shower but it's too much bother for them"*.

While people appear to be in good health, records relating to areas such as catheter care, fluid intake and pressure care are not always completed consistently. This limits assurance care is delivered in line with assessed needs and planned support. Outcomes for people require improvement because records and case recordings are not completed accurately. We cannot be assured people consistently receive care and support which fully meets their needs. We expect the provider to make improvements.

While we have identified areas for improvement, a strength of the service is the recording and communication around peoples' healthcare and monitoring and professional involvement. Referrals to health professionals are made for people when concerns are identified. Clinical records and communication notes contain detailed information regarding health conditions, treatment plans and family communication.

We found inconsistencies in mealtime support. On the first day of inspection, people were not routinely offered choices and staff interaction during meals was limited. There was a notable improvement on the second day, with people being actively offered choices. However, some recorded nutritional support needs were not consistently followed. We found one person who requires prompting, encouragement and occasional physical assistance to maintain adequate nutrition did not receive this support at lunchtime.

Medication management requires improvement. Although systems are in place to support the safe administration and monitoring of medicines, recent medication errors and discrepancies reduce confidence in the effectiveness of these arrangements.

The provider has good infection control procedures in place. We observed good hygiene practices with staff wearing appropriate PPE.

Environment

Good

People live in a home which is clean and comfortable. The entrance area is bright and welcoming. People have access to a variety of spaces to spend their time. The home has comfortable lounges and dining areas. This gives people opportunities to socialise with others or enjoy privacy when they choose. Bedrooms are personalised and the majority have en-suite facilities. We saw evidence the provider is continuing to invest in improvements to the home. Bedrooms are being redecorated, furniture is being replaced and additional refurbishment work is planned.

We were particularly pleased to see the efforts made to create a warm, vibrant and homely atmosphere throughout the service. The provider has taken time to decorate communal areas with colourful displays, pictures and themed decorations. During our inspection the home was celebrating the World Cup. There was a sense of excitement and occasion within the home. Balloons, football-themed artwork, flags and decorative displays were evident throughout the building. These decorations contributed to a lively and cheerful environment. We saw people engaging in conversations about sporting events, past experiences and personal interests.

There are a range of photographs, pictures and decorative features displayed around the home, helping communal spaces feel welcoming and personalised. Noticeboards contain information about activities and upcoming events. Throughout the home, efforts have been made to add colour, visual interest and points of engagement for people living there. These thoughtful touches help create an environment where people feel valued and included, supporting a sense of belonging and community. They also provide opportunities for reminiscence, social interaction and meaningful conversations between people. We found these initiatives contribute positively to the overall atmosphere of the home, which feels friendly and welcoming.

People's safety and comfort is considered within the design and maintenance of the home. Bathrooms and toilet facilities are accessible and support people's dignity and independence. Equipment needed to support people's mobility and moving and handling needs is available and in good working order.

The outdoor spaces are attractive and accessible. We were pleased to see people are being encouraged to make greater use of the garden through the introduction of a gardening club. This provides additional opportunities for fresh air, social interaction and meaningful activity.

There are suitable arrangements in place to help keep people safe. Security measures include controlled access systems and visitor sign-in procedures. Fire safety equipment is maintained, hazardous substances are stored securely, and kitchen and service areas are appropriately managed.

Leadership & Management — Good

People benefit from a service that is led by a visible, committed and proactive management team who are focused on improving outcomes and experiences for people living at the service. Leaders demonstrate a good understanding of the service's strengths and areas for development and have established systems to monitor quality, safety and performance.

We were told how managers are working with staff to strengthen accountability and improve outcomes for people. We saw evidence of regular governance meetings, audits and action plans, demonstrating active oversight and a commitment to continuous improvement. Leaders identify areas requiring further development and are implementing measures to address them. While the impact of these changes is not yet consistently evident across all areas of the service, there is evidence of a structured approach to improvement and monitoring.

Staff told us managers are regularly present within the home and provide support when needed. The manager attends handovers and undertakes night and weekend visits. The provider has introduced wellbeing and appreciation initiatives to support staff morale during a period of significant change. Many staff spoke positively about the support available to them. One staff member told us, *“Everything is working well. Right from the management, staff and residents."* However feedback about communication and culture was mixed, with some staff feeling their views were not always acted upon. Some staff report low morale. Outcomes for people require improvement because we are not confident there is a positive staff culture which can impact on peoples wellbeing. We expect the provider to make improvements.

The provider invests in developing and supporting staff. Concerns regarding staffing levels and skill mix have been recognised. Positive steps have been taken to address these through recruitment initiatives, workforce planning and enhanced management oversight. Recruitment processes are robust and induction arrangements are detailed. Staff have access to a wide range of training and learning opportunities. Systems for supervision, competency assessment and clinical oversight support staff development. We found some staff require more face-to-face training in specialist areas. The provider has acknowledged this need and is taking action to strengthen learning opportunities and further enhance workforce capability.

Leaders are open and transparent about the challenges the service has faced, including staff turnover, changes in leadership and the development of a more person-centred culture. They demonstrate insight into the improvements required. The provider is working to embed a positive, open and compassionate culture which places people at the centre of care.

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
Outcomes for people require improvement because people are not involved in identifying, developing or reviewing their well-being outcomes. This places people at risk of achieving poor well-being outcomes.We expect the provider to make improvements.	16/06/26
Outcomes for people require improvement because we are not confident there is a positive staff culture which ensures the best possible outcomes are achieved for people. We expect the provider to make improvements.	16/06/26
Outcomes for people require improvement because because records and case recordings are not completed accurately. We cannot be assured people consistently receive care and support which fully meets their needs and we expect the provider to make improvements.	16/06/26

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