Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Ty Ddraig

Ty Ddraig, Rhigos Road Hirwaun, Aberdare, CF44 9PS

01792 885126

The inspection visit took place on 05/08/2026

Service Information:

Operated by:	M&D Care Operations Ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Provision for learning disability, Provision for mental health, Care home for adults - with personal care
Registered places:	16
Main language(s):	Welsh and English
Promotion of Welsh language and culture:	The provider is not promoting the Welsh language and culture needs of people, and this requires improvement.

Ratings:

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

Summary:

The quality of well-being, care and support, environment, and leadership and management at Ty Ddraig is Good. This is a newly established service and, whilst systems and practice continue to develop, people receive safe care and support and achieve positive outcomes. Relatives and professionals are positive about the service and describe staff as caring, professional and responsive to people's needs.

People receive support informed by care plans, risk assessments and positive behaviour support plans, although further work is needed to strengthen links between these documents and ensure information is clear and outcome focused.

The provider responds appropriately to significant incidents by reviewing practice, supporting staff through debrief sessions and implementing measures to reduce the risk of recurrence. Medication is managed safely, with appropriate auditing and oversight arrangements in place. People live in a clean, purpose-built environment that is personalised and generally well maintained, although some environmental improvements remain in progress.

Leadership and management arrangements continue to develop appropriately for a new service, with evidence of supervision, staff meetings, quality assurance processes and reflective practice. Areas requiring further development include staffing consistency, care planning and ensuring training fully equips staff to meet the needs of people using the service. Overall, people receive good quality care and support, and the provider continues to develop and embed systems that promote consistency, learning and service improvement.

Findings:

Well-being — Good

People's well-being is promoted through support tailored to their individual needs, preferences and routines. As a newly established service, people continue to settle into their home and develop relationships with staff; however, evidence gathered during the inspection indicates people achieve positive outcomes. Feedback received from relatives and professionals is largely positive. One relative tells us, “We are very happy with the service, they provide weekly detailed reports.” Another relative says, “So far it’s been excellent, a very positive start.”

People are supported to maintain important relationships with relatives, who tell us communication is generally good and they feel involved in reviews and discussions about care and support. A professional describes the service as responsive and reports that individuals and relevant professionals are involved in planning care and support arrangements. This provides assurance that people are supported to have their views represented and that important people in their lives remain involved in decisions affecting them.

Flats are personalised with the support of families, helping people make their living space their own. Care records include information about what is important to people, their preferred routines and how they wish to be supported. This helps people experience continuity, familiarity and reassurance within a new living environment, supporting them to settle into the service and maintain their sense of identity. Positive behaviour support approaches are used to help staff understand individual needs and known triggers, supporting more consistent responses, reducing distress and promoting people's safety and overall well-being.

The service supports people with complex communication needs and behaviours that challenge. Staff demonstrate an understanding of the importance of positive behaviour support and individualised approaches. We see evidence of efforts to understand triggers, adapt environments and develop support strategies that enable people to participate in daily life as fully as possible. Whilst the service continues to develop and some aspects of care planning require further refinement, the evidence indicates people are treated with dignity and respect and receive support that promotes their safety, comfort and overall well-being.

There are mixed views regarding communication and staffing consistency. One relative raised concern, about the timeliness of communication and staff consistency. Several staff and relatives also told us staffing consistency remains an area for improvement, whilst recognising the service is actively working to address this. Despite these concerns, the relative told us their family member appears settled and well supported. On balance, the evidence supports a finding that people achieve positive well-being outcomes within a service that continues to develop and embed its practice.

Care & Support — Good

People receive care and support that is informed by individual assessments, risk management plans and positive behaviour support strategies. We reviewed a sample of care records and found people have detailed information available to guide staff in meeting their needs safely. Risk assessments identify known risks and include strategies designed to reduce the likelihood of harm whilst supporting people to maintain as much independence as possible. We saw evidence that people have access to healthcare professionals when required, including GPs, consultants and other specialist services, and records demonstrated ongoing involvement from families and multi-disciplinary professionals in reviewing care and support arrangements.

The service supports people with complex needs, including behaviours that challenge. Positive behaviour support plans are available for people and staff demonstrate an understanding of the approaches required to support individuals safely. Following significant incidents, the provider has reviewed support arrangements, completed staff debriefs and implemented additional measures to reduce identified risks. Records evidenced reflection, learning and changes to practice, providing assurance that incidents are used as an opportunity to review support arrangements and improve outcomes for people.

Medication is managed safely overall. A medication observation completed during the inspection found medicines were stored securely and MAR charts reviewed were completed appropriately, with administration recorded at the time medicines are given. Medication stock checks completed during the inspection were largely accurate and the provider has systems in place to monitor medicines management through daily and weekly audits. Staff responsible for administering medication have completed medication training and competency assessments, with ongoing competency reviews in place.

People receive safe care and support that reflects their needs, with systems in place to identify and respond to changing risks and circumstances. Whilst the overall standard of care and support is good, we identify areas where care planning documentation requires further development. Positive behaviour support plans and care plans are not always fully aligned. Some outcome-focused plans contain a level of detail making it less clear how support is delivered to help people achieve their personal outcomes. The Responsible Individual recognises these areas for development and told us they will review and further streamline care planning documentation. This is to improve consistency for staff and provide clearer guidance on the support people require to achieve their personal outcomes.

Environment — Good

People live in a purpose-built environment that is designed to meet their needs and promote their safety, comfort and well-being. The home is clean, well maintained and suitably adapted for the people living there. Flats are personalised to reflect people's preferences and interests, with families playing an active role in helping people make their living spaces their own. The environment supports people to maintain independence whilst providing staff with the facilities required to deliver care and support safely.

The provider has arrangements in place to help ensure the premises and equipment remain safe. Safety certificates, risk assessments and maintenance records demonstrate ongoing monitoring of key areas, including fire safety, infection prevention and control, water safety and environmental risks. Personal Emergency Evacuation Plans are in place and staff have access to information to support safe evacuation in an emergency. Routine safety checks provide assurance that risks are identified and managed.

The service responds appropriately to environmental concerns as they arise. Following incidents involving magnetic door locking systems, the provider has reviewed existing arrangements and implemented measures to strengthen safety and reduce risks to people. Although some repair work and environmental improvements remain ongoing, actions have been identified and are being progressed. Managers demonstrate a clear understanding of outstanding issues and the steps being taken to address them.

People benefit from access to communal and outdoor spaces. The grounds are generally well maintained, and plans are in place to enhance privacy and safety within some external areas. Communal areas are clean and welcoming. Equipment and supplies are stored safely, although additional storage solutions would assist in managing personal belongings and household items that some people do not wish to keep within their rooms.

Infection prevention and control arrangements support people to live in a clean environment. The provider's infection prevention and control policy is current and reflects relevant legislation and guidance. We also reviewed the CCTV policy and found it supports the safe and proportionate use of surveillance whilst balancing people's privacy, dignity and safety.

Whilst the environment is good overall, some areas would benefit from further development. Planned maintenance works continue to progress, and the provider has identified opportunities to further enhance the environment. Plans are in place to plant shrubs and screening within external areas to improve privacy. The manager also recognises hallways appear clinical due to the predominance of white walls and intends to involve people living at the service in decisions about

how these areas can be softened and personalised. Overall, people live in an environment that is suitable for the service provided and supports their safety, well-being and quality of life.

Leadership & Management — Good

People benefit from a service that has systems in place to support quality assurance, staff development and service improvement. As a newly established service, leadership arrangements continue to develop, but we find managers demonstrate an awareness of the service's strengths, challenges and areas requiring further development. Records reviewed show the management team monitor key aspects of the service, including incidents, staffing, training, medication management, health and safety and environmental matters. Actions arising from audits and reviews are identified and followed up, supporting ongoing oversight of the service.

A range of quality assurance systems are in place, including audits, staff meetings, supervision arrangements and Responsible Individual (RI) oversight. Staff meeting records demonstrate managers share information, discuss incidents and learning, review operational matters and provide opportunities for staff to contribute to service development. The RI oversight arrangements provide an additional layer of governance and demonstrate ongoing monitoring of the quality and safety of the service.

The provider has systems in place to monitor staff training and development. Training records evidence staff have completed a range of mandatory and specialist training relevant to their roles. The training matrix provides a clear mechanism for monitoring completion and refresher dates, enabling managers to identify training needs and maintain oversight of workforce development. Supervision arrangements are supported by a structured supervision policy, with a supervision matrix used to monitor supervision activity and planned review dates. As the service has only recently become operational, annual appraisals are not yet due for many members of staff; however, systems are in place to support their completion when required.

Staff describe managers as approachable and supportive. Staff feedback and records reviewed indicate staff receive opportunities to reflect on practice and discuss incidents. Staff receive guidance from a positive behaviour support specialist (PBS) to help them understand and respond consistently to people's individual needs. One staff member told us, "Yes, the PBS Practitioner messages me to debrief every time there is an incident, which can take 45 minutes to an hour." Debrief records reviewed during the inspection support this feedback and demonstrate staff are encouraged to reflect on incidents, identify learning and consider how risks can be reduced in future. This contributes to a culture of reflective practice and continuous learning.

Whilst governance arrangements are developing appropriately, the provider recognises there are areas requiring further attention. Staffing consistency and workforce stability remain challenges within this newly established service, and some staff and relatives identify this as an area for improvement. Management has taken steps to address recruitment and retention pressures and continues to focus on developing a stable and skilled workforce. Overall, the management team demonstrate a commitment to learning, improvement and delivering positive outcomes for people, with governance arrangements that are increasingly embedded as the service matures.

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

This report is also available in Welsh