



## Inspection Report on

**Ty Dol**

**Ty Dol**  
**Brighton Road**  
**Gorseinon**  
**SA4 4BN**

## Date Inspection Completed

13/06/2023

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## About Ty Dol

|  |   |
|--|---|
| Type of care provided                                      | Care Home Service<br>Adults Without Nursing   |
| Registered Provider  | Achieve together Ltd  |
| Registered places  | 8   |
| Language of the service                                    | English   |
| Previous Care Inspectorate Wales inspection                | <a href="#">This is the first inspection since being registered under RISCA.</a>  |
| Does this service provide the Welsh Language active offer? | This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture. |

### Summary

People feel safe and happy at this service. A relaxed atmosphere throughout the home helps people and visitors feel at ease. The manager, supported by the organisation, continually strives to develop people's care and support. People are encouraged to make daily choices in how they live their lives and to do things that are important to them. Keyworkers ensure people are invited to contribute to their care review process as much as they wish. Good communication channels are evident, with robust monitoring of the care people receive every day.

The enthusiastic, effective and professional staff team want to make a positive difference to people's lives, where people they support are at the heart of the service - they treat people with respect and support each person to have a voice. Care workers feel well supported by the manager and receive training relevant to their roles.

### Well-being

Overall, people at Ty Dol are as independent as they wish to be and have control over their lifestyle choices. Pen pictures record what is important to people and personal plans clearly describe each person's support. Care workers thoroughly know the people they support, and keyworkers work with people to ensure they receive the support and information they need. Till now, people have not wanted house meetings to raise any issues they want to discuss with the staff team, but the manager has arranged one next week to see how people like it. The home's statement of purpose accurately describes what the service provides and is readily available to people. All people using the service have a copy of the written guide: this provides details of what they may expect from the home as well as details of the complaints process should they need to use it. People have access to advocacy services where they want independent support in issues that affect them.

People are relaxed, comfortable and know what opportunities are available to them: they do things that make them happy. Care workers encourage people to make choices and decisions about how they spend their time. Each person is as active as they wish to be. People personalise their surroundings in line with their interests and hobbies. Care workers have a good rapport and relationship with people and interact in positive ways, with good-humoured conversations.

As far as possible, people are safe and protected from abuse. People say they feel safe, and senior staff protect their privacy and personal information at all times. Care workers have been through the provider's rigorous recruitment process and are monitored to ensure they are meeting people's needs. All care workers receive support, guidance, and training and are able to access policies and procedures to understand their responsibility to protect vulnerable people. The home's safeguarding policy and procedure is in line with current legislation and local safeguarding procedures.

The staff team have access to up to date care records that enable people to receive the support they need. The manager carries out initial assessments before people move into the home and considers a range of information to ensure they can meet people's needs: they take information from various sources, including previous placements and social worker reports. This is an ongoing process as people may look to move on to more independence. Care reviews and risk assessments help maintain people's independence while keeping them safe from any risks involved. Keyworkers and senior staff review care records every three months, or more frequently, wherever support needs change so they remain current.

People do things that matter to them and make them happy. Some people have formal activity plans in place, while others are more casual about how they live their lives. The staff team are flexible to meet people's plans if they should change. This means every day is potentially different, which is how people in the service prefer it. People have enjoyed having barbeques, volunteering in local shops, local beach days, London theatre trips and visiting relatives, and each person says they are happy in Ty Dol. One person said, *"It's a really nice place. We all get along just fine."*

The home does not provide the Active Offer of the Welsh language: this means being proactive in providing a service in Welsh without people having to ask for it. We were told that although some care workers are bilingual, there is currently no demand for exclusively Welsh speaking support.

Overall, people receive support in a suitable environment. The home is warm and clean. People say they feel comfortable, safe and happy. People's rooms are in fact, self-contained flats with kitchen facilities and wet rooms in each bathroom. Because of this, there is no communal kitchen: each person prepares their own meals. Flats are personalised to reflect the occupant's taste and interests, with items such as ornaments, soft furnishings, photos and items of furniture. People may socialise in a lounge and a large, paved space outside. However, these areas still appear new and under-developed. The manager and Responsible Individual (RI) both agree that the communal lounge will be made more homely by having some colour on the walls at least. In addition, the paving area at the rear of the property is currently bare and in need of development so that people can enjoy the area to relax and socialise in. These areas are both in the process of being developed, and we note that garden furniture was delivered during our inspection.

People are safe from unauthorised visitors entering the building, as all visitors have to ring the front doorbell before gaining entry and record their visits in the visitor's book when entering and leaving. Peoples' personal care records are stored securely and only available to care workers and healthcare professionals authorised to view them.

Clear infection control procedures are in place. Fire exits are free of obstructions. All COSHH (Control of Substances Hazardous to Health) materials are stored correctly, in line with the COSHH Regulations 2002. There are clear instructions displayed in the home on what to do in the event of a fire and the manager completes regular audits of the environment.

## Leadership and Management

Overall, the provider has a clear vision of the support it provides, and a positive regard to each person receiving support. The provider uses regular audits to monitor all aspects of people's care and any issues that arise are promptly resolved. The RI and other members of the provider's quality team are in regular contact with the home and regularly provide consistently good support to the manager. All aspects of the service are summarised in six-monthly quality of care reports, which identify all planned improvements for the home.

Regular discussions take place with people and healthcare professionals involved in their care. People know how to make a complaint if they need to and are confident the staff team would listen to them if they did.

The provider ensures there are enough knowledgeable and skilled care workers to provide the right support for people. Pre-employment checks take place before new employees start work: these include reference checks, photo identification and Disclosure and Barring Service (DBS) checks. The staff induction programme links to individual learning outcomes and the 'All Wales Induction Framework for Health and Social Care.' Care workers are up to date with their essential training. Care workers say this provides them with a good understanding of their roles and responsibilities and the best ways to support people. Employees can discuss any issues they wish to raise in three-monthly supervision meetings.

As far as possible, the provider takes appropriate steps to safeguard people from neglect and abuse. Care records clearly state any risks to people's well-being and detailed risk management plans help to keep people healthy, safe and as independent as possible. Care workers recognise their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises. They would approach the manager or RI but would also contact external agencies such as the local safeguarding office if they thought they needed to.

### Summary of Non-Compliance

| Status              | What each means   |
|---------------------|---|
| <b>New</b>          | This non-compliance was identified at this inspection.  |
| <b>Reviewed</b>     | Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection. |
| <b>Not Achieved</b> | Compliance was tested at this inspection and was not achieved.  |
| <b>Achieved</b>     | Compliance was tested at this inspection and was achieved.  |

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people’s well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

### Priority Action Notice(s)

| Regulation | Summary  | Status |
|------------|--|--------|
| N/A        | No non-compliance of this type was identified at this inspection | N/A    |

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

### Area(s) for Improvement

| Regulation | Summary | Status |
|------------|---------|--------|
|------------|---------|--------|

|     |  |     |
|-----|--|-----|
| N/A | No non-compliance of this type was identified at this inspection | N/A |
|-----|--|-----|



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