



# Inspection Report on

**Ty Derwen**

**Ty Derwen Residential Home  
Kendon Road Crumlin  
Newport  
NP11 4PN**

## **Date Inspection Completed**

*22/09/2022*  
22 September 2022

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## About Ty Derwen

|  |  |
|--|--|
| Type of care provided                                      | Care Home Service<br>Adults Without Nursing  |
| Registered Provider  | TL Care Homes Limited Liability Partnership  |
| Registered places  | 28   |
| Language of the service                                    | English  |
| Previous Care Inspectorate Wales inspection                | 10 February 2022   |
| Does this service provide the Welsh Language active offer? | The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service. |

### Summary

Ty Derwen is a care home service which accommodates up to 28 people. Improvements to the Health and Safety of the service have been made since our last inspection. We found that overall, the standard of health and safety is now satisfactory, although some further improvements are required, such as with record keeping.

People are happy with the care and support they receive and enjoy the range of activities on offer. People told us the care staff and manager know them well and support them with respect and dignity.

The Responsible Individual (RI) visits the home regularly, however the required reports to evidence the RI has adequate oversight of the service were not made available to us.

## Well-being

People receive person centred support from care staff who know them well. We saw people relaxed in the company of care staff, laughing and joking together as they were being supported. People told us they enjoy having visits from their loved ones and engaging in a range of activities, especially having a sing-along with the entertainer who comes in each week. The activities coordinator showed us some video from the previous week of people singing, dancing, and playing instruments.

The property is homely and comfortable. The service helps to protect people from abuse and neglect. Care workers complete training in relation to the safeguarding of adults at risk and understand their role in protecting people. The service has an up-to-date safeguarding policy, which reflects current guidance and is kept under regular review.

## Care and Support

As this was a focussed inspection, we have not considered this theme, in full

We observed warm, friendly interactions between care staff and people living at the home throughout our inspection visit. People have access to call bells to request staff support when they are in their own rooms. We saw call bells are answered promptly, the manager showed us the system for monitoring the effectiveness of this system.

## Environment

As this was a focussed inspection, we have not considered this theme, in full

The entrance area has a reminiscence corner which contains framed pictures of holiday camps, fashion advertisements, ration books, and other items from days gone by. There is a colourful birthday reminder for each person living at the home. A reminiscence tree has cards hanging on the branches with people's pictures and a brief social history of them. This helps people remember their pasts and prompts conversations with each other and care staff. The service has a five-star rating from the food standards agency which means that hygiene standards are very good.

People's bedrooms are personalised to their own tastes. The home is overall, well maintained, the décor is in good order and promotes a 'homely' feel. We viewed the safety and servicing records within the home and saw that most records were up to date. The electrical safety checks were postponed due to an outbreak of COVID-19 at the home, the manager assured us this had been re arranged to be completed now there is no longer anyone with COVID symptoms in the home. We were told hot water temperature checks are being completed regularly but records of these were not available, the manager assured us this would be addressed.

The patio area has been re-laid since our last inspection and is now level. Some fencing around this area has been replaced but we saw some additional fence panels are required to make the area safe and a gate leading to outdoor stairs did not lock properly. The manager assured us this would be addressed.

People benefit from a secure environment. Regular checks of the fire alarms take place at the home and staff are trained in fire safety. People staying at the home have a personal emergency evacuation plan to guide staff on how to support people to leave safely in the case of an emergency.

## Leadership and Management

As this was a focussed inspection, we have not considered this theme, in full

We were told the RI visits the service regularly. However, neither the required logs of their visits or a six-monthly Quality of Care review were made available to us to review as part of this inspection. People therefore cannot be assured the RI has an adequate oversight of the running of the home or that improvements are identified and achieved as required. While no immediate action is required, this remains an area of improvement and we expect the provider to take action. We will follow this up at our next inspection.

### 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      |
| 57         | Health and safety (Regulation 57):                               | Achieved |

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   |
|------------|--|----------|
| 8          | The measures in place for monitoring and reviewing the service provided are not effective enough to ensure improvements are made to the quality of care and support provided by the service. | Reviewed |

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