



Ty Dewi Sant



Ty Dewi Sant Residential Home, Myrtle Close, Penarth, CF64 3NQ



02920709331

The inspection visits for this service took place between 02/03/2026 and 13/03/2026

Service Information:

Operated by:	Vale of Glamorgan Council Adults and Children's Services
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care
Registered places:	33
Main language(s):	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

Good



Leadership & Management

Good

Summary:

Ty Dewi Sant Care Home, situated in Penarth, provides care and support for up to 33 individuals with residential and personal care needs. The responsible individual (RI) visits the home regularly and works alongside the manager, who is suitably registered with Social Care Wales (SCW). People's wellbeing outcomes are good. Individuals feel listened to and involved in decisions relating to their care and support. There are sufficient care staff to provide assistance with suitable arrangements in place to cover any staffing shortfalls. People receive good care and support from a friendly staff team. Care staff receive training to ensure they can meet people's needs effectively. Care documentation needs improvement to more accurately reflect the care and health needs of the people living in the home. People benefit from living in a pleasant, good environment that is clean, safe, and well maintained. Infection prevention and control measures are in place and implemented appropriately, reducing the risk of cross-infection within the home. People are happy with the care they receive and speak positively about the service and the kindness of the care staff.

Findings:



Well-being

Good

People are protected from harm and abuse. The home has an up-to-date safeguarding policy, and care staff receive regular training on safeguarding adults at risk. Referrals are made to the Local Authority, and Care Inspectorate Wales (CIW) is notified of incidents within the required timescales. Care staff told us they are happy working at the service and feel well supported by the manager. We looked at staff recruitment documentation and found these to be robust and contained all the required information.

Overall, people are well supported to maintain their physical, mental, and emotional well-being, and care staff are proactive in anticipating their needs. However, we identified areas within the care documentation that require improvement to ensure any changes are recorded accurately. Personal plans are vital in promoting people's well-being and should clearly detail each person's holistic needs, along with the specific actions care staff take to achieve positive outcomes. We found that some personal plans did not contain all the necessary information to guide staff effectively, including details where care and support is required. This information is essential to help staff understand what matters to people and to support their overall well-being. We discussed this with the management team, who assured us that the matter would be addressed promptly.

People receive good care and support from a friendly and approachable staff team. We were told there are sufficient care staff available to meet people's needs, with agency staff arranged to cover any shortfalls. During our observation of the dining experience, we saw that people are provided with timely assistance, support and encouragement throughout mealtimes. Individuals appear to enjoy a calm, social atmosphere while dining with others. People told us they are happy living at Ty Dewi Sant and enjoy activities throughout the week. They told us, *"I have been very happy here, there is always something going on for us."* Care staff are happy and enthusiastic about working at the service and told us, *"I love my job; we are very well supported here."*

People are supported to make choices and retain control over their daily routines. Where individuals lack capacity to make specific decisions about their care and support, appropriate Deprivation of Liberty Safeguards (DoLS) authorisations are in place.

People live in an environment that is safe, clean, and generally well maintained. During the inspection, we observed improvements across the service and identified no hazards. There are clear arrangements in place to ensure equipment and facilities are routinely serviced, with all necessary safety checks completed as required. Fire safety is well managed, and Personal Emergency Evacuation Plans (PEEPs) are easily accessible.



Care & Support

Good

Systems are in place to protect people who use the service. During the inspection, people's body language and expressions indicated they felt safe and at ease with the care staff who supported them. Care staff were observed engaging with individuals in a friendly, respectful manner and demonstrated good knowledge of people's needs, preferences, and how best to respond to them. We saw care staff taking time to sit with people and provide appropriate support. People told us they felt safe and well-protected living in the home. Records confirmed that care staff have completed safeguarding training. A safeguarding policy is in place, outlining staff roles and responsibilities in protecting adults from harm, abuse, and neglect. Care staff said they understood the importance of reporting any concerns, felt confident in raising issues with the manager, and reported feeling well supported.

People have access to a range of health and other services to support their ongoing health and well-being. Information within care documentation showed timely referrals and contact with various health professional services such as opticians, dentists, and GPs. While the personal care documentation included some of the necessary information, it did not always provide an accurate picture of people's daily care needs or how these should be met. We discussed this with the management team, who assured us that the issue would be addressed immediately. People told us they experience warm and respectful interactions with care staff, who they feel genuinely understand their individual needs. One person commented, *"Everyone here is very good. Care staff look after me really well; I can't fault any of them, we are very lucky here really."*

People have opportunities to participate in activities that reflect their interests and preferences. We were told celebrations and birthdays are celebrated throughout the year. During the visit, we observed a real sense of excitement as the weekly intergenerational baby and children's session approached. People told us how much they enjoy these visits, the activities involved, and the fun and laughter the days bring. We observed care staff spending unhurried and meaningful time with individuals, demonstrating they have sufficient capacity to promote social interaction and emotional well-being. The chef told us they can cater for any meal requested and, when a meal is returned uneaten, an alternative is sought and encouraged.

The service has safe systems in place for medication management. People receive their medication as prescribed. We looked at the medication records (MARs) and saw they are appropriately completed. Medication was found to be safely stored with daily fridge and room temperatures taken.



Environment

Good

People have a sense of belonging and are supported in a clean, comfortable, and homely environment where ongoing improvements are evident. Bedrooms are personalised with items and belongings of each person's choice. The home provides several small communal areas, along with a pleasant dining space for people to enjoy their meals. The provider has taken appropriate steps to ensure the environment offers good access and mobility access throughout the premises, which is arranged over a single level. This supports people with additional physical needs to move around the home safely and independently, and to choose freely where they wish to sit or spend their time.

People can be assured they are living in a safe environment. On arrival, we found the main entrance secure, and care staff requested that we sign the visitors' book and complete identification checks before entry, ensuring only authorised individuals are permitted onsite. Cleaning products and personal items are safely stored, reducing the risk of accidental ingestion. We saw regular environmental audits are carried out to identify issues and maintain safety. Routine maintenance checks and service equipment checks are carried out ensuring they remain safe and fit for use. Visitors were seen entering and leaving the home throughout the day, and we were told people enjoy spending time outdoors during warmer weather in the pleasant garden areas. The Food Standards Agency (FSA) has awarded the service a food hygiene rating of five (very good).

People are safe, a current fire risk assessment is in place, and Personal Emergency Evacuation Plans (PEEPs) outline how individuals would be supported to evacuate safely in an emergency. Maintenance records confirm that all legally required safety checks of the building and equipment are completed.

People receive care in a warm and homely environment. The home provides good-quality accommodation for those living there, and the management team demonstrates a clear commitment to ongoing development and improvement for residents' benefit. People can feel assured that effective systems are in place to protect public safety and reduce the risk of cross-infection. We found that call bell checks are completed and call bells are accessible throughout all areas of the home. The home's interior and surrounding garden areas are safe, secure, and well maintained, and people told us they enjoy and value these spaces especially during the warmer weather.



Leadership & Management

Good

People benefit from effective leadership and management that support the smooth operation of the service. The RI is present within the home and regularly engages with staff, relatives, and residents to gather feedback. We reviewed the latest three-monthly quality monitoring report, dated 17 September 2025. The report indicated that feedback from people was positive and complimentary about the care they receive, and it also highlighted both the areas of good practice and the areas of the service that could be improved.

People can be confident management monitors and evaluates the quality and safety of the service. Effective systems and processes support the smooth running of the home. Management actively oversee incidents, accidents, and any issues regarding the daily running of the service. The manager who is suitably qualified, registered and has good experience within the home, provides consistent leadership and governance, supported by internal audits to monitor standards and practice. We looked at some key policies and saw they are up to date and reviewed. Policies and procedures are accessible to staff and provide guidance and information to support them in their roles.

People can be assured that staff are competent to undertake their roles and there is a robust recruitment process in place. We looked at a sample of staff recruitment files and saw they contained all the pre-employment checks required in respect of any person working in regulated services. Staff meetings are held regularly for management and care staff. The manager is visible within the service and described by staff as *“very supportive”* and *“always available.”* Staff discussions evidenced there is an established staff team in place with regular agency staff used if required. Staff receive formal one-to-one supervision which provides each staff member with opportunities to discuss their performance, development and/or any concerns they may have. Care staff are provided with training in areas such as dementia care, manual handling and fire safety. The manager told us a date for Catheter care training and additional training has been arranged.

People have opportunities to express their views and raise a concern. The complaints policy clearly explains how to raise any concerns. The home has a complaints policy in place informing people how to raise concerns formally. The management team, work with external agencies and notifies the Regulator of any incidents in a timely manner.

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.

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