



Arolygiaeth Gofal
Cymru
Care Inspectorate
Wales

Inspection Report

Perthyn (West Wales)



Perthyn, Vivian Court, Llys Felin Newydd, Swansea, SA7 9FG



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www.perthyn.org.uk

Date(s) of inspection visit(s): 15/07/2025, 17/07/2025

Service Information:

Operated by:	Perthyn
Care Type:	Domiciliary Support Service
Provision for:	Supported Living
Registered places:	0
Main language(s):	English
Promotion of Welsh language and culture:	The service provider is not meeting the Welsh language and culture needs of people and this requires improvement.

Ratings:



Well-being

Excellent



Care & Support

Excellent



Leadership & Management

Good

Summary:

Perthyn is a care service providing support to people living in supported living schemes. People experience excellent well-being through a service designed in consultation with them and enables them to do things that matter to them. People are encouraged to be as independent as possible, take risks and lead active and busy lives. They are supported by dedicated and driven care staff who know them well. This has resulted in people progressing in their independence and feeling happy, safe and comfortable.

People are provided with excellent care and support. People are involved in the co-production of their personal plans and reviews where possible and set their own goals and targets. There is a very homely atmosphere in the supported living schemes and people are strongly encouraged to take ownership of their homes.

Leaderships and management of the service is good. The Responsible Individual (RI) and manager ensure there is a positive culture embedded in the service. There are effective oversight and governance tools in place to ensure the smooth running of the service. Robust recruitment procedures are in place to ensure care staff are recruited safely and appropriately. Staff receive a variety of good quality training and feel supported and valued.

Findings:



Well-being

Excellent

Exemplary care is provided, and people have control over their lives. People are encouraged to identify their wellbeing outcomes and supported to achieve these. People told us about their goals and aspirations and how the service has supported them with these. This includes volunteering opportunities, educational courses and social and leisure activities. We saw pictures, videos and records to support this, showing that people have ample opportunities to achieve desired goals. People's independence and choice is maximised through positive risk management, ensuring they can reach their potential. People are actively encouraged to build on their strengths. People spoken with told us *"Staff are great, they're helping me to learn new things"* and *"I really enjoy it here, I get loads of support from staff, I'm very happy"*. We saw people actively encouraged and supported to take ownership of their home, and there is a very strong ethos throughout the service to reflect this.

The service provider has systems in place to ensure people are protected from abuse and neglect. There is a consistent staff team who know the people they support well and can detect if they are unwell or not feeling mentally able to seek support effectively. All staff spoken with have completed safeguarding training and have a good understanding of their roles and responsibilities and how to report any concerns they may have. There are systems in place to keep people safe in the supported living settings, including environmental checks. Policies and procedures are in place to ensure the safe running of the service. Staff are recruited safely and effectively. Levels of staffing are appropriate to support people safely.

We observed people displaying positive relationships with others in the service and they told us they are *"good friends"* and often go out to activities together. Staff have a very positive attitude in their roles and a drive to support people to become as independent as they can be. The service promotes good relationships with family members and communication is very important. People are supported to integrate and be a part of their local community. For example, volunteering in the local community and embracing work opportunities.



People receive exceptional care and support designed in consultation with them. Strategies are used to involve people in decisions about their care, and these are tailored to each individual. A comprehensive needs assessment is completed with involvement from the person before care provision is offered. A personal plan is developed using information from this assessment, and contains thorough and in-depth information about how the person wishes to be supported. People's preferences and individual needs are very clearly evident throughout their highly personalised plans. Regular care review meetings are held with the person and/or their representative, and they are involved in reviewing the plan. During these meetings people are asked for feedback about their care and if they would like anything changed. Very detailed and comprehensive meeting minutes are recorded and outcomes documented, which are reviewed at the next meeting. Care staff document the support given to people and there is good oversight of what people do on a day-to-day basis. We saw a variety of communication methods used which enables people to express their needs and wishes. Staff receive training in these communication methods, and we saw them using this during our visits.

People are invited to have input into company developments. For example, people have recently been involved in developing a new health and safety check book which is now currently in use. They have also been recently involved in developing a staff training course called 'Who's house is this anyway' which is in development but due to be completed soon.

People's medication is managed safely and any changes in health are acted upon quickly and appropriately. We looked at medication storage and administration procedures in the service and found these to be sufficient and appropriate. We viewed medication administration records (MAR) which are completed accurately with no visible gaps seen. Where possible, people are supported to manage their own medication with some support, and we saw the procedures to reflect this. Systems are in place to regularly count medication to minimise any errors. Routine audits take place to ensure medication is managed effectively in the service. Records were seen of appointments and referrals within people's plans and any follow ups to these documented. Staff receive appropriate training to administer medication, along with regular refresher training.

The service provider ensures people's risk of infection is minimised by promoting effective hygiene practices, ensuring sufficient supplies are available to meet people's needs. Cleaning materials are stored safely and there are adequate supplies of infection control equipment in place. People are supported to ensure their homes are clean and tidy and all those visited were very welcoming, homely and clean.



Leadership & Management

Good

People are supported to achieve their outcomes because the service provider has effective organisational arrangement, governance and oversight to ensure smooth operations and high-quality care. The RI and manager are both approachable and visible in the service. The RI visits the services regularly and gathers feedback from people, their families and relatives. This feedback is used to make changes and improvements wherever necessary. Bi-annual quality of care reviews are completed as required by the regulations and these contain good detail about the service, its achievements and any improvements detected or planned. The manager and RI monitor service standards closely through exceptionally well organised systems of audit. Any actions raised from these audits are acted upon. Policies and procedures are in place and are reviewed regularly. Staff know how to access these and are familiar with them. The statement of purpose reflects the service well. The service user guide is thorough and informative, explaining what to expect from the support on offer.

We looked at personnel files and found very robust recruitment procedures in place when employing new staff. This includes identification documentation, previous employment reference checks and up to date Disclosure and Barring Service (DBS) checks. Care staff feel valued and supported in their roles. Care staff are trained appropriately, and most are up to date with all the training available to them. There is a variety of training on offer, including face to face sessions as well as online training course. Care staff are complementary of the training provides, with one saying *“There is tonnes of training on offer, I feel very well trained”*. Care staff are supported to complete nationally recognised qualifications such as QCF.

Care staff participate in regular supervision and annual appraisals and feel well supported and listened to. All care staff spoken with are happy in their roles and were complimentary about working for the service. Comments include *“working for Perthyn has been an amazing experience, everyone is important here, the way the management team make you feel important and valued. They listen and don’t judge and try to find solutions”* and *“the directors and manager are all approachable, they’re understanding, I don’t have to worry, I can ask them anything”*. Care staff are registered with Social Care Wales (SCW) the workforce regulator or are working towards registration.

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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