Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Primecare (North Wales) Ltd

Primecare North Wales, 71 Bryniau Road, Llandudno, LL30 2DZ

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https://primecarenorthwale.wixsite.com/website

The inspection visit took place on 17/11/2025

Service Information:

Operated by:	Primecare (North Wales) Ltd
Care Type:	Domiciliary Support Service
Registered places:	0
Main language(s):	Welsh and English
Promotion of Welsh language and culture:	The provider makes an effort to promote the use of the Welsh language and culture or is working towards a bilingual service.

Ratings:

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

Summary:

Primecare (North Wales) ltd provides domiciliary care to people in North Wales. The director of the company is the RI (responsible individual for the service) and also the manager and is present in the working office most days. They know all the care staff, people using the service and their close relatives very well.

Well-being is good. People praise the continuity of staff that allows them to develop strong, uplifting friendships. They feel their support is delivered flexibly, exactly how and when they want it, and that care is provided in a way that respects their privacy and dignity. People feel safe and are certain their wellbeing is protected.

Care and support is good. Care staff are passionate about their work and put the person at the centre of all they do. People's strengths and abilities are considered in care planning, promoting independence.

Leadership and management is good because the RI is always available and has good oversight of the business. Regular audits and other checks and measures keep the operation safe and effective. Staff are thoroughly vetted, inducted and trained before they work. They all feel well supported and the long serving group of staff are testament to the effective management and leadership.

Findings:

Well-being — Good

People are supported to be healthy and safe and have control over their care and support. Plans clearly show how people want to be supported, when and where, even to the detail of where chair is to be placed. People's preferences and wishes are a key focus of care delivery. People told us care is flexible, for example, it can be arranged around appointments and events. Plans are person centred and consider their strengths, so independence is not compromised. Health needs are documented so people are supported to be safe and healthy. People shared how staff are vigilant and will alert relatives if they are concerned about their health. Everyone we spoke with shared examples of how staff protect the privacy and dignity of people as they support them, offering kind reassurance while providing personal care. The service is working towards the active offer of Welsh; people's needs can be assessed in Welsh, and the service will try to match the care staff with similar language skills.

People are kept safe through thorough risk assessments and keen monitoring of their health and safety. Risk assessments prompt vigilance from staff around the persons' home, identifying things that need changing to enhance safety and independence. Staff alerted agencies to the need for a different mobility aid for one person and this was arranged. People shared how the manager is proactive in referring to health agencies and is an excellent advocate for people struggling to get the health care they need when they need it. Staff know who to contact if they have any concerns and the manager is praised for their prompt actions.

The agency provides support to people and their carers. They recognise the importance of continued carer support and work to ensure the family carer has time for themselves. Staff employed to watch over people while carers take time for themselves, are chosen for their compatibility; one staff shares the person's interest in art and sports, fostering rapport and easy conversation. Family members shared how lucky they feel having found the right care staff to watch over the person while they take a break. Staff support people to maintain their links with the community, visit cafes and pubs and local places of interest. People told us they feel they have gained friendships with staff; good continuity of care and care staff means they are familiar with them and have built strong, trusting relationships.

Care & Support — Good

Care plans are person centred and focus on what people can do for themselves as well as what they need. They are outcome focused and comprehensive, so staff always know exactly what is required to help people achieve their goals. People told us; *'I am so impressed with manager; they get things done quickly'* and 'c*arers keep to a routine which is important for X. They really understand X'.* Staff are praised for their knowledge, one person saying, '*they have a really good understanding of dementia'*. Another said, '*They listen to me, nothing could be better'*, and the manager is '*worth their weight in gold'*. People confirmed care staff have a flexible approach to care. One said, '*one day I didn't want the normal care, so they sat and talked to me for the time instead. They are good companions*.' People praise the quality of care, giving examples of how respectful the care staff are; *'He (care staff) shakes X's hand every time he is leaving, very respectful.'* People gave examples of personal progress since receiving the care, one person had not engaged at all socially and now enjoys a regular social life. Relatives described care as uplifting for the individual and a '*ten out of ten'* service they feel very lucky to have.

Care staff are trained in safeguarding processes and know what to do should they have any concerns about a person's wellbeing. There are policies all staff must familiarise themselves with, and regular one to one supervision meetings with management which allow for confidential conversation and a review of knowledge on the subject. The service's policies and records show new care staff only work alone with individuals following robust induction processes, which include shadowing of experienced staff until everyone is certain of the staff's competence and confidence. Care staff shared how they never feel under pressure to progress until they feel ready to and their competence has been assessed.

While most people have family to assist them with medication, staff are trained to administer this if needed. Risk assessments and established safe practices help ensure risk of errors are minimal. Records are kept of medications administered. Competency assessments and spot checks from management help ensure continued safe practice in this area. Personal protective equipment is used when providing personal care and staff are trained in its use.

Leadership & Management — Good

People are supported well to achieve their outcomes because the service provider has effective oversight of the business and does all they can to ensure people receive high quality care. The RI is also the manager and is in the office most days. They conduct initial assessments of people's needs, the subsequent care plans and reviews. The manager has a good relationship with local social and health care services and knows who to contact with specific concerns and issues. Although the RI is present daily, they complete formal reports every three months confirming results of audits and other checks and measures. A quality of care review is completed every six months that includes conclusions drawn from surveys completed by people using the service, family and staff. The RI knows what is working well and where improvements could be made.

People are supported by staff who have the knowledge and expertise required to carry out their role. Training records show a good range of training is mandatory for staff prior to working alone with people. One staff has specialised in dementia, updating their knowledge with delf directed study. All staff are thoroughly vetted prior to employment to ensure safe, effective recruitment. The manager inducts the staff carefully, with a hands-on approach while she teaches them exactly what and how the person's needs are to be met. Care staff have high regard for their manager, praising her knowledge, genuine compassion and care. They trust the manager completely, have faith in her knowledge and motives, and benefit from her constant availability and presence.

Staff commend the manager for her emotional intelligence and being a *'warm, maternal figure'*. While one to one supervision is provided every twelve weeks, staff also like that they can go to the office at any time for a chat. A lot of the staff have worked for the agency for years, fostering continuity of care for people using the service. Rota's are well planned so staff are never late and never miss a call. All staff shared they feel valued, supported and are treated with respect. They feel part of a family, and all get along well. People using the service also experience a sense of family as they know the care staff well and enjoy strong, trusting relations.

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

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