Arolygiaeth Gofal Cymru
Care Inspectorate Wales

# Inspection Report

## 1st Grade Care (Cardiff & Vale)

1st Grade Care Ltd, Unit 2 Charterhouse Links Business Park, Fortran Road, Cardiff, CF3 0LT

02922 520138

www.1stgradecare.co.uk

**The inspection visits for this service took place between 14/10/2026 and 28/10/2026**

## Service Information:

| | |
|---|---|
| Operated by: | 1st Grade Care Ltd |
| Care Type: | Domiciliary Support Service |
| Registered places: | 0 |
| Main language(s): | 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:

1st Grade Care is a domiciliary support service that provides care and support to people in their own homes, in Cardiff and Vale of Glamorgan area. The registered office is in Cardiff.

On this occasion we did not fully inspect the care and support and leadership and management themes. Ratings were informed by evidence gathered during this inspection and relevant findings from the previous inspection.

Well-being outcomes for individuals remain good, people spoke positively about the care provided, describing staff as kind, respectful and supportive, with many valuing the relationships they had developed with regular care staff. While some inconsistencies were identified, the provider recognised these issues and has taken appropriate action to improve people's experiences of care.

Care and support is rated good. People experienced positive, person-centred care, with the provider taking action to strengthen care planning. To better support individual preferences and improve outcomes for people receiving support.

Leadership and management is rated good. The provider demonstrates effective leadership, recognises areas for improvement and has taken appropriate action to strengthen service quality and oversight.

# Findings:

## Well-being — Good

Many people told us they are happy with the support they receive. People spoke positively about care staff, describing them as kind, respectful and supportive. People told us care staff treat them with dignity and respect and help them feel safe. Demonstrating that many people experience positive outcomes and have developed trusting relationships with staff.

People's wellbeing is promoted when care is provided at the right time and by staff who understand their needs and preferences. However, we found some people did not consistently experience this. People told us care staff were sometimes late and they were not always informed when delays occurred. Some people described feeling anxious or distressed whilst waiting for support, particularly when care related to continence needs, medication or mealtimes. Records reviewed showed late calls occurred regularly, including some calls where there was a specific time requirement. Whilst we saw evidence of people being contacted when delays occurred, feedback indicated this practice was not always consistent. The provider acknowledged the impact that late calls and inconsistent communication can have on people's wellbeing. As a result of this, additional monitoring and oversight arrangements to improve service reliability has been introduced.

People valued seeing familiar care staff and told us continuity of care helps them feel comfortable and confident in the support they receive. Some people reported less positive experiences when supported by unfamiliar staff who were not always aware of their preferences, routines and how they liked to receive support. We also found occasions where people's preferences regarding the gender of care staff could not be met. The provider recognises the impact this can have on people’s wellbeing and experience of care. The provider is introducing processes to ensure people’s preferences and support requirements are recorded, reviewed and communicated promptly.

Most people are satisfied with the service they received. However, a minority of people expressed dissatisfaction about how concerns had been managed and felt issues were not always resolved through the provider's own processes. The provider recognised these issues and has taken action to strengthen communication, handling concerns and workforce development, including introducing additional training for staff. These improvements demonstrate a commitment to enhancing people's experiences and outcomes.

## Care & Support — Good

We have not considered this theme in full at this inspection.

People receiving support generally described positive experiences of care and spoke warmly about regular care staff, who are familiar with their needs and preferences. Records reviewed demonstrated that personal plans were tailored to individuals' assessed needs and provided staff with guidance to support people safely and effectively.

Personal plans we reviewed did not always contain information to fully reflect people's life histories, preferences, routines, likes, dislikes and the things that were important to them. The provider recognised this area for development. Following inspection, we were provided with evidence of enhancements to care planning documentation through the introduction of a *"The Person Behind the Care – Getting to Know Me"* section. Further supporting staff in delivering care that reflects people's individual preferences and circumstances.

People's outcomes are enhanced when care and support arrangements reflect their choices and preferences. Feedback received during the inspection identified challenges in meeting some people's preferences regarding the gender of care staff, particularly where support with personal care was required. The provider explained that commissioning information does not always accurately identify these preferences prior to service commencement, resulting in difficulties once care packages are established.

The provider demonstrates an understanding of the impact this can have on people and discussed actions being taken to strengthen assessment and review processes. This includes ensuring discussions regarding staffing preferences take place at the outset of service delivery, helping to ensure care arrangements remain appropriate and people's expectations are clearly understood. Additional actions proposed by the provider will continue to improve the consistency of person-centred care planning, continuity of support and the extent to which individual preferences and choices are consistently achieved.

## Leadership & Management — Good

We have not considered this theme in full at this inspection.

The provider demonstrated a clear commitment to continuous improvement and was able to evidence a range of actions taken to strengthen governance, operational oversight and service delivery. The Responsible Individual (RI) described changes implemented since the last inspection, including increased senior staff capacity and revised regional working arrangements across Cardiff. Staff feedback indicated these developments were starting to have a positive impact on support, communication and daily oversight, with the potential to further improve call scheduling and the delivery of care.

Feedback from people receiving support, their representatives and information reviewed during the inspection indicated that concerns and complaints had not always been managed consistently or resolved in a timely manner. Some people described dissatisfaction with the responsiveness of the service and the effectiveness of actions taken following concerns raised. The provider is in the process of introducing the "*Help Us to Help Make It Right*" process to strengthen concern and complaint handling and improve communication with people receiving support and their representatives. The process sets out clear and realistic timescales for managing concerns and ensures these are communicated when issues are raised. This promotes greater openness and transparency, helps manage expectations and supports a more consistent approach to resolving concerns.

The RI identified opportunities to improve the consistency of staff responses when managing concerns and complaints, particularly in relation to providing honest communication and avoiding unrealistic expectations. Evidence was provided of ongoing investment in staff training and support, including the introduction of the *'Angry Wasp'* training programme, designed to enhance staff confidence and skills in responding effectively and constructively to concerns and complaints. In addition, the provider is developing bespoke training processes for both office-based and care staff to promote consistent practice and improve the overall quality of service delivery.

We found the provider is aware of the challenges facing the service and has taken steps to identify and address the root causes of concerns. The provider demonstrates a willingness to reflect on service performance and has invested in workforce development, training and quality assurance processes to support ongoing improvement.

# 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.**

***Welsh Government © Crown copyright 2026.***
*You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gov.uk*
*You must reproduce our material accurately and not use it in a misleading context.*