Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

PRIDE Health and Social Care Limited

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https://www.pridehealthcare.uk

The inspection visits for this service took place between 05/06/2026 and 09/06/2026

Service Information:

Operated by:	PRIDE Health and Social Care Limited
Care Type:	Domiciliary Support Service
Registered places:	0
Main language(s):	English
Promotion of Welsh language and culture:	The provider is not promoting the Welsh language and culture needs of people, and this requires improvement.

Ratings:

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

Summary:

This report is for the Cardiff & Vale and Cwm Taff areas, due to both supporting 20 or less people. The registered services in Gwent and West Glamorgan are currently dormant and not delivering care. The service offers a range of domiciliary services but predominantly support people living with complex health needs. The Responsible Individual (RI) is a Nurse and employs a team of nurses, as well as a manager to aid oversight. There are good systems in place and a team of staff who oversee these to ensure the smooth day-to-day running. The service has recently made changes within the management team and transitioned to new electronic systems.

People and their relatives are mostly happy. People are regularly involved in their care and reviews of their personal plan. Personal plans include a good level of detail, and the service is working on making these more person-centred. People are confident raising any concerns and care staff are appropriately recruited. People told us they see regular and consistent care staff who know their needs well.

People are treated with dignity and respect. The RI and manager regularly speak and gain feedback from people and their representatives aiding improvement. People enjoy what they want to do with support from staff. Outcomes are identified. The service is working on ensuring a positive attitude towards risk taking and empowering individuals to maintain their independence and respect their individual choices.

Findings:

Well-being — Good

People and their representatives are involved in any changes to their care and regular reviews of their personal plan. The RI regularly speaks and gains feedback from individuals, taking action to make improvements wherever possible. Everyone told us they know how to contact the service and felt confident raising any issues directly with them. One person said, *"Any issue I do have, they sort it out straight away."* We discussed with the service the need to review current contracts and agreements with people to ensure they have the correct arrangements in place and are aware of their terms and conditions. The RI assured us action would be taken.

People and their representatives told us they maintain good communication with their care staff and service provider. People told us they receive rotas, so are well informed on who is providing support. Consistent care staff know people well and understand their needs, communication is good and relatives told us people and care staff understand each other, using appropriate methods of communication. The service does not currently support anyone who speaks Welsh. The RI told us that a few care staff can speak Welsh and we discussed ways to promote the Welsh language and culture at the service.

People are supported with dignity and respect; staff offer everyday choices and respect these. The service is developing positive risk-taking approaches. This helps people make choices and maintain independence. People and their relatives told us how important it is to remain engaged in hobbies, the community and having a "*Variety of life*." People enjoy and engage in hobbies and interests. Some people enjoy spending time in their garden, going out for food, to see friends and going on holiday. People are supported to sustain positive relationships within their community and with those they live with. The service work extremely closely with the person and their representatives. Plans reflect who the person wants to be involved in their care and who can help them make decisions. The service is reviewing plans and information to ensure people's personal details regarding their capacity, decision making and legal representatives are current.

Care & Support — Good

Personal plans are in place; these outline what care and support the person requires. People and their representatives told us they regularly review these to ensure they are up-to-date and reflective. Some sections are extremely detailed providing clear guidance for care staff to help understand the person and their needs. One staff member told us plans are very complex, and this reflects the level of detail required. Plans include the person's medical history and specialist needs and equipment. Plans would benefit from including more person-centred detail, so care staff can understand more about the person and promote their independence to aid in achieving outcomes.

Relevant specialists are involved when required and we saw a range of contact details readily available for staff to use if needed. Health professionals are regularly involved in supporting to manage people's health needs. There is a high presence and involvement of professionals inclusive of internally employed nurses who maintain regular oversight, district nurses, commissioners and specialist nurses. Daily records are in place, and we discussed with the management team the need to ensure oversight of daily records to aid consistency and identify any improvements. Managers maintain oversight of an electronic system to ensure care is being delivered in a timely manner.

People feel safe at the service and are confident to share concerns. Care staff receive appropriate training to understand signs of abuse, and all receive the appropriate vetting checks to ensure they are safe to work with adults at risk. Care staff know how to report any issues to management and most understand where and how to share concerns externally. Systems are in place to maintain oversight of any ongoing complaints and concerns. Risk assessments and plans help identify and reduce areas of risk for people, inclusive of medication. The service is working on implementing improved, personalised risk assessments regarding high-risk health needs, to ensure care staff know the measures to reduce the risk. For example, tracheostomy care.

Medication management is good. The service uses an electronic system which helps reduce errors and limit risks of missed medication. Managers have oversight of this and are alerted to any missed care tasks including medication. Medication records we viewed are completed appropriately, we saw staff actively checking medication stock ensuring medication received is correct. Staff receive training and competencies to ensure they are skilled, and staff told us they feel confident in their role. A Medication policy is in place. The service is working on how to promote people's independence in relation to the control and use of their medication, promoting goals and self-administration.

Leadership & Management — Good

There are good arrangements in place which help maintain governance and oversight to ensure smooth operations. The manager works with a team of nurses and coordinators who help structure and manage the smooth day-to-day running. Most people told us they get along with the manager and RI well. The manager and RI maintain regular contact with people, seeking feedback to help drive improvement. A ‘quality lead’ manager is aiding in identifying improvements and overall compliance. We saw checks and audits are in place. The RI completes a quality of care review and this identifies the services strengths as well as areas of improvement. We discussed with the RI the need for this to be completed more regularly and utilise systems, data and service information to help identify patterns and trends which will aid in identifying improvement. Complaints, safeguarding concerns and notifications are internally logged, recorded and oversight is maintained.

We discussed the need for managers to understand the requirements to notify Care Inspectorate Wales (CIW) of significant events. The RI is providing weekly support and supervision. The RI is supporting the new manager and quality lead; we discussed the importance of ongoing supervision and support of management whilst they remain new to their roles. The new manager is registered with Social Care Wales (SCW), the workforce regulator and is working towards further development through educational courses.

The service is transitioning systems to a new training platform; this shows the majority of staff are up to date. People and relatives told us staff are skilled and competent. Most staff told us they feel well supported and trained. The service is working on accessing training which is more specific to individuals’ needs being supported. Most staff receive regular competency checks, and the service continues to work with nurses and specialists to ensure competencies are up to date.

Care staff receive supervision and their staff files are well organised. The service uses a specialist agency to support in managing the employment vetting of staff from overseas. Whilst most people receive consistent care staff, people and representatives told us this is challenging during times of sickness and/or annual leave. We saw there is ongoing recruitment in place, and the service provided assurance that they are reducing their agency usage and ensuring they have adequately skilled staff who are readily deployable. The RI told us about plans to ensure there are robust measures in place to aid during times of staff absence.

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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