Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Lougher Home Care Ltd

Flat 3 Bell House, The Square, Caldicot, NP26 3HY

01633881177

http://www.lougher.org

Date(s) of inspection visit(s): 27.08.2025

Service Information:

Operated by:	Lougher Home Care Ltd
Care Type:	Domiciliary Support Service
Registered places:	0
Main language(s):	English
Promotion of Welsh language and culture:	The service provider makes an effort to promote the use of the Welsh language and cultural needs of people, or is working a bi-lingual service.

Ratings:

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

Summary:

Lougher Home Care Ltd is a domiciliary care provider operating in Gwent. According to its Statement of Purpose (SoP), the service supports individuals with a range of needs, including personal care, physical health conditions, and mental health challenges. Specialist services such as stoma care and PEG care are also available.

During this inspection, we found that people experience excellent well-being outcomes because of the care and support they receive. People consistently describe care staff as kind, attentive, and respectful. Both people using the service and their relatives speak highly of the quality of care provided. The service provider places a strong emphasis on respecting people's choices and decision-making, tailoring support to meet individual needs. People told us they feel valued and respected by care staff, and wherever possible, they are supported by consistent staff members. Communication is clear, and staff offer reassurance when needed, which promotes independence and confidence.

Leadership and Management of the service is good. The provider regularly seeks feedback from people and their representatives to improve outcomes for people. This proactive approach contributes to the continuous enhancement of people's well-being. The manager and responsible individual (RI) have systems in place to maintain oversight of the service. Quality care review reports are completed by the RI. We found the analysis of the aggregated data on incidents, notifiable incidents, safeguarding matters, concerns and complaints from the manager require strengthening and we will review at the next inspection.

Findings:

Well-being — Excellent

People's well-being is excellent because they are supported by care staff in ways that promote their overall well-being and autonomy. Staff encourage individuals to maintain control over their lives and make informed choices about their care. Initial assessments are completed before support begins, allowing the provider to determine whether people's needs can be met. Following admission, personal plans are developed that reflect each person's preferences, routines, likes, and likes. Representatives are involved from the outset to ensure a collaborative approach. People are part of a strong and sustained culture of openness without judgement. People are empowered to make choices about their health and how it should be monitored and managed. This is strengthened by risk assessments in place.

Staff ensure that people are aware of their rights and entitlements. People told us they understand their rights, know how to raise concerns, and have access to advocacy support when needed. During the Inspection, people spoke about what matters to them, how they spend their time, and how they feel about the support they receive. There is a clear and outstanding commitment from management and care staff to listening attentively and providing comprehensive information in formats people can understand. This highly effective approach empowers people to take charge of their lives with confidence and assurance.

People we spoke with, including representatives, praised the provider. They told us that they are involved in decisions that affect them, and their views are respected and acted upon. Staff listen attentively to requests and support people in accessing community activities and groups that promote mental health and emotional wellbeing. We saw that care staff respond promptly and compassionately to changes in people's well-being. They also show excellent awareness of safety, carefully weighing risks to promote well-being for people when they are out in the community. Any changes in people's well-being are immediately reported to relevant professionals including health services.

Risks are clearly identified and managed within care plans, and care staff prioritise safety while promoting positive risk taking. Staff possess the necessary skills and understanding to consistently support people to make aspirational decision about their well-being. People have access to advocacy if required and representatives told us that they feel listened to and respected by care staff and other stakeholders.

Care & Support — Excellent

People receive excellent quality care and support that enables them to achieve their desired personal outcomes. People experience outstanding results due to the structured and extensive care provided, which fosters a sense of purpose and direction. People told us they feel treated equitably and with dignity and respect, which is reflected in their highly personalised care plans.

Personal plans are detailed and person-centred, clearly outlining what matters to each individual and what they want and need from the service. These plans incorporate information from the person, their representatives, and external professionals involved in their care. Plans are reviewed every three months to ensure they remain current and relevant. Staff also maintain daily records of the care and support delivered, and any changes in people's needs are updated in real time via a digital system that staff can access remotely.

People are safe and protected from abuse and neglect. They are supported by highly skilled and competent staff who help them achieve their outcomes using the least restrictive approaches. Risk assessments are carried out to identify any potential risks associated with people's goals and preferences. Where risks are identified, appropriate measures are implemented to minimise them. These assessments aim to balance safety with promoting independence. The service provider maintains strong links with local mental health, health, and social care services, which contributes to excellent outcomes for people.

Medication is managed safely. Staff reported that the digital system is efficient and has significantly reduced errors. When errors do occur, they are reported immediately to protect people from harm. Medication audits confirm that administration is safe and well managed. The provider works closely with external health professionals to ensure people receive the correct medication at the right time. While some people receive full support with their medication, others retain independence and self-administer with staff supervision.

Personal Protective Equipment (PPE) is readily available for staff and stored securely, including in a waterproof outdoor bin for easy access at any time. No concerns regarding infection control practices were identified during this inspection.

Leadership & Management — Good

Leadership and management of the service are effective. We rated it good. People are supported to achieve their personal outcomes due to the provider's governance, oversight, and organisational systems, which ensure smooth operations and high-quality care delivery. The manager is responsible for the day-to-day running of the service and maintains an open-door policy, enabling both staff and people to raise concerns freely and without hesitation.

RI reports are completed in accordance with regulatory guidelines and demonstrate that people, staff, and their representatives are regularly consulted and visited. While incidents are appropriately recorded and resolved within individual files, there is currently no system in place to analyse aggregated data relating to incidents, notifiable events, safeguarding matters, whistleblowing, concerns, and complaints. The provider has assured that work to address this gap has commenced and will be reviewed during the next inspection. The RI's quality report will be fully informed by this aggregated data once the system is implemented.

Most policies are regularly reviewed and are of a high standard, identifying areas of outstanding practice for staff to aspire to. Notably, the service has implemented a unique "No Reply Policy," which links to safeguarding protocols and the Herbert Protocol. This policy ensures that essential information including a photograph and medication details is readily available to police should a person go missing. This proactive and supportive measure is commendable and contributes positively to the overall quality of care and support, which has been rated as excellent.

Feedback from people and their representatives is overwhelmingly positive. The provider promotes a culture of reflective practice and continuous improvement, regularly sharing learning and improvement actions with staff. Staff are aware of their role in embedding these improvements and receive regular training in areas relevant to individuals' care needs and safety, including dementia care, continence care, food hygiene, and fire safety. Supervision is conducted quarterly, and appraisals are completed in line with organisational expectations.

Care staff report feeling well supported in their roles, which enhances their confidence and job satisfaction. The provider also offers personal support services such as access to counselling, physiotherapy, and chiropractic care. These initiatives have contributed to improved staff retention, although recruitment remains a sector-wide challenge. Staff receive supervision and appraisals timely and this fosters professional growth, ensuring accountability and maintaining safety and quality for people. People are supported by staff with expert skills, and qualifications to meet their needs The provider has a robust recruitment process in place, which includes employment history

checks, Disclosure and Barring Service (DBS) checks, and reference verification. Routine checks are conducted to ensure staff remain fit to work and are appropriately registered with Social Care Wales. However, the process for obtaining references from previous employers requires strengthening and will be reviewed at the next inspection.

The management team has expressed pride in delivering high-quality support to people in Gwent, reflecting a strong commitment to excellence in care.

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 2025.
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.