Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Radis Community Care (Gwent Region)

Radis Community Care, Raglan House 6-8, William Brown Close, Cwmbran, NP44 3AB

01633862478

www.radis.co.uk

The inspection visits for this service took place between 01/07/2026 and 07/07/2026

Service Information:

Operated by:	GP Homecare Limited
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	Excellent
Care & Support	Good
Leadership & Management	Good

Summary:

Radis Community Care Gwent Region provides care and support to people living in their own homes across the Gwent area. Well-being is rated excellent. People achieve highly positive outcomes because care staff know them well, promote their dignity and independence, and support them to make meaningful choices. People and relatives told us care staff are kind, friendly and supportive.

Care and support are rated good. People receive reliable, respectful and responsive care which reflects their needs, routines and preferences. Care staff support people at an unrushed pace, offer choices and respond appropriately when people's needs change.

Leadership and management are rated good. The provider has effective systems to monitor care quality and safety, support staff and drive improvement. An acting manager oversees the visiting care services, and the provider has support arrangements in place while they complete the required training and registration process.

Findings:

Well-being — Excellent

Well-being is rated excellent because, with few exceptions, people achieve highly positive outcomes. Care staff provide exceptionally person-centred support because they know people well, understand their preferences and promote their dignity, independence and rights. People and relatives spoke very positively about the care provided. People described care staff as *"Marvellous," "Good"* and *"Wonderful."* We were also told care staff are *"Very jolly and they make you laugh," "Very kind"* and *"Very chatty."* People value the warm and trusting relationships they have developed with care staff and feel confident receiving support from them. Personal plans and one-page profiles are highly personalised. They help care staff understand what matters to people, including routines, interests, preferred names, important relationships and what makes a good or difficult day. These records guide care staff to provide care that reflects people's individuality and promotes their well-being.

People have meaningful choice and control over their day-to-day lives. During care visits, care staff explained what they were doing, sought consent and offered choices about personal care, meals and routines. Care staff supported people at an unrushed pace and adapted their communication to meet people's needs. They asked people about food choices, personal care preferences and comfort during support. This helped people remain involved in decisions about their care. Care staff promoted independence by encouraging people to do what they could for themselves and by respecting their preferences.

Care staff recognise the importance of emotional well-being and social interaction. We saw care staff engage people in conversation, humour and companionship during visits. People told us having a laugh with care staff was important to them. Relatives told us these interactions bring enjoyment and confidence to their family members. One relative described care staff as friendly and down to earth and said they are *"always laughing"* with their loved one. Care staff knew people's personalities well and used this knowledge to provide reassurance, encouragement and companionship alongside practical care tasks. This helps care visits feel warm, personal and enabling.

Care staff work very well with relatives. One relative told us care staff helped them understand more about dementia and how to support their loved one. Relatives told us care staff listen, share information appropriately and work with families when concerns arise. This collaborative approach supports continuity of care and helps people and relatives feel confident, listened to and reassured. Care staff recognise and respond to changes in people's needs. We saw care staff identify and report concerns about people's health, mobility, personal care and environmental risks during visits. This supports people to remain safe and well in their own homes. Care staff understood their role in promoting people's safety, rights and well-being.

Care & Support — Good

Care and support are rated good because people receive reliable and respectful care which helps them achieve their personal outcomes. We read assessments, personal plans and reviews which showed care staff plan care with people and, where appropriate, their relatives. The provider develops strengths-based personal plans with people which help care staff understand people's needs, preferences, routines, risks and what matters to them. People and relatives described the care as responsive, reliable and tailored to their circumstances. We reviewed detailed personal plans which described people's life histories, interests, aspirations, communication needs, health conditions and preferred ways of receiving support. Team leaders and care coordinators review personal plans regularly with people and relatives, so information remains accurate and reflects changes in need. Records showed reviews took place at least every three months. Some reviews considered progress towards personal outcomes, although others focused more on the quality and consistency of support provided.

During observations, care staff supported people in line with their assessed needs and preferences. We observed warm, respectful and person-centred interactions. Care staff treated people with dignity, provided reassurance and supported people to remain involved in decisions about their care.

People receive support with medication from care staff who have completed training and competency checks. Managers complete regular audits of medication records to monitor practice and identify recording or administration issues. Care staff receive medication competency observations and practical supervision. When medication errors occurred, the provider supported staff through retraining, supervision and further competency checks before they resumed this responsibility. This promotes safer medication practice and supports people to receive medication as prescribed.

The provider works with healthcare professionals and other agencies to support people's well-being. Records showed care staff recognise changes in people's needs and presentation, share information appropriately and seek professional advice when concerns arise. The provider told us they have developed a good working relationship with St David's palliative care service. This helps people remain at home in line with their wishes.

Care staff understand their safeguarding responsibilities. They described how to recognise, report and respond to concerns and understood the importance of protecting people from harm while respecting their rights and independence. Records showed the provider responded appropriately to incidents and concerns, made relevant referrals and took action to reduce risks.

Leadership & Management — Good

Leadership and management are rated good because the provider has effective day-to-day management arrangements, positive staff support and systems which promote good quality care. Due to the size and breath of the service there several managers deployed across Gwent. The provider encourages progression and learning across all areas and are currently providing a secondment for an acting manager while the person undertakes the training and registration process. Managers complete regular audits of care records, medication administration records, staff files, supervision records, competency records, staff observations and spot checks. When managers identify issues, they take action through supervision, performance management, team discussions, retraining or further checks. This supports continuous improvement and helps people receive safe and consistent care. The provider recruits care staff safely and supports them through training, supervision and ongoing guidance. We reviewed eight personnel files and found most key recruitment and employment checks were in place, including proof of identity, Disclosure and Barring Service checks, employment references, character references, supervision records and appraisal records. This shows significant improvement. Staff told us managers support them, provide training and respond when they need advice or raise concerns. One staff member told us, *"I've always had support… if I've had any issues at work they are there for me and they always listen."* Another staff member said they would report concerns to the manager or team leader and felt confident they would act. This supports a positive culture where staff feel listened to, and people benefit from a supported workforce.

Managers organise care visits effectively. Care staff have enough time to provide care and travel between visits. We saw care staff complete support in an unrushed way and spend time talking with people. Care staff told us their regular care runs are well planned, and their work patterns are manageable. One staff member told us, *"We have plenty of time to do what we need to do."* Another said, *"They ask you if they want you to do anything extra, they don't just tell you they talk to you."* Records showed staff on non-guaranteed hours contracts are offered alternative contractual arrangements after successful completion of probation. The service has a positive culture where staff, people and relatives can raise issues. Managers described an open-door approach and told us they are available to people, relatives and staff. Senior staff described the team as working well together and said, *"We have an excellent team here; we work together across the four services."* Staff gave positive feedback about management support and said managers listen and act on concerns. This helps staff feel valued and supports more consistent care for people.

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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