Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

AKC Home Support Services

43 Conway Road, Colwyn Bay, LL29 7AA

01492534662

The inspection visit took place on 18/05/2026

Service Information:

Operated by:	AKC Home Support Services
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	Requires Improvement

Summary:

AKC Home Support Services provides domiciliary care and support to people living in their own homes, including services to carers to allow respite.

Well-being is good because people have choice and control about the way their support is delivered, they are supported to live healthily and safely and enjoy relationships and ongoing links with their community.

Care and support is good because people are treated with kindness and compassion. They feel listened to and feel quality support is delivered in a way that respects their preferences and allows them to enjoy their lives. Their independence is promoted, and care is delivered in such a way as to not take away people's skills.

Leadership and management require some improvement. Leadership visibility is inconsistent. Some staff and managers describe the Responsible Individual (RI) as approachable, supportive, and committed, while other staff and people using the service report little or no contact. People using the service do not see the RI. Their views are not directly sought. Staff views are not routinely sought to assess the quality of the service. The RI is considering arrangements to resolve this issue. Staff are safely recruited, supported by their line manager and trained to do their job well.

Findings:

Well-being — Good

People are supported to live their lives healthily and safely with choice and control over their lives. We saw care plans are detailed and show people's wishes and preferences. Mealtimes are according to people's wishes; one person prefers their dinner after their evening event rather than before they leave. Activities are person centred with some preferring to go to the zoo, other to the cinema, shopping or a local café. They enjoy self-directed hobbies such as drawing, learning to read, football, cooking and shopping. Carers in the community shared how they welcome the respite provided by this service so they can pursue their interests too.

Independence is promoted; a physiotherapist shared how staff have supported someone to regain their mobility following illness, taking time and encouragement to build the person's stamina, with short distances. We saw people are supported to manage their own money, carrying their own cash and pay for items independently. Care plans clearly state where individuals need support and what they can do for themselves, so skills are not taken away.

People are safe and protected from abuse and neglect because they know how to raise concerns if they have any. The care manager overseeing the team of support staff visits people frequently to ascertain their views on the service. Risk assessments and incident analysis are person centred with thorough consideration of the least intrusive risk prevention. An alternative system was provided to one person who did not like wearing the fall alert pendant on their neck. Case notes show involvement with health services and that appointments are made when health care is needed.

People shared they enjoy relationships with friends, family, partners and staff. They are supported to respect boundaries and respect others wishes when forming new relationships. People attend social and community activities such as music groups, cafes and work. One person has been supported to own a car. They shared how '*I get lots of support and have a good life. The best thing is staff are my friends. Nothing could be better.'*

Records show care staff support people to raise issues about their homes to the landlord or will advocate on their behalf. People in supported living are clear this is their home and that they are tenants. They enjoy privacy in their own rooms with lockable doors, although in an emergency, staff can use a key locked in a key safe. People have things that matter to them in their home, decorating their walls with self-drawn pictures and posters.

Care & Support — Good

People receive the quality of care and support they need to help them achieve their outcomes. Care plans are thorough, detailed and structured, with separate plans for each need such as communication, and eating and drinking. For people receiving less intensive support, care plans include 'how to help me achieve my outcome and risk barriers'. People having 24 hours support do not have the same plans. The manager is considering how care plans and reviews can be more aligned whatever service they are receiving, as all plans must be outcome focused. In some plans there are one-page profiles that provide care staff with a clear picture of people's likes and dislikes; what makes them happy and what causes them distress.

We saw evidence of people meeting their outcomes and making progress with their goals. The physiotherapist shared how care staff are excellent at getting in touch if they are uncertain about any aspect of their plan, and always carry out instructions left with them. They said they have never had any concerns about the care and praised care staff positive approach. People using the service described staff as kind, friendly, happy and helpful. The partner of one person receiving care liked how familiar care staff are with their partners needs and how professional they are in their work; *'They know what they are doing. All nice and trustworthy and will have a laugh, they are cheerful'.* A social worker shared how care staff will go above and beyond what would be expected of them*. 'They demonstrate kindness and ensure that the individual is provided with person centered care and support'.* Another visiting professional said, *'It is apparent that staff are very patient and try to understand the needs of the individual and (the person's) disabilities.'* We saw evidence of staff referring to occupational therapy for additional equipment for one person to enhance their quality of life.

There is safe and consistent medication management. The records we reviewed held no errors and evidence established checks and measures are in place ensuring correct balances of medication is always held. Daily handovers between care staff, at each staff change over, check the correct drugs have been administered and are properly logged.

Leadership & Management Requires Improvement

People are supported to achieve their outcomes because the service provider has established organisational arrangements, staffing systems, and quality assurance processes, although these are not consistently effective in all areas and require further strengthening.

The provider has some systems in place to monitor the quality of the service, including audits, spot checks, and satisfaction surveys. But these are not consistently applied. Some staff and managers describe the Responsible Individual (RI) as approachable, supportive, and committed, with examples of going above and beyond expectations. In contrast, other staff report little or no contact, a lack of response to communication, and minimal recognition of their work. Some people using the service do not recall engaging with the RI. Although quality of care reports are available, staff views are not routinely sought in their development. Outcomes for people require improvement because, in the absence of direct feedback from staff and people using the service, the provider cannot fully evaluate service quality and drive continuous improvement; we expect the provider to make improvements. The RI expressed a commitment to resolving this issue.

People are supported by staff who have been safely recruited and trained. The provider ensures safe recruitment practices, with all necessary checks are completed. Staff benefit from structured induction and mandatory training, and report they feel competent and able to request additional learning. Supervision and appraisal processes are in place and contribute to maintaining staff skills and confidence in their roles. Staff consistently describe line managers as approachable and supportive, highlighting positive working relationships and a culture where they feel able to seek guidance. All staff feel valued by their immediate line management, particularly where flexibility and personal support are offered.

Staff report having sufficient time to provide care in an unhurried way, supporting positive experiences for people. People and carers using the service report feeling valued and listened to and supported in their own time according to their own preferences.

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.

The table(s) below show the area(s) for priority action and/or those for improvement we have identified.

Summary of Areas for Improvement	Date identified
People cannot be certain the provider has sufficient oversight to ensure continued improvement of the service. The Responsible Individual (RI) does not visit or seek people's views directly, nor do they engage with staff. Improvements are required in governance, leadership visibility, and engaging with staff and people to ensure consistently high-quality care.	18/05/26

CIW has not issued any Priority action notices following this inspection.

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