



Arolygiaeth Gofal
Cymru
Care Inspectorate
Wales

Inspection Report

Mirus Supported Living and Community Support Services - Powys Region



Mirus Wales, Unit 5 Cleeve House, Lambourne Crescent, Cardiff, CF14 5GP



02920236216



www.mirus-wales.org.uk

The inspection visits for this service took place between 13/03/2026 and 17/03/2026

Service Information:

Operated by:	Mirus Wales
Care Type:	Domiciliary Support Service
Provision for:	Supported Living
Registered places:	0
Main language(s):	English
Promotion of Welsh language and culture:	The provider promotes, anticipates, identifies, and meets the Welsh language and culture needs of people.

Ratings:



Well-being

Excellent



Care & Support

Excellent



Leadership & Management

Excellent

Summary:

Mirus Supported Living and Community Support Services delivers personalised care and support to people within their own homes. While most people receiving support from Mirus live in supported living arrangements, the service also extends targeted home-care support to people residing independently or with their families.

People consistently achieve positive well-being outcomes. The service actively promotes choice, enabling people to take control of their lives and maximise their independence. People are supported to embrace new opportunities and to engage in activities of their choosing, at a time and in a manner that suits them.

People receive an excellent standard of person-centred care and support. Personal plans are highly detailed and clearly outline care and support needs, along with likes, dislikes, and personal preferences. Risk assessments are developed using a strengths-based approach, enabling people to safely engage in positive risk-taking that enhances their autonomy and quality of life.

Leadership and management arrangements are excellent. The service demonstrates strong governance and maintains robust quality assurance processes driving continuous improvement. It is well-led, fostering a positive organisational culture that prioritises the well-being of both the people and staff. There is a clear and sustained commitment to ensuring staff are well supported in their roles and equipped with the necessary knowledge, skills, and expertise to deliver high-quality care and support.

Findings:



Well-being

Excellent

People experience excellent well-being outcomes. They are supported to feel safe, valued, and actively involved in decisions about their care. Effective systems are in place to ensure people can make meaningful choices about their daily lives, including the activities they wish to participate in. We observed people have access to a wide and diverse range of opportunities, including leisure pursuits, volunteering roles, and paid employment. The service adopts approaches that empower people to choose activities that align with their interests and aspirations, promoting independence and respecting personal preferences. People's achievements are celebrated and documented in '*Positive Stories*', which capture the steps taken and progress made towards achieving their goals.

The service provides strong support for people's health needs. People have dedicated health files where all medical correspondence is securely stored, ensuring clear and accessible records. Medical contact sheets are used effectively to document appointments and any advice provided by healthcare professionals. Health profiles contain comprehensive information about each person's medical requirements and clearly outline the support needed should hospital treatment be required. These profiles promote effective communication between people and healthcare professionals. The service demonstrates excellence in supporting people with a diagnosis of autism. Care staff receive specialist training, and the organisation has achieved accreditation from the National Autistic Society. This accreditation reflects a commitment to delivering high-quality, person-centred care and highlights the service's capability in meeting the specific needs of people with an autism diagnosis.

There are effective systems in place to protect people from harm and abuse. The service operates in line with a safeguarding policy that is aligned with the Wales Safeguarding Procedures, and care staff receive appropriate safeguarding training. Staff members we spoke to demonstrate a clear understanding of their safeguarding responsibilities and the procedures for reporting any concerns. Safe recruitment practices are followed to ensure staff are suitable to work with adults at risk. Risks to people's health and safety are identified, assessed, and well managed, helping to maintain safety and promote people's overall well-being.

People are well supported with their communication needs. These needs are considered from the point of initial assessment to ensure the right support is in place from the outset. People who experience communication difficulties have communication passports that clearly outline the most effective methods of communication for them. The service also provides a written guide that contains practical and accessible information, produced in an easy-read format using bright, clear images to aid understanding. The service actively promotes the Welsh language, and we were informed that support can be provided in Welsh upon request, in line with the principles of the

Active Offer.



The standards of care and support provided are excellent. People receive care that is carefully planned, person-centred, and delivered to a consistently high standard. The service ensures people's individual needs are fully understood and met, promoting their well-being and enhancing their overall experience. Admissions are managed thoughtfully, with robust pre-placement assessments carried out to confirm the service is able to meet people's needs.

Personal plans are developed using a person-centred approach and include detailed information about how people prefer to be supported. The service promotes a culture of positive risk-taking, empowering people to exercise autonomy and make informed choices about their lives. Staff work collaboratively with people and their representatives to develop personal plans, ensuring that their preferences, aspirations, and views are fully reflected. Personal plans are regularly reviewed and updated in line with people's changing needs. Comprehensive reviews are undertaken every three months, considering not only care and support needs but also personal outcomes and the progress people wish to make. In addition, each person has an annual person-centred review, providing an opportunity to set new goals, reflect on achievements, and plan for the future.

People benefit from continuity of care due to the service's stable and skilled care staff team. Staff are experienced, familiar with the service, and demonstrate a strong understanding of people's needs, providing support that is both attentive and nurturing. During the inspection, we observed warm and positive interactions, with staff encouraging people to participate in meaningful activities that help build confidence and independence. Feedback from people using the service was consistently positive. One person told us, *"I get on great with the staff, they're all really good."* We also noted the use of staff-matching tools, which pair people with staff who share similar interests. This approach enhances the delivery of person-centred care and contributes to greater workforce stability and morale.

Robust systems are in place to ensure the safe and effective management of medication. Medication management is underpinned by a medication policy that reflects current best practice guidance. Care staff receive appropriate training in the safe handling and administration of medicines, ensuring they have the competence and confidence to fulfil their responsibilities. Individualised medication plans clearly outline how people take their medication. We observed that some people self-administer their medicines; where this occurs, comprehensive risk assessments and management plans are in place to support safe practice. Medication Administration Record (MAR) charts reviewed during the inspection were completed accurately, demonstrating people receive their medication as prescribed. In addition, routine medication audits are undertaken, enabling the service to promptly identify and address any discrepancies or emerging concerns.



Leadership and management at Mirus Powys are excellent. The service operates in accordance with its Statement of Purpose, which leadership reviews regularly to ensure it accurately reflects current service delivery. Governance and quality assurance arrangements are highly effective, with clear systems in place to monitor quality, drive organisational learning, and support continuous improvement.

The Responsible Individual (RI) maintains strong oversight of the service. Regular engagement with both staff and people using the service enables the RI to monitor performance and evaluate the quality of care provided. Managers utilise comprehensive auditing systems that help identify and address any shortfalls promptly. Every six months, the service undertakes a quality-of-care review to assess performance. These reviews evaluate strengths, identify areas for improvement, and analyse significant events, including safeguarding matters, compliments, complaints, and other key performance indicators. The service hosts regular events to gather meaningful feedback from people, families, and staff. 'Better Together' events bring these groups together to discuss what is working well, what could be improved, and what priorities should be taken forward. These sessions promote open communication, shared learning, and collaborative decision-making, ensuring that people's voices remain central to service development.

The service has a robust recruitment process that ensures care staff possess the skills, knowledge, and competence required to deliver high-quality care. We saw evidence that all necessary pre-employment checks are completed, including Disclosure and Barring Service (DBS) checks and the collection of references from previous employers. People are actively involved in the recruitment process, including participating on interview panels, which empowers them to influence who provides their care and support. New staff receive a structured induction that includes training relevant to the needs of the people they will be supporting, as well as opportunities to shadow experienced team members. All new employees are required to complete a probationary period during which their competence, performance, and suitability for the role are assessed.

Care staff consistently describe a culture of strong, visible leadership and practical support. One staff member told us, *"There is really good support from the management. I get the feeling that I matter, they care about what I think."* Regular team meetings are purposeful, and minutes demonstrate meaningful discussion about operational matters and people's well-being. Supervision and appraisal are provided in line with regulatory requirements and focus on both professional development and staff well-being. We also saw evidence that the service provider celebrates staff achievements, recognising those who deliver outstanding care and support. Each year, the provider hosts an awards ceremony, Mirus Stars, where both people using the service and staff are presented with awards that acknowledge exceptional accomplishments throughout the year.

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.

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

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