Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Care Cymru Newport

Cymru Care, 32 Bridge Street, Newport, NP20 4BH

01633 263166

The inspection visits for this service took place between 12/03/2026 and 18/03/2026

Service Information:

Operated by:	Care Cymru Services Ltd
Care Type:	Domiciliary Support Service
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	Good
Care & Support	Good
Leadership & Management	Good

Summary:

Care Cymru Newport is a domiciliary support service that provides care and support to people in their own homes, in the Gwent area. The registered office is in Newport.

The service is rated good for both well-being and, care and support. Personal plans are individualised, clearly setting out people's preferences and the ways they wish to be supported. These plans are reviewed regularly and involve individuals and those important to them, ensuring support remains responsive and person-centred. People receiving a service and their representatives provide positive feedback about the quality of care they receive.

The leadership and management of the service is also rated good. Governance systems are firmly established and support the day-to-day running of the service. Leaders maintain good oversight of practice and are committed to continuous improvement, ensuring the service consistently delivers good-quality care and promotes positive well-being outcomes for the people who use it.

Findings:

Well-being — Good

The service encourages people to have as much choice and control as possible over their everyday lives and the care and support they receive. People's personal plans contain their voice, their life history, as well as the things that are important to them. Individual needs are assessed and care visit times are agreed before they receive support to ensure the service is suitable for them. People are encouraged to share their views about the service they receive. Documentation such as a Statement of Purpose (SoP) and written guide are available and inform people about the services provided and how to raise a complaint. The management team responds to complaints following the provider's policies and procedures. Feedback from people and their representatives suggests care staff treat them with respect and ensure they are listened to and offered daily choices.

People receive the support they need to maintain their health and well-being. People usually receive support from regular and familiar care staff, which supports positive relationships between them. This also helps care staff to recognise changes to people's usual presentation promoting their health and well-being. Referrals are made to external agencies when required. People consistently receive their prescribed medicines. Care staff receive medication training and competency checks are carried out. The training programme includes bespoke training to meet individual health needs. This gives care staff better insight into specific conditions and improves their approach to care.

There are systems in place to help protect people from harm. Care staff are recruited in line with regulations to ensure they are suitable to work with vulnerable people. The service completes risk assessments and personal plans which outline how care staff can manage risks to people's safety and well-being. Risk assessments are completed for care staff, ensuring their safety as they go about their work. Care staff are also guided by clear policies and procedures. People know how to report concerns and give feedback. Care staff complete safeguarding training. Care staff have access to sufficient personal protective equipment to minimise the risk of infection. Care staff know how to report concerns and are confident they would be dealt with.

The service celebrates and embraces Welsh language and culture. A Welsh language policy is in place. Documentation is also available in Welsh on request. While no one currently requests documentation or support in Welsh, this could be facilitated if needed.

Care & Support — Good

People we spoke with are positive about the care provided and complimentary about care staff. We were told, *"staff are great, good as gold*" and "*happy with the service*".

The service carries out assessments of each person's individual needs to determine its ability to meet these before agreeing to provide support. Personal plans are developed for everyone receiving a service and include clear information about preferred routines, required care tasks for each visit, and any specific support instructions. Personal plans are created using a person-centred approach and incorporate details such as personal history, preferences, likes and dislikes, and individual wishes, ensuring the person's voice remains central to the care provided.

Risk assessments identify any vulnerabilities and set out appropriate measures to promote the person's safety. Personal plans are reviewed regularly to ensure they remain current, and evidence demonstrates that individuals are involved in review meetings. Care staff access up-to-date information through an electronic application on their mobile devices. Each care call includes a list of required tasks, which staff record as completed, along with a summary of the visit.

The provider is in the process of introducing a measured outcomes tool which will enable people to track their progress in independence, well-being and confidence. The outcomes tool will provide an opportunity for people to identify what matters to them and what support they might need to achieve their individual goals and aspirations.

There are appropriate systems in place to oversee and monitor medication administration. Care staff receive training and their competencies to administer medication are assessed regularly. Personal plans clearly document the extent to which individuals need support with medication administration and give information on the way people prefer to have their medication administered. The electronic care documentation system has an alert system which informs senior staff when medication is late or not administered. This is followed up and resolved in a timely manner.

Staff rotas allow travel time for staff between calls. A call monitoring system requires staff to log in when they start and finish each visit. A review and analysis of the time care staff arrive at their calls, and the length of the call are undertaken by management of the service. These have identified care calls are not always happening as planned and staff not always staying for the allocated time. Our review of the electronic call monitoring system also identified the same issues. We spoke with people receiving a service and their representatives who also confirmed this. To better support positive outcomes, the service must improve the timeliness and duration of care calls to ensure they are undertaken as commissioned and as people anticipate.

Leadership & Management — Good

Leadership and management is effective and focused on ensuring people experience good well-being outcomes. Governance arrangements support the day-to-day operation of the service to ensure continued good quality care and support. The Statement of Purpose (SoP) and guide to services state what people can expect, and the service reflects the contents. The Responsible Individual (RI) maintains meaningful oversight of the service and is committed to continuous improvement in quality assurance, governance, and auditing. They visit the service regularly to speak with people and the staff who support them to gain feedback about service delivery. Quality of care reviews are completed every six months and identify what is working well and where further improvements can be made.

The service manager has daily oversight of service delivery, is experienced and suitably qualified for the role. The manager is supported by a team of care co-ordinators and team leaders. The management team nurture and develop care staff to ensure they can deliver a good standard of care and support. Audits are routinely completed by the operational management team and branch audits are carried out by the RI and the wider provider to ensure a good standard of care and support is delivered. Service policies and procedures provide guidance to staff and ensure practice remains safe and effective.

The service provider has robust selection and vetting processes for hiring staff to ensure all staff are suitable and trustworthy. All staff must provide appropriate identification documents as well as complete a Disclosure and Barring Service (DBS) check, provide satisfactory references and full employment history. New staff complete an induction to support them into their caring role. This includes completing mandatory training to ensure care staff have the required knowledge and skills to support people at the service.

Staff have regular one-to-one supervision sessions with their line manager on a regular basis alongside an annual appraisal to receive feedback about their work performance. Training records show most staff have completed core and refresher training in a timely manner that is relevant to the needs of the people they support. Eligible care staff are registered with Social Care Wales, the workforce regulator, demonstrating their suitability for practice. Staff meetings are held on a regular basis to keep staff up to date with service arrangements and any changes being introduced. Care staff told us they are happy in their roles and feel supported by management.

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
Care calls are often cut short and are not being provided at the times agreed and written in people's care plans.	20/07/23

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

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