Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Perfect Pal Healthcare

Perfect Pal Healthcare Ltd, Unit 1, Columbus Walk Brigantine Place, Cardiff, CF10 4BY

02922216271

https://www.perfectpal.co.uk/

Date(s) of inspection visit(s): 11/08/2025, 13/08/2025

Service Information:

Operated by:	Perfect Pal Healthcare Ltd
Care Type:	Domiciliary Support Service
Registered places:	0
Main language(s):	English
Promotion of Welsh language and culture:	The service provider is not meeting the Welsh language and culture needs of people and this requires improvement.

Ratings:

Well-being	Good
Care & Support	Good
Leadership & Management	Requires Improvement

Summary:

Perfect Pal Healthcare Ltd provides care and support to people in their own homes in Cardiff.

'Well-being' is rated as 'good' as people mostly have continuity of care and support, building positive working relationships with their care workers. Many people feel safe and valued and are helped to achieve good outcomes.

'Care and support' is rated as 'good,' as people, on the whole, receive a service which helps them stay as safe and healthy as possible. Some documentation around care needs to improve but there is little impact as care workers know people well and follow good practices.

'Leadership and management' is rated as 'requires improvement' as the provider is not effectively monitoring the service. While systems are in place, and routine tasks are completed, there is a focus on quantity, not quality. This is preventing identification of some issues, so people's experience of the service is not as good as it could be.

Findings:

Well-being — Good

The service supports people to live as healthily and as happily as they can. People are helped to manage any health issues, involving health professionals when required. Care workers respond quickly and give assurances to people and their families around the steps taken to contact health professionals. There are pockets of excellence where the service supports people to access assessments around their mobility needs. This prevents any delay in providing the service unless specialist occupational therapist assessments are required. Care workers take the time to explain the reasons for using specific mobility equipment and give reassurance to people as this is being used. People's skin integrity is maintained through good repositioning and observation. Care workers promote good hydration and nutrition. One person told us "*They're really good,"* and, *"They're very patient."* One family member told us, "*They're just fantastic."* People are treated with the utmost respect and form warm relationships with their care workers. One family member told us "*They chat to them and make them laugh*," and showed appreciation of the care workers who are kind and considerate in the delivery of the service.

Care workers enable people to have choice, encourage independence and help them do things that matter to them. We saw people doing things they enjoy with care workers supporting this. Good communication techniques are used when supporting people who may be overwhelmed with verbal descriptions or too many choices. One person told us how they "*Like having a cup of tea and a chat with the carers,"* and look forward to their visits. Some people are supported to go into the community if part of their agreed care and support.

People are mostly protected from risks of harm and abuse. The provider addresses issues which could impact people when these are brought to their attention, such as late calls. They actively listen to people and try to resolve any issues. One exceptional example was the manager arranging transport for a person who needed admission to hospital for an operation when ambulance services were not available. There are systems within the service to manage all aspects of daily operation, indicating the service is being run smoothly. The oversight of the service requires improvement as this is not fully picking up areas where the service is not as good as it should be, mainly due to lack of depth of information in records. Though there is a risk this could impact people, there are no current safeguarding incidents. The provider has started to consider the quality of documentation, call delivery times, and introduction of additional training to support the needs of people.

Care & Support — Good

People mostly receive consistently good care as regular care workers know people well. People tell us they have "*lovely*" care workers who do everything they need them to. We saw care workers providing kind care, ensuring people's needs are met while maintaining their privacy. People are given choices and encouraged to maintain their independence. Some people have good outcomes, such as improved mobility and skin integrity. Care workers escalate any concerns so the service can involve relevant professionals, such as district nurses. Care workers help protect people from harm, following good practices around infection control, and understand how to raise concerns if people may be at risk of abuse.

The service is reliable, and improvements are being made around timings. We found people always receive their care and support. Some people's experiences include calls which are too early or too late. The service monitors this and has resolved the majority of issues but is now considering how communication around this can be more effective and incidents minimised. Some people request call times to be moved, for example, for appointments, and the service accommodates this where possible.

The provider has systems in place to support the development and review of personal plans but these needs strengthening. People are consulted about their care and support needs as part of assessments. The service develops basic plans to guide care workers on what to do. These contain mostly generic statements and lack information around what the person can do for themselves. The service is completing a full review of personal plans over the next month in a response to people's preferences to have paper copies as opposed to electronic versions. This is giving the service the opportunity to ensure there is depth of information available to guide care workers within the plans and make them more person centred. Personal plans are regularly reviewed with the person or their family member. These lack the depth of consultation required to be effective and are more a quality assurance tool to help the provider know how satisfied the person is with the service. We have considered the impact on people of the improvements required around care planning documentation and though improvement is required, people's outcomes remain good. We highlighted this as an area for improvement which will be tested at the next inspection.

Leadership & Management Requires Improvement

The service provider is also the responsible individual (RI) and manager of the service. They understand and carry out oversight tasks, in addition to operational management of the service. Documentation is in place to support the service, including policies which are kept up to date and a 'statement of purpose' to let people know what to expect from the service. We are told documentation can be made available in Welsh if requested. The RI considers information available to them and summarises this in required reports. There has been improvement in the content of the reporting but this needs to be developed further. Auditing systems identify gaps in tasks which are addressed, but the quality of the task is not always considered. We found records lack depth, including supervision meetings of care workers, and personal plan reviews and assessments. Systems are effective in tracking the completion of training by care workers but have not identified where additional training is required to support the needs of people. The service has, at times, moved people's call times without reasonable cause. Travel time for calls which are considered geographically close together is not being built into schedules, this is impacting on call times and duration of calls. The provider has started to address some issues. There continues to be a risk that people may not experience the best possible service, so we expect the provider to make improvements. This will be tested at the next inspection.

Systems of recruitment are strong, and staff mostly receive the right development to support people's positive outcomes. Personnel files contain relevant information including pre-employment checks to ensure care workers are fit to work with people. Other checks such as vehicle driving licences and motor testing certificates support robust checks to manage people's health and safety. Induction and shadowing opportunities help care workers through face-to-face training and introduction to people and their needs. Care workers receive ongoing training through online learning and are encouraged to undertake a qualification in care and support. Care workers are registered with Social Care Wales, the social care workforce regulator. The service has its own trainers for some subjects, such as moving and handling, and there is a trained moving and handling risk assessor to support with consideration of appropriate equipment and techniques. The provider is starting to consider and introduce new training to support the needs of people they care for.

Care workers and the wider staff team feel exceptionally well supported, which contributes to people's well-being outcomes. Care workers and other staff members tell us they have worked for the service for many years and appreciate the support they receive. Examples of support include the provider paying for the professional registration fees of care workers. The service has won awards several years in a row due to the commendations from the staff team. Out of hours support is available to care workers during their working day, and they tell us it is easy to get hold of

someone for advice. Care workers confirm they have regular spot checks and supervisions while working in the community. While not all care workers have contracts for regular hours, those we spoke with did not find this an issue and liked the flexibility in working arrangements. The provider considers ‘lone working,’ and risk assesses this to help minimise potential issues for care workers.

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 may be at risk of poor outcomes as the service provider is not conducting effective re-assessment of people's care and support to ensure detailed and accurate information is captured in personal plans.	11/08/25
People may be at risk of receiving a poor quality service. Though the provider has systems in place to monitor and audit the service, these are not effective and are not always fully identifying where there is a lack of detail and depth to the information recorded.	11/08/25

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

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