Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Lotus Care and Support Services

Hazel Suite, Caerleon House, Mamhilad Park Estate, Pontypool, NP4 0XX

07955447259

https://lotuscareandsupport.webador.co.uk/

The inspection visit took place on 30/09/2025

Service Information:

Operated by:	Lotus Care and Support Services Limited
Care Type:	Domiciliary Support Service
Registered places:	0
Main language(s):	English
Promotion of Welsh language and culture:	The service 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	Good

Summary:

Lotus Care and Support Services Limited is a domiciliary company that is situated in the outskirts of Torfaen. They provide services within Torfaen mainly but occasionally Newport and Monmouthshire. The Service provide care and support to the elderly and/or vulnerable adults in their homes.

At this inspection we found people's well-being is good, based on what people and their relatives told us and based on the files we reviewed. Staff spoke positively about people they support. People and their representatives told us that they are treated with dignity and respect and their voice and wishes and feelings are respected. People's represtantives told us that people are supported with their physical health and emotional well-being. The care and support people receive is good. Care plans and written notes indicate that care is provided with kindness, attentiveness, and responsiveness to people's needs, offering reassurance where appropriate. Personal plans are in place providing guidance for care staff to follow. There are systems in place to identify and mitigate risks to people's health and safety.

The leadership and management of the service is good. The responsible individual (RI) has good oversight of the service and identifies improvements to service delivery. Policies are in place and are reviewed to ensure that they are up to date and people are kept safe. Overall, all themes have been rated good and all areas identified for improvement during the previous inspection have been addressed.

Findings:

Well-being — Good

People are supported to live healthily and safely, with their views and preferences respected. They told us they are treated with dignity and have as much control as possible over their daily lives. Choices are honoured and balanced with appropriate risk management. Positive practice is evident through active listening, and we observed that people are consistently heard. Representatives confirmed their involvement in care planning and decision-making. Safety is prioritised, and potential risks are proactively managed.

People are supported to remain in their own homes, with systems in place to identify and mitigate health and safety risks. These risks are clearly documented in care plans, and care staff promote positive risk-taking while maintaining safety. The provider actively seeks feedback to improve the service, with questionnaires showing mostly positive responses. Staff are highly qualified and skilled, and they clearly understand how to support independence People spoke highly of the support they receive from both care staff and the management team. Staff know individuals well, which contributes to consistency and quality of care. People are in control of their finances and where necessary, staff offer support, and this is detailed within their care plans.

Access to healthcare services is facilitated when needed, supporting both emotional and physical wellbeing. Health professionals are consulted, and appointments are attended with support at times. These interactions are documented in care plans and reviewed as required. Emotional and mental health needs, including stress and anxiety management, are also addressed. Safeguarding people from abuse and neglect is a priority. Staff are trained to identify abuse and are aware of the process to report abuse. Policies are in place to support staff identify and report abuse.

The Responsible Individual (RI) maintains oversight of the service and told us that she is committed to continuous improvement in quality assurance, governance, and auditing. Quarterly reports are completed. RI reflects on service quality and has assured inspectors of their dedication to achieving excellence at the next inspection.

Care & Support — Good

People receive the care and support they need to achieve their personal well-being outcomes. The care provided by Lotus Care is consistently person-centred and responsive to individual needs. Feedback from individuals and their representatives is positive, with many expressing satisfaction with the quality of service. Prior to admission, personalised assessments are conducted to identify individual needs and desired outcomes. These assessments are strength-based and clearly outline how staff should support each person to achieve their goals. Personal plans consistently reflect individuals' preferences, including likes, dislikes, and daily routines. Care staff reliably follow these plans when delivering support, ensuring continuity and consistency in care. Plans are reviewed quarterly, with active involvement and consultation with people and/or their representatives. Updates are made promptly to reflect any changes in needs or preferences.
People are supported to access medical advice in a timely manner, and representatives confirmed that staff assist individuals in arranging and attending appointments with doctors or nurses when needed.

People are protected from harm and abuse through robust safeguarding practices. Records confirm that all safeguarding concerns are investigated, with outcomes documented both in individual care plans and in a separate, easily accessible safeguarding file. RI/manager's auditing systems contribute directly to the quality-of-care report, ensuring oversight and accountability. Staff receive regular training relevant to both care delivery and safety protocols. Personal protective equipment (PPE) is readily available, and individuals reported that staff consistently use PPE appropriately. Risk assessments are in place to identify and mitigate health-related risks, helping to prevent potential harm. Infection prevention and control measures are effective, and the service demonstrates a commitment to transparency by learning from previous incidents, including those related to infection control. All care staff are registered with Social Care Wales in accordance with regulatory requirements. Staff demonstrate a clear understanding of safeguarding procedures, contributing to a safe and secure service for people.

Medication is administered safely and in line with clear, established policies. Regular audits are conducted to identify and resolve any discrepancies promptly. The provider works effectively with local pharmacies and individuals' GPs to ensure medication needs are met. People are cared for by a sufficient number of kind, patient, and competent staff who know them well and maintain positive relationships. People expressed satisfaction with the current stable staff team, noting that continuity of care has been beneficial. Staff are highly skilled and consistently work in the least restrictive ways to support people in achieving their personal outcomes.

Leadership & Management — Good

People are supported to achieve their outcomes because the service provider has good governance, oversight, and organisational systems in place to ensure smooth operations and high-quality care. RI and management team oversee the day-to-day running of the service, they have an open-door policy and people feel they can raise issues if they have any. A range of effective tools and audits are proactively used to identify areas of risk and/or improvement. The provider is aware that continuous analysis of information needs to be conducted to identify patterns and trends and improve people's well-being and overall experience. The RI maintains regular oversight, they have quality monitoring systems in place, including regular audits and feedback from people using the service, their relatives, and staff. These are carried out at the required frequency, and the necessary reports are completed. The service provider liaises with and/or notifies the relevant authorities in the event of significant issues or incidents. This helps ensure that appropriate actions are taken promptly to safeguard people and maintain the quality of care.

Representatives of people using the service expressed confidence in the leadership, noting that the service promotes a positive, inclusive, and respectful culture. Quality monitoring systems are in place, including routine audits of people's care and support. These are informed by regular visits from the RI, who engages with people, their families, staff and visiting professionals. Information gathered is used to inform service improvements.

Recruitment, induction, training, and support systems are well established and contribute positively to improve people's quality of life. Staff receive regular supervision, and annual appraisals are scheduled. Management team told us that the team receives strong support from the RI. Staff training is monitored by leadership in the service. Gaps in skill mix or lapsed training is identified and addressed in a timely way to ensure people are well cared for.

The Statement of Purpose accurately reflects the aims and scope of the service. Monitoring systems are used to drive ongoing improvements and ensure compliance with relevant standards and legislation.

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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