Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Moderncare

Moderncare, Unit 11a Llandarcy House, D'arcy Business Park, Neath, SA10 6EJ

01792818345

The inspection visits for this service took place between 13/07/2026 and 16/07/2026

Service Information:

Operated by:	Moderncare
Care Type:	Domiciliary Support Service
Provision for:	Supported Living
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	Good

Summary:

Moderncare is registered to provide a domiciliary support service across the West Glamorgan regional partnership area. The service is based in Neath and provides a range of support to adults living in their own homes, including personal care, domiciliary support, live-in care and companionship services.

People reported feeling safe, respected and well supported to maintain their independence at home. Feedback from people, relatives and professionals was consistently positive, highlighting caring staff, respect for dignity and choice, and strong, trusting relationships. Overall, we found the service provider delivered a good quality service across all three inspection themes. Care is person-centred, with comprehensive assessments, care plans, risk management and regular reviews. People's outcomes were clearly identified and monitored. Medication management and infection control arrangements were effective, with evidence of improved medication governance. A small number of comments highlighted changing staff and occasional delays to visits.

Management provide effective oversight through audits, supervision, quality assurance processes and Responsible Individual involvement. Staff described feeling valued and supported, and stakeholders expressed high confidence in the service. Improvements were evident in medication governance and workforce development. Opportunities remain to strengthen quality assurance arrangements, performance monitoring and governance documentation. The service demonstrates good outcomes for people through safe, responsive and person-centred care. Strengths include positive stakeholder feedback, effective safeguarding, strong leadership and a commitment to continuous improvement. Areas for development relate to continuity of care and strengthening quality assurance systems.

Findings:

Well-being — Good

People experience positive outcomes and are supported to remain independent, active and involved in decisions about their lives. Feedback from people, relatives and professionals was overwhelmingly positive, with people describing staff as caring, respectful and responsive to their individual needs. One person told us the service had "*enriched my life*" and enabled them to remain active within their community. Feedback consistently demonstrated that people valued the relationships they had developed with staff and felt confident in the support they received.

Records and discussions demonstrated that people are involved in planning their support and have opportunities to express their views, wishes and preferences. People told us they feel safe, listened to and treated with dignity and respect. Relatives spoke positively about the impact the service has on people's quality of life, wellbeing and ability to remain living in their own homes. People were supported to maintain routines, make choices about their daily lives and access activities and community connections that were important to them.

People benefit from support that promotes choice, independence and continuity of care wherever possible. Staff knew people well and demonstrated an understanding of their preferences, communication needs, routines and desired outcomes. Records evidenced regular review of outcomes and responsive adjustments to support arrangements where needs changed. Professional feedback highlighted the provider's role in helping people maintain independence, reduce social isolation and remain safely within their own homes.

There were a small number of comments regarding changes in regular care staff and occasional delays to some visits. While these concerns had not significantly affected outcomes, maintaining consistency of care remains an area for ongoing attention.

Overall, evidence demonstrated that people experience positive wellbeing outcomes, feel safe, respected and valued, and receive support that enables them to exercise choice and control whilst remaining as independent as possible.

Care & Support — Good

People receive personalised care and support that is responsive to their individual needs, preferences and desired outcomes. Case tracking demonstrated comprehensive assessments, detailed person-centred care plans, risk assessments and regular reviews, ensuring care remained appropriate as needs changed. Records showed people were involved in planning their support, with outcomes clearly identified and monitored. Evidence demonstrated timely referrals to health and social care professionals where required, supporting coordinated care and positive outcomes.

Feedback from people, relatives and professionals provided strong assurance regarding the quality of care delivered. People consistently described staff as caring, respectful and reliable, and reported feeling safe and valued. Relatives told us staff knew people well, respected their wishes and promoted independence wherever possible. Professionals also highlighted the provider's ability to respond to changing needs and support people to remain safely within their own homes.

Systems were in place to safeguard people from abuse and neglect. Staff had access to safeguarding policies, training and whistleblowing procedures, and records demonstrated appropriate management and oversight of concerns. Complaints reviewed showed concerns were investigated appropriately, learning was identified and actions implemented to improve outcomes.

Medication administration was safe and effective. Monthly audits identified documentation issues rather than unsafe practice. The provider demonstrated strengthened medication governance through trend analysis, targeted supervision and competency assessments. Audit findings evidenced continued improvement and provided assurance that medicines were managed safely.

The service also demonstrated effective infection prevention and control arrangements. Staff used appropriate PPE, followed Public Health Wales guidance and implemented safe working practices to minimise infection risks.

The inspection identified some minor concerns regarding continuity and timing of visits, with a small number of people and relatives reporting changes in regular care staff and occasional delays to morning calls. Whilst these issues had not significantly affected outcomes, they highlight the importance of ongoing review of scheduling arrangements and continuity of care. Overall, evidence demonstrated that people receive safe, effective and person-centred care that supports positive outcomes and promotes independence and wellbeing.

Leadership & Management — Good

The management team provide clear oversight of the service and work collaboratively to support positive outcomes for people receiving care. The Responsible Individual and Registered Manager maintain regular oversight through audits, care plan reviews, spot checks, supervision, incident monitoring and quality assurance processes. Staff described feeling valued, supported and well developed, with positive feedback regarding leadership, training opportunities and workplace culture. Stakeholder feedback consistently highlighted compassionate, reliable care, effective communication and strong confidence in the service.

Governance arrangements were effective and supported the delivery of safe, person-centred care. Leaders demonstrated appropriate responses to concerns, safeguarding matters and complaints, with evidence of investigation, learning and actions taken to improve outcomes for people. Recruitment, supervision and appraisal systems were established and staff files reviewed demonstrated regular supervision and performance oversight. However, some recruitment records required additional documentation at the point of audit, indicating a need for stronger quality control arrangements.

The service has a comprehensive quality assurance framework incorporating audits, safeguarding oversight, medication monitoring, staff supervision, training compliance and Responsible Individual visits. Evidence demonstrated that audit findings were used to identify trends and target improvement activity. Medication governance had strengthened significantly, with improved trend analysis and targeted interventions for staff. However, quality assurance arrangements would benefit from more measurable performance indicators, clearer audit frequencies, action tracking and stronger evaluation of outcomes for people.

People were supported by a stable workforce with appropriate recruitment, induction, supervision and appraisal processes. Training compliance was good, and staff received ongoing learning and development opportunities. Staff feedback reflected a positive culture, supportive management and confidence in leadership. Systems were in place to ensure care visits were planned with sufficient time and continuity wherever possible. A small number of stakeholders reported concerns regarding the timeliness of some visits. Leaders should continue to monitor scheduling arrangements to ensure services remain responsive and reliable.

Overall, leadership and management arrangements provide assurance that people receive safe and effective care. We saw clear evidence of learning and improvement, particularly in medication governance and quality monitoring, the provider will further develop their quality assurance systems to strengthen oversight and demonstrate impact more effectively.

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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