Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Castlecare Supported Living Limited

22 Market Street, Dowlais, Merthyr Tydfil, CF48 3HL

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castlecare.org

The inspection visit took place on 12/11/2025

Service Information:

Operated by:	CASTLECARE SUPPORTED LIVING LIMITED
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:

Castlecare Supported Living provide domiciliary care and support to a small number of people living in the Gwent regional partnership area. This mostly consists of support with activities of daily living.

People who receive care and support from Castlecare experience good wellbeing outcomes. This is because they are visited by a small, consistent team of care staff, who they are familiar with and who know them well. Care calls are on time, and care staff make effort to ensure people are comfortable and safe.

The care and support given by Castlecare is good. Care plans and risk assessments contain all the information required for care staff to be able to give people the right care at the right time. People are consulted with as part of reviews and are able to contribute their opinions.

The leadership and management at Castlecare is good. There has been a change in manager since the last inspection, and the Gwent staff team have been incorporated into the organisation and standard processes of the other services under this provider. Care staff have reported a positive effect on the support they receive in their roles. The Responsible Individual (RI) has good oversight of the service and its progress.

Findings:

Well-being — Good

People are treated with dignity and respect and have control over their day to day lives. Feedback from people and their relatives about their care and support is positive. They told us: *"[loved one] gets brilliant care, the carers are great with him"*. Personal plans show people's preferences for how their care is delivered. Regular in-person reviews gather opinions and feedback. People's well-being and safety is prioritised by identifying and managing potential risks. Thorough risk assessments and positive behaviour plans are completed in consultation with individuals to manage risk without unnecessarily restricting people's own decision making.

Support is given to people, and their relatives where needed, to optimise their physical and emotional health. Care staff encourage people to make healthy food and lifestyle choices where possible and offer emotional and practical support to relatives. One relative told us: *"I'm like the second carer, the staff are great with helping me"*.

People are safeguarded from abuse and neglect. There are good systems in place for reporting any safeguarding concerns to management. Appropriate referrals are made when needed to the Local Authority. Care staff are up to date with safeguarding training and there is a safeguarding policy in place to underpin good practice.

Care staff assist people with practical support, such as shopping, and ensure they are able to monitor their finances effectively. There is open communication between people receiving care, care staff and management for any questions or issues to be raised.

Care & Support — Good

Care and support is delivered by a small team of care staff who are know the people they support well. This gives people continuity of care and enables them to build familiarity with care staff. One relative told us: *"[loved one] is very familiar with the staff, and so am I. I'd ask the staff any questions I have, and we've been visited regularly to check we are happy with everything"*. Care staff told us: *"we work well in the team with our clients"*, *"we know the clients very well, and they feel secure with us here"*.

People's personal plans contain all the required information to make sure people get the right care at the right time, taking into account their preferences. Plans from other professionals, such as manual handling plans from Occupational Therapists are also included in the care file for care staff to follow. Risk assessments identify risks to the individual themselves and any environmental factors which may pose risk to others. Where necessary, positive behaviour plans identify triggers for distress related behaviours and the intervention required by care staff to minimise these. Reviews are completed regularly in-person with people and their relatives, and we discussed improving these reviews further by elaborating on the effectiveness of the care being given.

Care staff support people to maintain their physical health. Care staff are confident to report any changes in a person's health either to management, or directly to the GP. Castlecare have provided support with palliative care packages, working with palliative care teams and health professionals to give good end of life care alongside community nurses. When required, medication is stored safely and administered to people by care staff as prescribed. Changes in medication are communicated between care staff and recorded appropriately.

Good infection control systems are in place, care staff have access to personal protective equipment (PPE) when needed for close contact care. Care staff are up to date with infection control training and there is a current policy in place for additional guidance if needed.

Leadership & Management — Good

At the time of the last inspection, improvements were needed in the management structure of the service as the manager was completing front-line care calls which was impacting on their management duties. Since then, this Gwent footprint of Castlecare has been brought under the management of its two sister services. The service has also been scaled back slightly in line with the capacity of the staff team. These changes have meant the service has better management oversight and is more organised and standardised with the provider's other two services. Feedback from care staff is positive: *"the management is clear, we know where we are with them"*, *"our good work is being recognised"*.

There are effective quality monitoring systems in place, used to drive continuous improvements to the service. The management and responsible individual (RI) have good communication, and the RI is supportive of any suggested changes. Quarterly monitoring visits are completed as required and form the basis for biannual quality of care reports, outlining what is working well within the service and what requires ongoing development or improvement.

People achieve their personal outcomes because the service provider makes sure there are enough suitably qualified and trained staff to deliver quality care and support. The service now runs at a suitable capacity for the current staff team. All care staff are up to date with their training, and are offered additional support to complete it if needed. Additional training is being considered to support staff further with their palliative care work. Supervisions are up to date and management are available for check ins in between.

The RI and management put effort into enhancing staff wellbeing. As well as practical measures, such as fleeces and torches, care staff have access to a private healthcare scheme subsidised by the provider and gift vouchers given for recognition of good practice or compliments from others.

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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