Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Identified Health Care

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www.identifiedhealthcare.co.uk

The inspection visit took place on 29/04/2026

Service Information:

Operated by:	Identified Health Care 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 is not promoting the Welsh language and culture needs of people, and this requires improvement.

Ratings:

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

Summary:

At the most recent inspection, the service achieved a good rating across all three areas: wellbeing, care and support, and leadership and management.

The service actively promotes people's wellbeing by delivering person-centred care, carefully matching staff to individuals, and recognising language needs. Staff use real-time electronic systems to improve communication and transparency and ensure information is up to date. They develop personal plans that reflect individual preferences, promoting dignity and inclusion. Safeguarding measures protect people, while outcomes show increased confidence, independence, and quality of life.

Staff deliver care safely. They manage medication in line with guidance and monitor it effectively. They follow robust safeguarding processes, assess risks appropriately, and apply infection control measures consistently. Staff review incidents to learn lessons and continuously improve care delivery.

Leaders take a transparent and collaborative approach, working with partners to improve outcomes. They maintain strong governance systems and oversee financial accountability. They monitor care quality effectively, encourage learning, and drive continuous improvement to ensure safe, effective, and accountable service delivery.

Findings:

Well-being — Good

The provider works with people and staff to ensure positive and effective matching. Managers consider staff skills, experience, and personality alongside the individual needs and preferences of people receiving care and support. Where peoples first language is not English, the provider ensures staff are available who can communicate in the person's preferred language, promoting inclusion, dignity, and emotional well-being. During the first month of care, the provider introduces a varied staffing team to support the person, enabling informed decisions about which staff are best placed to meet individual needs and support positive outcomes.

The provider is undertaking a transitional period at Identified Healthcare services due to a move from previously used electronic systems to a new electronic care management system. The new system enables staff, people, and their families to access real-time information regarding personal plans, risk assessments, and daily notes, which care staff update at each care call. This improves transparency and involvement promoting confidence in the care people receive.

Personal plans are updated on a regular basis. During this transitional period, the provider recognises the importance of retaining detailed personal plans and avoiding loss of meaningful information. The provider is working to ensure personal plans remain accurate, up to date, and reflective of the individual. This supports people's identity, preferences, and well-being in a way that is person centred and responsive.

People's safeguarding needs and personal preferences remain central to care delivery. Personal plans provide clear and key information on preferred initial greetings, and any specific directions for staff accessing and leaving the property safely. These personalised approaches support people to feel safe, respected, and secure when receiving care and contribute positively to their emotional well-being. Staff work collaboratively with external agencies ensuring people receive coordinated and appropriate support.

The provider works closely with people and relevant agencies to support people to achieve well-being goals. Which in turn ensures emotional, physical, and psychological well-being. During inspection, the provider identified examples where people had made positive progress, such as increased confidence in communicating with staff, improved self-esteem, and greater independence with personal care tasks. These outcomes demonstrate care and support that positively impacts people's overall quality of life. Family describe the wellbeing of the service as *"marvellous."*

Care & Support — Good

People receive their medication as prescribed, in accordance with national guidelines and the service provider's medication policy. The electronic monitoring system introduced this year provides real-time updates confirming when people receive their medication and clearly records any reasons why people may not receive their medication as prescribed. The electronic system records information on medication. Medication administration is also recorded on paper documentation within the person's home address, ensuring continuity of records. This documentation is delivered to the office monthly, enabling additional management oversight, quality monitoring, and assurance processes to take place.

Care staff can create alerts on the electronic system, which enables the management team to monitor and respond promptly to any concerns identified during care delivery, including missed medication, falls, or changes in presentation. The provider continues to strengthen the system to ensure staff use it consistently and as designed. Particularly to raise concerns effectively and escalate issues promptly to office-based staff members.

Care staff have immediate access to accurate and up-to-date information through an electronic care management system accessed via mobile devices. This supports consistency, continuity, and safe delivery of care. Each care call includes a clear list of required tasks, and staff record task completion in real time alongside detailed visit notes. This approach ensures clear communication, effective recording, and continuity of care for people receiving support.

The service listens to concerns about safety and investigates incidents thoroughly. The provider uses learning from these events to continually identify good practice and areas for improvement. During the inspection, inspectors observed reflective practice documentation that demonstrated how incidents and concerns are used as learning opportunities for staff, supported and guided by senior staff members. The provider submits appropriate safeguarding referrals and issues formal warnings where necessary to protect people and promote safe practice.

The provider demonstrates transparency when identifying learning opportunities and implements required changes promptly to improve outcomes for people. Appropriate risk assessments are completed to ensure staff feel safe, supported, and comfortable while carrying out their roles and responsibilities.

Sufficient personal protective equipment is always available for staff. The provider supplies staff with a bag and uniform to support safe working practices whilst on duty. The provider has appropriate infection prevention and control policies in place, which support staff to deliver care safely and reduce the risk of infection.

The electronic system is used by staff providing care. The system provides instant updates for management and raises their awareness to any concerns. Further improvement is to be made to

ensure staff are using the system appropriately. The electronic system is also available to all family members; further work will be completed to ensure people are aware of their ability to access live information.

Leadership & Management — Good

The Responsible Individual actively collaborates with external stakeholders and other care providers, sharing learning and best practice. This promotes high standards across the sector. External agencies acknowledge the team for their meaningful impact *"the progress he has made in the last year has just been amazing. Well, done team!."* There is an open and transparent approach to working with commissioners. During inspection information was shared to evidence improvements and demonstrate how leadership and governance arrangements enhance the quality of care and support people receive.

People are supported by skilled and experienced staff. The system in place enables management to quickly identify what staff members are experienced and what staff members are still undergoing training. A team of bank staff are used, the majority of which are experienced staff. The oversight system identifying what training is required by each staff member is to be strengthened to ensure it always remains up to date.

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People's financial well-being is supported appropriately. The service works with people and financial representatives supporting them to budget their money in line with their needs and wishes. Where required, the provider maintains a detailed record of all financial transactions, with clear oversight in place to ensure all finances are accounted for accurately. This approach promotes security, transparency, and reassurance for people receiving support.

The provider's policies and procedures are appropriate and proportionate to the needs of people supported by the service, and they are understood and implemented by staff. Policies and procedures are reviewed regularly to ensure they align with current legislation and national guidance.

People are kept safe from harm, and the provider ensures all legal requirements are met. The provider completes appropriate Disclosure and Barring Service (DBS) checks and ensures staff are registered with Social Care Wales, the workforce regulator. All staff complete safeguarding training,

which is reinforced through discussions during three-monthly reviews with senior staff members.

The service provider ensures timely notifications are sent to relevant authorities in the event of significant incidents in the service. This ensures appropriate actions are taken promptly to safeguard people and maintain service quality.

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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