Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Kind Hands Care Ltd (Cardiff & Vale)

90 Pen-y-bryn, Caerphilly, CF83 2LA

07805211992

Date_Inspection_Visits: 19.11.2025

Service Information:

Operated by:	Kind Hands Care Ltd
Care Type:	Domiciliary Support Service
Registered places:	0
Main language(s):	English
Promotion of Welsh language and culture:	This service is working toward providing an 'Active Offer' of the Welsh language and demonstrates an effort to promoting the use of the Welsh language and culture.

Ratings:

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

Summary:

Kind Hands Care Ltd provides domiciliary care across the Cardiff & Vale area and the Gwent regional partnership. The service delivers person-centred support that promotes independence, dignity, and choice for nine people. Feedback from people and their relatives is consistently positive, highlighting compassionate care and respectful relationships.

People experience good well-being outcomes through tailored support, meaningful activities, and the ability to make choices about their daily lives. People and their representatives are actively involved in care planning and reviews, with multiple channels available for sharing views. People are receiving good care and support needs and are supported to access medical support when needed.

Leadership and management of the service is good. The manager, who also acts as the responsible individual (RI), maintains robust oversight through effective governance systems. These include regular audits, safeguarding measures, and continuous feedback analysis to identify strengths and areas for improvement. Overall, the service demonstrates a strong commitment to dignity, choice, and well-being through personalised and responsive care.

Findings:

Well-being — Good

People's well-being is good because it is supported through care practices that promote autonomy and informed decision-making. Staff continue to encourage people to maintain control over their lives and make choices about their care. Before support begins, initial assessments are completed to ensure that needs can be met. Following admission, personal plans are developed to reflect each person's preferences, routines, and interests. Representatives are involved from the outset to foster a collaborative approach. We saw that people participate in care planning and reviews, and their well-being outcomes are well documented. The service promotes a culture of openness and empowers people to make decisions about their health, supported by detailed risk assessments.

During the inspection, people shared what matters to them, how they spend their time, and their views on the support they receive. One person described having *"a clear system that works for me and staff respect and promote that."* The manager and care staff demonstrate a strong commitment to listening and providing information in accessible formats. Communication is clear and people told us that there are no barriers to communication. People spoke positively about their relationships with staff, describing interactions as friendly and supportive. One person commented on the positive communication, saying *"we have a laugh, there are no communication issues".*

Staff show awareness of safety, balancing risk to promote well-being. Any changes in people's health or well-being are promptly reported to relevant professionals. Care staff understand individual needs and provide support with kindness and empathy. The service supports 9 people. We found that the RI and care staff provide a consistent service and know people's needs well. People are supported by same carers, which provides some consistency and reassurances and supports positive relationships. People feel staff go *"above and beyond"* to meet their needs. People told us the manager responds quickly to any issues: *"they are on it as soon as I call them, it is sorted, I have numbers in my diary, and they have always responded when I call them".* People told us they have trust in the provider. Care staff continue to support people to access community activities that promote mental health and emotional well-being.

People are protected from abuse and harm through robust safeguarding policies. All staff receive mandatory core training, and the RI liaises with the Local Authority if safeguarding concerns arise. Recruitment processes are thorough, with pre-employment checks and valid Disclosure and Barring Service (DBS) certificates for all staff, ensuring people's safety. Information about the service and a clear complaints policy are available to everyone. RI engages with people as part of quality assurance monitoring and maintains strong oversight of the service. The organisation's statement of purpose (SoP) is regularly reviewed to ensure care offered is in line with this.

Care & Support — Good

People receive high-quality care and support that enables them to achieve their desired personal outcomes. We observed evidence of people being successfully supported to manage pressure areas, which have since cleared. Care staff complete tasks identified in personal plans, including the provision of meals and drinks. Staff encourage people to drink and ensure refreshments are offered respectfully and placed within reach when staff leave. Most people told us this is done in a dignified and empathetic manner. People also reported that they are not rushed with personal care, staff are attentive, and call times can be negotiated. Structured and personalised care fosters a sense of purpose and direction, and people feel treated equitably and with dignity and respect reflected in their highly individualised care plans.

Personal plans are detailed and person-centred, clearly outlining what matters to each individual and what they want and need from the service. These plans incorporate input from the person, their representatives, and external professionals involved in their care. Plans are reviewed every three months to ensure they remain current and relevant, although we found they could be strengthened to reflect recent changes. Staff maintain daily records of care and support delivered, and any changes in people's needs are updated in real time via a digital system accessible remotely.

People are safe and protected from abuse and neglect. They are supported by skilled and competent staff who help them achieve their outcomes using the least restrictive approaches. Risk assessments identify potential risks associated with people's goals and preferences, and appropriate measures are implemented to minimise these risks while promoting independence. The service maintains strong links with local mental health, occupational health, and social care services, contributing to positive outcomes for people.

Medication is managed safely. Staff reported that the digital system is efficient and helps prevent errors. When errors occur, they are reported immediately to protect people from harm. Medication audits confirm that administration is safe and well managed, and staff competency assessments are completed regularly. The provider works closely with external health professionals to ensure people receive the correct medication at the right time. While some people receive full support with medication, others retain independence and self-administer with staff supervision.

Personal Protective Equipment (PPE) is readily available for staff, and hygiene standards are generally good. However, we noted that these could be strengthened by ensuring prompt removal

of aprons and gloves after personal care. We have been given assurances that this has been addressed with all care staff.

Leadership & Management — Good

Leadership and management of the service are effective. The responsible individual (RI) also acts as the manager, ensuring strong oversight through robust governance systems that support smooth operations and high-quality care delivery. The RI conducts regular visits and actively seeks feedback from people using the service in line with the regulations. Quality assurance processes, including audits and monitoring, demonstrate the provider's commitment to continuous improvement. People receive clear information on how to raise concerns, and there have been no formal complaints since the service began operating.

Comprehensive policies and procedures guide staff practice and service delivery. Most policies reviewed were up to date and of a high standard. People told us they trust the leadership team and find staff approachable. An open-door policy for people, staff, and family members promotes quick resolution of issues, preventing escalation. The provider has no Welsh speaking people or staff but gave assurances that provision will be made if required as the service supports language and cultural needs of everyone.

People feel supported by well-trained staff who understand their roles. Staff receive training appropriate to their responsibilities and report feeling confident in their work. Formal supervision is provided in line with regulatory requirements, offering opportunities to discuss practice and development. Staff expressed high job satisfaction, saying: *"I love my job, and this is a good company to work for." "The people we support are really lovely."*

Recruitment processes are robust. Personnel files examined contained required documentation, including references and Disclosure Barring Service certificates, which are obtained before employment begins. These measures ensure people's safety and compliance with regulations, and this is used to make sure care workers are fit to work with people in the community. The provider monitors the hours worked by any care worker preventing excessive hours of work that could impact on the quality of care delivered. Travel time and break time is sufficient and care workers we spoke with told us that they feel supported in their role and most calls are close to each other.

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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