Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Care Cymru - Carmarthenshire

Unit 1, Heol Rhosyn, Llanelli, SA14 8QG

01792 952483

The inspection visit took place on 14/01/2026

Service Information:

Operated by:	Care Cymru Services Ltd
Care Type:	Domiciliary Support Service
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:

Care Cymru Carmarthen are a domiciliary care service who provide personal care, practical and social support to adults over the age of 18 with physical, mental health, and learning disability needs. It is based in the West Wales Regional partnership area.

People receive good care and support from the service which enhances their overall wellbeing. They have plans detailing their individual care needs and tasks. Risk assessments identifying risks to people and how these can be managed or reduced are in place. Plans and risk assessments are reviewed and updated regularly, and people told us they are involved in these. People and their representatives are complimentary about the positive relationships they have with care staff and the management team. Staff feel supported, confident and happy in their roles. Regular one to one supervision, monitoring, and access to support for their own wellbeing is provided for staff across the service. A variety of both mandatory and specialist training is provided for staff and is all classroom-based. There are systems in place for monitoring and reviewing the quality of the service. The responsible individual (RI) and wider management team visits the service regularly and has good oversight of service provision.

Findings:

Well-being — Good

People are supported to have as much control as possible over their day-to day lives. The service carries out thorough pre-admission assessments to ensure it can meet people's need. People and their representatives are involved in developing and reviewing their care plans.

Documentation such as a statement of purpose and written guide are available and provide information on the service, how to raise a complaint, and details of how to access advocacy services. The management team deals with any complaints and follows the provider's policies and procedures.

People's communication needs are considered, and care plans are evident in people's care files. The service is working towards anticipating, identifying, and meeting the Welsh language and cultural needs of people who use the service. A Welsh language policy is in place and training can be accessed through the Local Authority (LA). Documentation is also available in Welsh on request. The service has a number of Welsh speaking service users who are matched to Welsh speaking staff as far as possible.

People are protected from abuse and neglect. Care staff are recruited in line with regulation to ensure they are suitable to work with vulnerable people. They receive training appropriate to the needs of the people they support, and staff we spoke to understand and follow the Wales Safeguarding Procedures. There are effective mechanisms in place to ensure people can voice their concerns. Where risk assessments are in place, these highlight areas of concern. There are measures in place to ensure medication is safely managed and administered.

People are supported to maintain and sustain relationships with family, friends, and important people in their lives as far as possible, with access to technology to support this. An example of this is an application that enables people and family members to have access to information such as care plans, rotas, and communication logs. People and their relatives told us they are readily able to contact the office, and any issues are resolved promptly.

Care & Support — Good

People experience consistently good quality care and support. An assessment is completed prior to a person starting with the service to ensure the service can meet their needs. A personal plan is developed with the person and if appropriate, their representatives. Risk assessments consider risks to people's health and wellbeing and ways for keeping people safe. We saw personal plans are reviewed and updated regularly, and people told us they are involved people to ensure recorded information remains relevant and meaningful.

People are supported by highly skilled staff who have a very good understanding of their individual needs and preferences. There is a stable staff team with a low turnover, which provides continuity of care to people. People told us care staff usually arrive on time, stay for the allocated time on their care plan, and do the things that they want to do. An example includes staff supporting one person to access the community to carry out tasks such as shopping.

Care staff and the management team have positive relationships with the people they support and their representatives. Some feedback from people and their families describe the care and support as: "*Excellent*" or "*Good*", and care staff as "*Patient…fantastic care…go above and beyond*" "*Brilliant" and "Lovely."* Other compliments received by the service include *"Very attentive" "Very supportive" and "Know how to make you laugh and look on the bright side of life."*

People are supported to maintain their health and wellbeing. The service has good links with local health and social care services such as GP's, Mental Health Teams, social workers, and Local Authority commissioning teams. People are supported with their medication if required, and in reducing the risks of infection in accordance with national guidelines and service policy. Medication management procedures are in place, and an electronic system works to minimise risks and errors. There are policies aligned with best practice guidance and care staff receive training and competency checks to ensure they remain sufficiently skilled. Routine medication audits ensure practice remains safe and effective. The risks of infection are reduced and managed as staff understand and implement safe practices to prevent infection. This includes the appropriate use of personal protective equipment (PPE) such as masks, gloves and aprons as required, and good hand hygiene.

Leadership & Management — Good

The service makes sure there are enough suitably qualified and trained staff to deliver quality care and support. Staff receive a mix of mandatory and core training relevant to the needs of the people they care for, which is all classroom-based. A dedicated compliance manager helps ensure staff training compliance remains high. Staff describe the opportunities to learn and develop at the service as "*Excellent"* or "*Good."*

Care staff receive rotas in a timely manner on the electronic application on their phones, and have sufficient time for care, travel, rest breaks, days off, and training. Staff receive regular one to one supervision, an annual appraisal, 'spot checks', and all say they either feel very well supported or somewhat supported. Some feedback included "*I have worked for other care companies and I am happiest here… I'm offered extra training all the time if I want it" "Friendly management" "Very supportive and knowledgeable manager… Team work…all staff will come together to support…we provide several services and they all appear to work exceptionally well" "The office will listen and support."*

Other incentives in place for staff include access to a Well-being Hub, counselling sessions and helplines/information to support their wellbeing, and rewarding staff for their work such as 'Carer of the Month'. The provider also offers financial support to staff with the Hasty application enabling them to apply for pay in advance, paid travel mileage, recruitment fees, MOT, and access to a 4 x 4 vehicle in bad weather.

Strict selection and vetting processes ensure staff are qualified, trustworthy and suitably fit to work at the service. Staff recruitment files contain all the regulatory required information including references from previous employers, full employment histories, and Disclosure and Barring Service (DBS) checks. Care staff complete a structured induction when they commence employment including training and shadowing other staff. Care staff are registered with Social Care Wales (SCW) as appropriate, which is done to ensure they have the skills and qualifications needed for working in the care sector.

The provider's oversight and governance arrangements foster a positive compassionate culture in the service. They engage people, families and staff in quality assurance processes through home visits, telephone calls, satisfaction surveys, and team meetings. People and their families told us they feel confident raising any concerns with care and office staff or the management team. We saw audits are routinely completed by the management team including electronic call logs. Branch audits are carried out by the RI and the wider provider. Records confirmed the RI visits the service

regularly, meets with people and staff, and has good oversight of service delivery. Quality of care reviews are completed every six months to assess the quality of the care and support provided at the service and identify areas where improvements can be made. Service policies and procedures provide guidance to staff and ensure practice remains safe and effective. The sample we saw are aligned with statutory and best practice guidance, kept under review and updated when necessary. The provider's Annual Return was received by Care Inspectorate Wales in 2025, as required.

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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