Arolygiaeth Gofal Cymru
Care Inspectorate Wales

# Inspection Report

## Cariad Care North Wales

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www.cariadcarenorthwales.co.uk

**The inspection visits for this service took place between 29/09/2026 and 30/09/2026**

## Service Information:

| | |
|---|---|
| Operated by: | Cariad Care North Wales Ltd |
| Care Type: | Domiciliary Support Service |
| Provision for: | Care and support for adults |
| 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:

Cariad Care is a domiciliary care service providing support to people in their own homes in North Wales. Well-being outcomes for people are good as they are encouraged to maintain independence, choice, and control over their daily lives. The provider promotes a strengths-based approach which supports people to continue living in their own homes, maintain established routines and participate in activities that are meaningful to them. They recognise the importance of maintaining relationships, reducing social isolation, and promoting emotional well-being.

Care and Support is good because people receive care based on comprehensive assessment, care planning and risk management arrangements which reflect their individual needs, preferences, and outcomes. Since the previous inspection, the provider has improved care planning and risk assessment processes, addressing the 'Area for Improvement' relating to insufficient detail within personal plans and associated risk assessments. Personal plans now provide clear guidance for staff and support a consistent and person-centred approach.

Leadership and Management is good because leaders have strengthened governance, monitoring, and quality assurance arrangements since the previous inspection, providing greater oversight of care planning, risk management, workforce development and service quality. Evidence gathered during this inspection demonstrates the provider has taken appropriate action to address the

concerns identified within the previous ‘Priority Action Notice’. People benefit from support provided by appropriately trained staff. Stronger governance arrangements support ongoing service improvement and positive outcomes.

# Findings:

## Well-being — Good

People are supported by staff who know them well and understand what is important to them. Staff promote independence and encourage people to maintain control over decisions affecting their daily lives. The provider adopts a strengths-based approach, supporting people to continue living in their own homes, maintain established routines and participate in activities that are meaningful to them. The provider recognises the importance of relationships and reducing social isolation. Staff support people to remain connected with family members, friends and their local communities. People are encouraged to continue hobbies, interests and activities that are important to them and the provider demonstrates a commitment to supporting individuals beyond personal care support. Managers encourage people to remain involved in activities, relationships and interests that support their emotional well-being and sense of identity. Relatives spoke positively about the relationships staff develop with people. One relative told us staff consistently engage with their family member in a warm and positive manner and often lift their mood. Staff have a positive impact on people's emotional well-being and develop trusting and meaningful relationships with the people they support.

Managers and staff promote Welsh language and cultural needs. The Active Offer is embedded within staff induction, supervision and day-to-day practice. Managers promote Welsh language and culture and ensure people can receive support reflective of their individual preferences and identity. People's communication needs and preferences are identified and recorded within care planning documentation. Information is available to guide staff on how individuals communicate and express their views, helping to ensure support is provided in a way that promotes meaningful communication and reflects people's preferred methods of interaction.

Leaders seek the views of people using the service through regular engagement and review arrangements. Monthly engagement takes place and people are given opportunities to discuss the support they receive, raise concerns and influence service development. These arrangements evidence a commitment to involving people in decisions about their support and the ongoing development of the service.

## Care & Support — Good

Care and support is delivered in line with peoples wishes and preferences. We saw good assessments and care planning in place which identify clear outcomes for people, aiding care staff to understand how to support people. The provider has improved personal plans since the last inspection adding further detail and risk assessing where needed. Personal plans now provide care staff with clear and personalised guidance regarding mobility, personal care, communication, nutrition, continence support, medication administration, skin integrity, daily routines, and emotional well-being. Plans contain detailed information about what is important to people, their preferred routines and how staff should support them in a way that promotes dignity, independence, and well-being.

Care planning reflects people's individuality and provides staff with detailed information regarding personal preferences, interests, life experiences, communication needs, and desired outcomes. Plans provide clear guidance on how care should be delivered and adapted to reflect people's changing needs and circumstances. People benefit from positive and meaningful relationships with staff. Relatives told us staff communicate effectively, keep them informed and consistently provide reliable support. They describe care staff as having a positive impact on their family member's well-being and noted the trusting relationships that have developed over time.

Risk assessments are completed across a broad range of areas and are aligned with identified needs and support requirements. This demonstrates an improvement from the previous inspection and records evidence a balanced approach to positive risk taking. Risk management arrangements support people to maintain control over decisions affecting their daily lives whilst ensuring known risks are assessed and managed appropriately. Staff are provided with guidance regarding identified risks and measures required to help keep people safe.

People's health needs are considered within care planning and records reference involvement from a range of healthcare professionals, including GPs, district nurses, occupational therapists, physiotherapists, social workers, and specialist services. Medication systems include risk assessments, competency assessments, staff training, and audit activity, demonstrating improvement since previous inspection activity. There remain opportunities to strengthen the recording of professional involvement and further develop consistency within medication recording and monitoring arrangements.

Managers promote safe infection prevention and control practices. Staff receive training in infection prevention and control, food safety, and catheter care. Risks relating to infection prevention are reflected within personal plans and risk assessments, particularly in relation to catheter management, personal care, and continence support.

## Leadership & Management — Good

Since the previous inspection, managers have strengthened governance and management oversight through the introduction of auditing and monitoring systems. These arrangements provide managers with greater oversight of care planning, risk management, workforce development, and service quality. Governance systems support leaders to identify issues, monitor progress, and implement improvements where required. Managers use ‘action tracking’ systems to oversee improvements and ensure actions are completed. Evidence reviewed demonstrates the provider has taken appropriate action to address the previous concerns identified and leaders now maintains greater oversight of service quality and performance. These include care planning, risk assessment processes, medication monitoring, recruitment arrangements, and workforce development.

People are supported by staff who are appropriately recruited, trained, and supervised. Managers safely recruit staff through Disclosure and Barring Service checks, health declarations, employment history verification, reference checks, driving licence checks and monitoring of registration with Social Care Wales, the workforce regulator. Staff undertake a structured induction programme and benefit from shadowing opportunities, supervision, appraisal, spot checks, and competency assessments, which support the delivery of safe and effective care.

Staff receive training relevant to the needs of people they support. Managers monitor training completion and competency assessments, including medication competencies, to help ensure staff have the knowledge and skills required for their roles. Training and competency arrangements have strengthened since the previous inspection, providing greater assurance regarding safe and consistent practice.

The Responsible Individual maintains a strong presence within the service and takes an active role in monitoring quality and performance. They gather feedback from people using the service through regular engagement and use this information alongside audits and management reviews to evaluate service delivery. The Responsible Individual fulfils statutory responsibilities, including making notifications to regulators and partner agencies where required. They undertake a Quality of Care Review within regulatory timescales which reflects on service developments, operational challenges, future priorities, and informs ongoing service improvement.

# 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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