Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

ExperCare Ltd

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Date: 06.01.26 & 07.01.2026

Service Information:

Operated by:	ExperCare Ltd
Care Type:	Domiciliary Support Service
Registered places:	0
Main language(s):	English
Promotion of Welsh language and culture:	The Service provider makes an effort to promote the use of the Welsh language and cultural needs of people

Ratings:

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

Summary:

ExperCare provides domiciliary and home care services across the Vale and Cardiff area.

People experience good well-being outcomes because they experience kind, respectful and person-centred care that meets their emotional and physical needs.

Care and support are good because care plans reflect individual preferences and dislikes and staff treat people with dignity, helping them feel valued and heard.

Leadership and management are good because effective governance and quality assurance systems are in place. The responsible individual (RI demonstrates a clear commitment to continuous improvement, resulting in positive outcomes for people.

Findings:

Well-being — Good

People are supported to have control over their daily lives. Their well-being is good. They are encouraged to make informed choices, are involved in decisions about their care and their views shape care planning and delivery. People and their representatives told us they feel treated with dignity and respect and staff support them to identify their well-being outcomes and build on their strengths. The provider seeks feedback to improve the service and is exploring alternative communication methods for those who struggle with questionnaires. No one currently requires a Welsh language service, though the provider has incorporated the Welsh language 'Active Offer' into documentation.

People's physical and emotional wellbeing is promoted when the service looks at a person's range of needs and take a person-centred approach to care. This means staff actively support people to maintain good health and experience a sense of dignity, comfort and belonging. Personal plans are produced with people and where appropriate, with their families or representatives to ensure they reflect the person's unique needs, preferences, choices and aspirations. These plans are treated as living documents and are reviewed regularly, or sooner if needs change, to ensure they remain current, effective and aligned with what matters most to the person. This ongoing involvement empowers people, strengthens relationships and contributes to better overall outcomes.

Representatives described staff as kind, compassionate and professional, highlighting positive impact on daily life, emotional well-being and feelings of safety. Observations and feedback confirmed respectful interactions and meaningful engagement. People are supported to embrace their identities and maintain important relationships. Infection prevention and control measures are in place with oversight from leaders. Positive risk-taking is encouraged to promote independence and confidence.

The service has a clear statement of purpose and service guide, which includes information on rights, advocacy, and how to raise concerns. Complaints are handled promptly, and representatives and professionals expressed confidence in the RI's approach to resolving issues. The culture within the service values involvement, rights and dignity. People are safeguarded from abuse through effective collaboration with external agencies and regular review of risk management systems. Staff are confident, trained and committed to improving outcomes. Records show appropriate legal processes are followed for people who lack capacity, ensuring decisions are made in their best interests.

Care & Support — Good

People receive care and support that help them achieve their well-being outcomes. Pre-admission assessments are completed to determine whether the service can meet individual needs, although this process requires strengthening to ensure safety and accuracy. Information is gathered from people, families and representatives, and any changes in need are promptly updated on the electronic care system so staff have real-time information. Personal plans are reviewed regularly, and representatives spoke positively about staff knowledge, politeness and the bespoke support provided. Observations showed dignified, respectful care delivered in line with people's preferences.

People are protected from harm because referrals to health professionals are made appropriately, and recommended care is followed. Safety concerns and incidents are reported and investigated and lessons learned support ongoing improvement. Professionals noted that management are receptive to feedback and responsive to issues identified through notifiable incidents.

The service has sufficient, kind and knowledgeable staff who know people well. Staff report changes in people's needs promptly, and management escalate concerns appropriately. Representatives value this communication and feel respected and involved. The service supports people with their finances and where appropriate, people are encouraged and supported to handle their own financial affairs. These measures help people maintain control over their finances and ensure transparency and accountability.

Medication practices are followed and audited, although this area requires strengthening; the RI has already taken steps to improve these systems. Personal Protective Equipment (PPE) supplies are available and good infection control practices help reduce the risk of infection.

Leadership & Management — Good

Systems are in place to measure, monitor and improve service performance. The provider completes quarterly reviews that incorporate feedback from people using the service, their representatives and care staff. A six-monthly quality-of-care review is also undertaken. As a new service, the provider demonstrates motivation to learn from incidents and actively gathers feedback to support ongoing improvement. Policies and procedures are in place to guide staff and compliments and complaints are recorded and used to inform service development. There are currently no outstanding complaints and representatives expressed confidence in the service's leadership.

People are supported by well-trained care staff who feel valued and confident in their roles. Training is regularly refreshed, and staff receive consistent supervision in line with regulatory requirements. Personnel files viewed contained most required documentation. This includes references and Disclosure Barring Service (DBS) checks, ensuring staff suitability to work with vulnerable people. Care staff understand safeguarding, feel confident reporting concerns and are familiar with complaints and whistleblowing procedures. Leadership promotes openness and transparency when incidents occur, fostering positive partnership working. Care Inspector Wales (CIW) and relevant authorities are notified of events as required. Governance, auditing, and quality assurance processes are embedded, supporting ongoing evaluation and identifying areas for improvement.

Care staff are either registered with Social Care Wales or working towards registration. The Service has a new manager who is also working towards registration. We found the provider is accountable for the actions, behaviours and performance of staff. Staff understand duty of candour. We found the office staff when assigning staff to rota, consider the time needed for staff to get people in the service. Call times require strengthening to reflect time spent with people and where calls are cancelled and provider has assured us they have already started putting systems in place to manage call times. This is key to keeping people safe.

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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