



All Saints DC Ltd



15 Bradenham Place, Penarth, CF64 2AG



02920514414

The inspection visits for this service took place between 12/05/2026 and 19/05/2026

Service Information:

Operated by:	All Saints DC 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:

Everyone we spoke with praised the service and care staff. People's well-being is considered and the service supports people to achieve their health and emotional outcomes. Communication is good and people told us the service is flexible to meet their needs. Information is readily available and people told us they know how to raise concerns if needed.

Personal plans are in place and people are regularly involved in their reviews. People consistently describe care and support staff as excellent saying "*They're absolutely fantastic,*" "*It's been amazing.*" Plans include important information, strengthening care planning. Outcome-focused reviews would further improve consistency and help ensure all care is fully tailored to individual goals. Medication systems are in place. The service is working with professionals to ensure measures in place are as safe as possible whilst ensuring people's independence is maintained.

There is a good management structure which enables the smooth day-to-day running of the service. The Responsible Individual (RI) who is also the manager is visible and approachable. Systems are in place to help maintain oversight; the service is developing these to help identify patterns and trends to aid improvement. Care staff continuously praise the service for the level of support and development they receive. Whilst care staff training is up-to-date the provider

continues to identify further training opportunities which are tailored around peoples' needs.

Findings:



Well-being

Good

People live healthily and safely with control over their lives. Everyone we spoke with told us they are involved in regular reviews of their care. People reported that the service is responsive and flexible, making adjustments as needed to meet their changing needs. One person told us, *"Nothing is too much trouble,"* and a relative said, they have *"Enabled mum to stay at home, where she wants to be."* People told us communication is very good. The service identifies peoples' communication methods and preferred language and implement measures to ensure people can communicate with their care staff. Outcomes are identified, and management maintain oversight, ensuring people achieve the things they want, including managing their health needs and emotional well-being.

We heard several stories of people achieving their goals such as weight loss, building relationships, financial independence and attending important events. Staff know people well and often go beyond care plans to respond flexibly to individual preferences. We found examples of thoughtful, flexible care, for example, one staff member changing their working times to support a person to visit a relative, promoting relationships. One person told us, *"They are marvellous."* The service considers both the people they support and their staff team, matching wherever possible people with similar likes, language and interests. One person described their staff member as more of a family member and one said, *"You can have a laugh with them."* This helps people develop trust, confidence and relationships. The service strives to provide consistent care staff. One relative said there is a *"Regular team who visit and know X really well... the support they give X is second to none."*

People have access to information about the service and their contract, so they know their rights. People know how to raise concerns and can contact the appropriate people when they need to. Care staff are quick to identify concerns and report these. One person said, *"They're very good, as soon as they see it, they report it."* Care staff understand their safeguarding responsibilities and receive the appropriate checks to work with adults at risk. We saw oversight of complaints and appropriate investigations conducted by the RI to ensure compliance, keeping people safe.



Personal plans include a good level of information regarding the person, their needs and risk. A detailed life history document captures the person's life achievements and interests, helping care staff understand a bit more about them. A vital fact sheet provides important information regarding the person and their health needs. Plans do not always clearly describe what people want to achieve or how independence will be promoted and the service is working to ensure this is improved. Plans and risk assessments are regularly reviewed with the person, and most people told us their plans are reflective of their needs and information. The service is developing the review document to ensure they identify areas for improvement. This will promote people's independence and aid staff in understanding exactly what the person can do alone and what specific areas they need support with.

Daily records are in place, and some are very detailed and personalised, considering the persons mood, presentation and overall well-being. Whilst people told us all their needs are met to a high standard, we discussed with the provider considering how to make records more consistent to ensure they reflect that all care needs have been met during the visit. There is no impact on people as the consistent staff team know people well and often anticipates their needs.

People told us they see the appropriate health professional when they need to, and care staff are quick to identify any changes in their needs. We saw plans include important health professional contact details. One person said, *"They anticipate a minor problem and sort it before it develops."* The service liaises with the Local authority when needed to seek additional hours of support so people's outcomes can be safely met. One person told us, *"They are all so caring and kind."* Several people take their medication independently or have support from family members. Care staff are deemed competent to administer medication and provide prompting to ensure people take their medication at the right time. We saw Medication Administration Records (MAR) are completed and signed for, meaning people receive their medication at the right time. People have medication risk assessments in place. The service told us they are assessing how people take their medication to ensure they can remain as independent as possible whilst considering safety. The service is liaising with commissioners and health professionals to seek guidance regarding medication practice.



People and care staff praised the service and its managers. Everyone we spoke with rated the service highly saying, “*They are brilliant*” and “*It’s been excellent.*” The RI, who is also the manager, maintains good oversight and is present and visible. People know who they are and care staff told us they feel well supported by them and can go to them to share concerns. One member of staff described the RI as “*Amazing, a kind person I respect.*” There is a good management structure in place with specific roles to ensure the smooth day to day running of the service. One person told us how the office team go above and beyond to support during times of staff absence and sickness. Ensuring people’s care continues, needs are met providing continuity and reliability.

Care staff are consistently praised and described as “*Tremendous,*” “*Compassionate*” and “*Professional.*” Care staff are appropriately recruited and vetted. Personal staff files are well organised, and we saw meaningful and detailed supervision and appraisals are in place. These support measures ensure any training needs can be identified, and staff can be praised for their achievements. Care staff complete training and the RI told us they are exploring more specific and bespoke training for staff so they can better understand people’s individual health needs. Regular spot checks ensure staff remain competent and skilled.

With few exceptions, people and their relatives comment on the reliability, punctuality and continuity of care staff. Some people told us they do not always know who is coming to support them but usually see consistent staff. We discussed this with the service provider who assured us a document is being completed to ensure care staff review with the person their wants in relation to rotas. Action will be taken where appropriate. There is an electronic system in place which enables live oversight of rotas and shift planning, ensuring care staff have sufficient travel time to get to each call. This also alerts office staff if there are any delays or late calls, meaning people can be informed in a timely manner. Care staff told us they have sufficient travel time to get to each call, meaning most people receive their care at the right time.

Oversight systems like audits of records, medication and care delivery are in place. These documents consider staff practice, infection control, choice, independence and the overall quality of care. Oversight is maintained through auditing, RI visits and a Quality of Care Review. We discussed with the provider considering new ways to consider information which would help provide improved oversight and identify patterns and trends across the service. The service demonstrates a positive culture and a willingness to improve, which supports good outcomes for people using the service.

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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