



Inspection Report on

Gofal Seibiant Care Ltd

**Gofal Seibiant Care Ltd
44-46 High Street
Llangefni
LL77 7NA**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

20/08/2024

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About Gofal Seibiant Care Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Gofal Seibiant Care Ltd
Registered places	0
Language of the service	Both
Previous Care Inspectorate Wales inspection	
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

This service provides care in a variety of areas in Gwynedd. People and their families are generally happy with the level of care provided. Staffing issues in certain areas have meant staff have been called from other areas to cover calls and this has meant increased working times and travel distance for them. Staffing issues have also meant there have been some missed calls during the summer months; appropriate disciplinary responses have been taken by the provider. Care staff are committed and aim to assist where possible to cover care calls. The staff we spoke with speak positively about their roles and the support they receive but have acknowledged the travel distance can impact upon their daily routines. Care staff are trained and provided with regular one to one supervision.

The provider and management team are committed to their roles and the service they provide. They promote a positive, proactive honest and open approach and culture. The staffing issues have impacted upon the quality of the service. Professionals we spoke with also acknowledge this impact. However, the responsible individual (RI) and management of the service are committed to ensuring people receive a quality service. Systems and processes successfully monitor service delivery to continually improve it. The provider is focused on ongoing recruitment. The service aims to offer a bilingual service where possible. They are responsive to concerns and issues arising, for example missed calls and disciplinary issues. They are effective in informing, communicating and notifying Local Authority and Care Inspectorate Wales (CIW) regarding issues or concerns arising.

Well-being

People have control over their everyday lives and routines. Thorough assessments are completed before people receive the service. People's identity, preferred language, choices and routines are the focus, to create comprehensive planning and records of care. People, who are Welsh speaking, are matched with Welsh speaking staff where possible. People told us they receive care from the same carers most of the time. Care staff assist people to undertake their daily routines in line with the care planning. We viewed personal plans which demonstrated care staff were recording into the electronic system, while we inspected. Records show care is provided in line with individual care plans. The provider prides themselves in ensuring people receive the care they need.

People's emotional, and physical well-being needs are met. People's care needs are thoroughly considered and people, their families and professionals are involved in the care planning. People's routines and well-being outcomes are pivotal to the planning and provision of care. Care staff are encouraging and kind. One person told us. "*The girls who call are lovely*". Communication between people, their carers and management are effective, which means relevant and necessary updates are made to care records and routines. Management monitor care closely and take timely steps to record and implement any changes required. Professionals are contacted as needed to provide advice and support.

People are safeguarded from the risk of harm. Risks to people are identified before people receive the service and appropriate risk assessments are put in place. Care staff have received appropriate training in safeguarding, moving and handling, first aid and health and safety. They know what to do if they are concerned about someone. Management has effective oversight on issues of concern and ensure this information is shared in a timely manner. The providers open and honest approach means action can be taken to rectify or improve areas of concern, for example staffing levels.

Care and Support

The provider considers a wide range of views and information, to confirm that the service can meet individuals' needs and support people to achieve their personal outcomes. People have up to date electronic personal plans. Detailed information is recorded about people's life histories, significant places, hobbies, interests and personal preferences. Friends and family members are included in the gathering of information. The electronic system allows greater access and sharing of important information. For example, care staff, people and relatives can access personal plans and daily records at any time with the person's consent. Professionals can also access information prior to reviews, gaining a more in-depth insight into the care and support being offered and any issues arising. We accessed information remotely whilst on inspection. Records demonstrate this system is live, efficient and accessible for all, where appropriate.

Individuals feel confident that service providers have an accurate and up-to-date plan for how their care is to be provided to meet their needs. People and their families are involved in planning of care. Care practitioners and seniors inform managers of any changes; they also act as key workers for some people. This has been trialled, so not all people using the service have key workers. Where possible, people have the choice of whether to have the same care staff- this is a choice. Checklists of need are reviewed and monitored. These include the "*About me*" document, which contains information about medical issues, manual handling, tasks, daily routines, choices and preferences. This document is informed by information from other agencies, including Local Authority will have informed the personal plan. Paper files are kept in people's homes and care staff update records via mobile phones. These are reviewed and monitored by the provider regularly or when care needs change.

People are supported to access healthcare and other services to maintain their ongoing health, development and wellbeing. Information about health is considered and advice by health professionals is recorded and acted upon. Appropriate links are made with health professionals and personal plans are updated to reflect this. The sample of personal plans we reviewed shows changes to care plans following a change in health needs or advice from health practitioners. We viewed correspondence with health professionals which has triggered alterations to care records, which tailor the level of care provided. People receive good quality care, which is closely monitored.

The provider promotes hygienic practices and manages risk of infection. There is an infection control policy in place and care staff receive training. Personal plans remind care staff to make sure they are wearing personal protective equipment (PPE) and supplies are available at the office.

Leadership and Management

The service provider has governance arrangements in place to support the smooth operation of the service and ensures there is a sound basis for providing high quality care and support for individuals using the service to enable them to achieve their personal outcomes. Care staff receive training and regular formal supervision. The sample of staff files show the training and supervision dates are consistent with the training program and supervision plan. Regular team meetings take place. We reviewed the most recent record of the team meeting discussion. These show discussions around health and safety, safeguarding, and staffing. There are up to date policies and procedures which are accessible for care staff and regularly reviewed. The provider employs somebody to ensure electronic systems are safe and interlinked. This means the systems are streamlined, which means more time can be spent on care planning and care needs.

The provider ensures there are arrangements in place for the effective oversight of the service, through ongoing quality assurance processes that review standards of care and compliance with regulations and that information and views obtained are used for the continued development and improvement of the service. We reviewed the most recent responsible individual Quality report 2024. This is informed by regular audits and monthly reports on the quality of the service; separate reports are produced for separate areas. We looked at a sample of audits and the service audit planner. This shows management have oversight over this service, including personal plans, staff files, spot checks, missed or late calls. Annual questionnaires are distributed to people, their families and professionals to gather feedback about people's views of the service. The provider strives to ensure ongoing evaluation and monitoring to drive improvement.

The service provider has oversight of financial arrangements and investment in the service so that it is financially sustainable and supports people to be safe and achieve their personal outcomes. The provider monitors financial matters within their audit planning. They have recently invested in purchasing a building where the service is based in the town centre. Care staff attend training and meetings in this building. We observed care staff coming and going from this base.

Individuals are supported by a service that provides appropriate numbers of staff who are suitably fit and have the knowledge, competency, skills and qualifications to provide the levels of care and support required to enable the individual to achieve their personal outcomes. Staff are recruited safely, and care staff files show this. Staff receive thorough inductions, supervision and annual appraisals. Care staff told us they receive their rotas in advance which include a map of the exact location of people's homes.

Summary of Non-Compliance	
Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	
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