



## Inspection Report on

**Gateway Support & Care Ltd**

**Gateway Support & Care Ltd  
24 Brynderwen Road  
Newport  
NP19 8LQ**

## **Date Inspection Completed**

10/11/2023

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## About Gateway Support & Care Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	GATEWAY SUPPORT & CARE LTD
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">[Manual Insert]19/01/2022</a>
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

People who receive support from the agency are happy with the services they get. They speak about the care and support they receive as something they need to have stability in their lives. When they talk about staff, they indicate they have good relationships with them and can rely on them. We observed care staff and senior staff know people extremely well and are respectful and caring. Staff speak with enthusiasm about their role and about how they support people to enable them to remain as healthy as they can be and to lead fulfilled lives.

The service provider has very good day-to-day arrangements in place to ensure the best outcomes for individuals who use the service. The service also works closely with a network of professionals who support people who need highly individual care packages.

They also have arrangements for the oversight and governance of the service. Overall, these are good, but some must be improved to ensure all the requirements of the regulations are fully met. Further work is needed to strengthen recruitment checks. The information given to people must clearly distinguish between the domiciliary support services offered to people and matters which relate to their accommodation.

## Well-being

Individuals receive the support they need and want. They told us about the things which matter to them, about the support they receive from staff, and how they rely on that support. This includes support with looking after their appearance, meal preparation, managing their medication and finances. People also spoke about being able to talk to staff when they need to. We observed staff have built good relationships with people and know them extremely well. This enables them to anticipate what people may need while still respecting people's choices. We noted some long-standing relationships between staff and people who use the service, when staff have worked for the service for many years. This gives people stability in their lives.

People are supported to remain as healthy as possible. We noted people receive support to ensure their physical and mental health are as good as they can be. We observed managers and senior staff know people extremely well and communicate with each other on an ongoing basis. This enables them to identify early warning signs which may indicate changes in a person's physical and/or mental health and well-being. In turn, we saw this enables them to make changes to the level and type of support the service provides. The service also works closely with a network of professionals who support people. They are alerted in a timely manner when the service identifies a person's needs are changing. Finally, we noted the relationships they have with staff and other people who use the service promote people's mental health and well-being.

People are protected from abuse and neglect as care staff know what to look out for and how to raise concerns if they suspect someone's well-being is compromised. Care staff are trained in safeguarding and have policies and procedures to guide them. There are risk management plans in place to keep people as safe and as independent as possible. We noted the medication and finance policies must be updated to include the range of support provided by the service. People are supported to keep themselves safe and to make choices which don't place them at any significant risk. We saw when people make choices which may compromise their personal safety or their health, staff offer alternative activities which people can choose to take up.

The responsible individual (RI) meets with people and seeks their feedback. The service provider also gives people information about the service. This information includes matters relating to their care and support services and to their accommodation. We discussed with the service provider and with the RI how there needs to be a clear differentiation between the two.

## Care and Support

People receive the care they require and speak positively about staff. People spoke to us about what is important to them. This included speaking about their pets, finances, interests and hobbies. When we asked people to tell us about the support they receive from care staff, their responses included support with medication and meal preparation. Observations and discussions with staff and managers show they are dedicated, very knowledgeable about people's needs and about the best ways to support them.

There are established systems in place in order to assess and plan the care and support each person needs. The provider considers a range of information before providing care and support. This includes information from people who are due to receive the service and external professionals. Each person has a set of care documentation which reflects all this information. Most of people's documentation which includes care plans and risk assessments, describes in detail what people's needs are and lists how staff must support the person. Staff record the care and support they deliver on a day-to-day basis via an electronic care monitoring system; they told us this works well.

We noted the people who receive support and who we met are all able to tell staff how they want to be supported. We also noted staff know how people want to be supported. We discussed with the RI the need for all this knowledge to be included in people's care documentation. In addition, the support staff must and can give people in relation to their finances and medication must be sufficiently detailed in the service provider's policies and procedures. The RI told us these will be reviewed.

The care and support people receive is regularly reviewed. We saw this includes monthly care plans reviews and weekly meetings where senior staff discuss what is going well for each person supported, any warning signs that their physical or mental health is changing. We noted when changes are detected, staff discuss how they can adapt the support they provide. When people make choices which may not be in their best interests, staff support them to understand the consequences their choices may have. They also offer alternative activities. When necessary, the provider liaises with relevant external agencies. This ensures people are supported to remain as safe and as independent as possible and to enjoy a good quality of life.

## Leadership and Management

The service provider has a good management structure and established systems in place to support the smooth operation of the service. The RI oversees the service provided by the agency, seeks feedback from people who use the service and complete the necessary reports. There is a manager, a deputy, and other senior staff in post with defined areas of responsibility. All play a part in checking the quality of care provided. The agency is clear about what it stands for and what it wants to achieve, this includes providing bespoke care and support packages to people who may be reluctant to engage with other services. The feedback received from people who use the service, from staff and external professionals show the agency successfully provides personalised care and support packages.

The service provider gives people information about the service. This information includes matters relating to the care and support services they provide and which people can expect to receive. We noted this documentation also contains information which relates to people's accommodation. The information must be reviewed to ensure it only contains about the domiciliary support service provided. This is an area for improvement, and we expect the provider to take action.

People are supported by staff who are vetted, trained, well supported and developed. The records we examined show the provider carries out checks when recruiting staff. At the last inspection, we noted recruitments checks were not always as robust as they should be. At this inspection, we noted improvements, but further work is required. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

Staff are inducted, trained and supported in order to fulfil their roles. Records show staff receive an induction and take part in ongoing training. They told us they are supported by colleagues and managers and there are opportunities for development. Staff are registered with Social Care Wales and many hold a recognised care qualification. Staff and senior staff present as passionate and ready to go over and above what is expected.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

### Area(s) for Improvement

Regulation	Summary	Status
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19	The information contained in the Service User Guide must be reviewed to ensure it only contains information about the domiciliary support service provided.	New
35	The service provider has not ensured that all staff provided full and satisfactory information or documentation in respect of each of the matters specified in Part 1 of Schedule 1.	Not Achieved

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