



Inspection Report on

Gateway Support & Care Ltd

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

Date Inspection Completed

19/01/2022

Welsh Government © Crown copyright 2022.

*You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.*

About Gateway Support & Care Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	GATEWAY SUPPORT & CARE LTD
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection since this service was registered under The Regulation and Inspection of Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people /children who use, or intend to use their service.

Summary

People who receive support from the agency are happy with the services they receive. They speak highly of the care and support they receive to remain as healthy as they can be. They also speak of having stability in their lives because of the service they receive from Gateway Support and Care. Care staff and managers know people well and are respectful and caring. Staff report high levels of satisfaction and speak with enthusiasm about their role and about how their work makes a difference to people. There are established processes in place to know people's needs, to deliver the service and review the care provided. There are also systems in place to recruit, train and support staff. The induction, training and supervision of staff is good. Recruitment checks must be strengthened. The service provider continuously monitors the service provided. Managers and the responsible individual (RI) are in regular contact with people and are involved in the delivery of support. The service works closely with a network of professionals who support people who need highly individual care packages.

Well-being

Individuals receive the support they need and want. They told us about the different types of support they receive and how they rely on that support. This includes support with meal preparation and managing their medication. One person told us “*staff talk to you for hours if you are stressed*” and “*this helps quite a lot*”. Another person told us “*staff are nice people, they are helpful and they do their job well*”. We noted staff take time to get to know people, this enables them to build good relationships and to be able to anticipate what people may need. 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 that people receive support to ensure their physical and mental health are as good as they can be. This includes support to seek and follow medical treatment. It also includes care staff being available to listen and provide reassurance when necessary so that people feel safe. In addition, staff support people in order for them to have a nutritious diet. Staff notice when people’s needs change and contact relevant health and social care professionals when necessary. 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 clear policies and procedures to guide them. There are risk management plans in place to keep people as safe and as independent as possible.

Care and Support

People receive the care they require and speak positively about staff. We spoke to people directly and via telephone calls. People spoke to us about what is important to them. This included speaking about their interests and hobbies, some spoke to us about difficulties they face and what they would like to do. When we asked people to tell us about the support they receive from care staff, their responses included support with appointments, medication, meal preparation and going out. One person spoke about staff being there when they need somebody to talk to and about how important this is. Discussion with staff and managers show they are 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. This documentation 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 via an electronic care monitoring system.

The care and support people receive is regularly reviewed and when necessary referrals to external professionals are made. When people make choices which may not be in their best interests, staff support them to understand the consequences their choices may have. When necessary the provider liaises with relevant external agencies. This ensures people are supported to remain as safe and as independent as possible.

Leadership and Management

The service provider has a robust management structure and established systems in place to support the smooth operation of the service. The RI oversees the service provided by the agency and is involved with its day-to-day running. There are three managers in post and other senior staff with defined areas of responsibility. All play a part in checking the quality of care provided. We saw evidence of regular quality of care reviews and ongoing audits which take place. The agency is clear about what it stands for and what it wants to achieve, this includes bespoke care and support packages to people whose needs have not been met by traditional domiciliary support services. The feedback received from people who receive support, from staff and external professionals show the agency successfully provides alternative, highly personalised care and support packages.

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. We noted however, the recruitments checks are not always as robust as they should be. 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. Staff told us they received an induction when they first started and they take part in ongoing training. They also told us they are given time to complete recognised care qualifications and there are opportunities for development. Staff say they feel valued and are supported by their colleagues and by managers. One person told us managers are really friendly and helpful. We noted managers and care workers demonstrate interest and enthusiasm for their roles.

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. 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
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.	New

Date Published 27/04/2022