



## Inspection Report on

**Cynllun Cysylltu Bywydau**

**Gwynedd Council  
Swyddfa Ardal Dwyfor  
Embankment Road  
Pwllheli  
LL53 5AA**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

**16, 22 June & 7 July 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](mailto:psi@nationalarchives.gsi.gov.uk)*  
*You must reproduce our material accurately and not use it in a misleading context.*

## About Cynllun Cysylltu Bywydau

Type of care provided	Adult Placement Service
Registered Provider	Gwynedd Council Adults and Children's Services
Registered places	0
Language of the service	Welsh
Previous Care Inspectorate Wales inspection	This was the first inspection after the service registered with The Regulation and Inspection of Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	Yes. The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

The scheme matches people in need of support for physical, mental health, emotional and social needs with enablers to live with them in the community. People and enablers form a family-like unit living in a house which is their home. People are supported to be a member of their local community and to lead as full and independent a life as possible. People have access to health care appointments as needed. People are enabled to keep in contact with people who are important to them and to make friends. People have active interests such as gardening and are supported to have jobs as able. People and enablers go on holiday or can access respite care as is appropriate to each person's individual needs. People and enablers have opportunity to meet other enablers and people using the service in a social context.

Enablers are subject to a robust selection process and are provided with training and supervision by the service to help them in their role.

The responsible individual (RI) supports the manager in their role by phone or information technology. A quality review of the service, in person, by the RI is now due.

## Well-being

People using the scheme feel they have control over day- to- day life. People are consulted regarding their aims, ambitions, and interests and in planning their daily lives. Where able, people speak for themselves and can influence what support is given to them and what paperwork is kept about them. People spoken with told us they feel “*safe*” and “*part of a family*”. People praised the scheme, its management, and especially their enablers for supporting them sensitively and encouraging their self-reliance and self-confidence to grow.

People are supported to be as healthy as possible and have a sense of well-being about their lives. People spoken with said they felt healthy and happy. We saw people are as active as they can be, attending social events and jobs as they are able. We saw people have interests and hobbies such as gardening and travel. People told us they had friends locally and could contact family and friends as they wanted to. People are supported to attend GP and health care appointments to maintain their health. People can access Covid vaccinations if they choose to have them and are supported to follow Public Health Wales guidance.

People are protected from abuse and neglect. Enablers are subject to a robust selection process. Employment checks are compliant to the regulations and are up to date. Enablers have ongoing training and supervision to help them in their daily role. Enablers told us they are aware of safeguarding procedures and would be able to use them if required.

## Care and Support

People's views are considered regarding the service they receive. People work in collaboration with their enablers to work on desired aims and outcomes. People spoken with told us they are encouraged to maintain interests and hobbies and secure employment as able, plan holidays and meet with friends and other people using the service. We saw personal plans are written according to each individual's needs and aspirations. Personal plans reflect each person's progress towards chosen outcomes and provide evidence of this. People can influence what is written about them and have a voice in their daily lives.

People are supported to be healthy. We saw a person had been assisted to attend a GP appointment as they were feeling unwell. We saw from personal plans that people access health care professionals' advice as required and in a timely way. People have been supported to stay as well as possible throughout the Covid pandemic and enablers have followed Public Health Wales guidance. We were asked about our Covid status prior to access to the house we visited. We saw evidence of people accessing respite care and tailored care for specialist needs in personal plans and from conversations with enablers and the service manager.

People are protected from abuse and neglect. The service manager visits houses regularly to provide support to people and enablers and ensures outcomes are met. Enablers spoken with said the manager was contactable by phone also and are supportive. The service reports any incidents to Care Inspectorate Wales (CIW) and local authorities in an appropriate, timely manner.

## Environment

We do not report upon the environment theme in people's private homes.

However, the enablers have up to date home insurance on file and updated fire risk assessments.

The service's offices are subject to Gwynedd Local Authority risk assessments for health and safety and fire safety protocols.

## Leadership and Management

The service has governance arrangements in place for the smooth operation of the service. The manager stated she is well supported by the RI via telephone and information technology. However, the RI's quality report and physical visit to the service, to speak with staff and people using the service is now due. This is to ensure people receive high quality care and are enabled to achieve their chosen outcomes.

The service has robust selection procedures for the selection of enablers. Pre-employment checks are in place to ensure enablers are suitable and appropriate to work with vulnerable adults. Enablers are given frequent training and supervision to help them in their work. The manager visits people and enablers regularly to ensure the smooth running of the scheme and provide support, as necessary.

The Statement of Purpose is available for people using the service. This explains the service they can expect in the scheme, the structure of management and contact details for key personnel. The document also explains how people can raise a complaint should they wish to do so.

### 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
------------	---------	--------



N/A	No non-compliance of this type was identified at this inspection	N/A
-----	--	-----

**Date Published** 23/08/2022