



Inspection Report on

Gozian Healthcare Ltd.

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Date Inspection Completed

12/04/2024

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About Gozian Healthcare Ltd.

Type of care provided	Domiciliary Support Service
Registered Provider	Gozian healthcare LTD
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	13 January 2023
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

Since the last inspection, a new manager and deputy manager have been appointed. The responsible individual (RI) and manager are working together to develop the service. The RI regularly visits the service to keep well informed. The quality assurance arrangements need to be strengthened to ensure the quality and safety of the service is audited and evaluated. Care staff told us the management team are, “*responsive, supportive and they communicate well*”. People benefit from care staff that feel well supported and trained for their role.

People are complimentary of the care and support they receive. The care staff are always kind, caring and compassionate. People are able to raise a concern and feel this would be acted upon. The service values the importance of seeking people’s views to make improvements and celebrate their successes. Most people’s personal plans need to be updated to accurately reflect their needs and any associated risks. People receive the right medication and records are complete. A reliable service is provided but there needs to be improved oversight of the management of calls.

Well-being

People's views are important to the service. People are given the opportunity to share their views and preferences before they commence the service to help develop their personal plan. People are put at risk because the majority of personal plans and assessments are not person centred and the care staff may not be aware of any risks. The manager gave assurances that people would be given the opportunity to contribute to their reviews. The RI regularly contacts people to provide feedback about their experiences of using the service and any aspects they would like to improve.

The service supports people's health and wellbeing, but further improvement is required. Care staff are well trained to understand the needs and conditions of people they support. We found the care staff report concerns and changes in people's health. The service actively links with other key health professionals when needed. People receive medication at the right time from competent care staff. Although people tell us that they receive a reliable service, records show that they often do not receive the duration of their calls. The manager gave assurances they will review call times and there will be improved oversight of care visits. Despite this, the daily care records are maintained to evidence care is provided to meet people's personal outcomes.

People are safe and protected from abuse, neglect, and harm. This is because care staff know their responsibilities with regard to keeping people as safe as possible. Care staff are confident their manager would take the necessary actions and report any concerns to relevant professionals. Care staff have completed training in safeguarding. People can be confident they are supported by staff who undergo a range of recruitment checks prior to the start of their employment. We found ongoing training ensures care staff are sufficiently skilled to provide good quality care and support. A range of policies are in place to promote good practices. Relationships between people and those supporting them is good. People told us the care staff are, *"courteous, caring and communicable."*

People can be assured that there is a committed management team which is taking steps to develop the service. The care staff told us the management are *"helpful, responsive and is always a listening ear"*. There is a good working relationship between the team and effective communication. A care worker said, *"Management takes good care of our welfare"*. There is lack of internal reviews and audits in place to identify any patterns/trends in care documentation and direct care to ensure lessons are learnt. There are detailed policies and procedures in place for care staff to follow. The staff are well trained and feel supported. A care worker told us *"There are opportunities for continuous development to enhance my skills and improve person centred care"*.

Care and Support

There is information available to inform people about what they can expect from the service. People receive a written agreement prior to the commencement of their care. We found many compliments have been received commending the company for receiving good care and support. People told us that they know how to raise a concern and are confident that this will be acted upon. Care staff understand the importance of their responsibilities with regard to keeping people as safe as possible and they have all received safeguarding training. The safeguarding policy is being updated to reflect current guidance. Accidents and incidents are reported and appropriate action is taken by care staff to protect people.

The service does not provide an 'Active Offer' of the Welsh language. An individual who uses the service communicates in Welsh and staff are only able to communicate with them using basic phrases. The RI intends to develop a Welsh language policy, including bilingual information.

The manager confirmed that Initial assessments are completed to ensure the service can meet people's needs prior to offering support but we saw no written evidence of this. Personal care plans and risk assessments cannot always be relied upon to inform staff how people wish their care to be delivered and the associated risks. We found instances when key care information was inaccurate or absent, despite care staff being expected to support people for some time. However, daily care notes contained a good level of detail and people we spoke with, confirm the care staff are delivering the support as needed. People are not given the opportunity to contribute to their reviews. This is an area for improvement and the manager is already taking steps to ensure people's views and preferences are known.

People tell us they receive a reliable and responsive service. A representative told us "*My wife is benefiting from receiving the service*". We found the same staff rostered to care for people over a period of time as reasonably practicable. This means people get to know those caring for them, and also staff get to know people well. People told us "*The staff are great and I look forward to chatting to them*". However, call records show that people are not receiving their full amount of call time as there is inadequate travel time in between calls. This is an area for improvement and we expect action to be taken. Nevertheless, people tell us that the support received is meeting their personal outcomes and care staff leave when they have finished the support. The daily care records confirm that the care and support is provided to meet people's personal outcomes.

People receive medication at the right time. There is a detailed medication policy in place which is being updated. Care staff are trained to administer medication and their competency is assessed, but this should be continually assessed to ensure practice remains safe. The manager gave assurance that medication audits will be used to identify

any patterns/trends for lessons learnt. The service benefits from a good relationship with health professionals and we found they report concerns appropriately which is positive.

Leadership and Management

Since the last inspection a new manager has been appointed and they are suitably qualified and registered with the workforce regulator. A new deputy manager was appointed a few months ago and the team are working closely together to develop the service. The manager feels supported by the RI and they meet on a regular basis. The RI provides the manager with formal supervision which is recorded. The care staff described the manager and deputy as “*approachable and responsive*”. The care workers told us that the management provides “*Quick responses*” and “*There is always an open door*”. The manager and care staff told us that “*communication is good and they listen*”.

The RI visits the service on a regular basis to keep well informed. There are quality assurance arrangements in place to consult with people through the RI visits and feedback surveys. There were positive responses from people and their representatives about the service they receive. The RI intends to seek the views of care staff and other stakeholders to identify their strengths and areas to improve. The RI produces a quality-of-care report which is important to evaluate the quality and safety of the service, but this report can be further improved. The RI and manager recently developed auditing tools to ensure they regularly analyse and evaluate key areas of the service. We found that if the audits had been in place at the time of inspection, this would have identified areas that required action to prevent repeated issues. There are detailed policies and procedures in place for care staff to follow.

Care staff are appointed following a safe recruitment process. The care staff personnel files contain all the information required to ensure they are fit and safe to work at the service. Induction and training are delivered both online and face to face. New care staff receive a period of induction where they accompany more experienced staff. The manager assured us that their competency will be assessed to make sure care staff have the knowledge they need to work safely and independently. We found that there is a varied selection of training available to help care staff understand the needs of people they support. There is a training room available in the office for practical training. Care staff feel knowledgeable and skilled in their roles. When appropriate, the care staff are registered with Social Care Wales (SCW) which evidences staff hold the right values, skills, and training to work in the care sector. Care staff are given the opportunity to work towards completing a care qualification suitable for their role, the manager needs to maintain oversight to ensure progress is made. The care staff told us there is good teamwork and they would recommend the service. There are now arrangements in place to ensure care staff receive the opportunity for regular supervision and appraisal. This is important to discuss any issues and reflect on their general performance and development.

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
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15	Personal plans to be updated to accurately reflect people's care needs and identify associated risks.	New
41	A schedule of visits must ensure there is sufficient travel time for care staff to travel in-between calls	New
17	People did not have access to their care planning documentation. There was no guidance within service user guides / agreements on how to access records There was no evidence that arrangements for accessing documentation was discussed at assessment / service commencement.	Achieved
34	Staff training requires increased oversight. Staff had gaps in some fundamental care training. Staff had not been registered with SCW the workforce regulator. Staff were not enrolled on a QCF	Achieved
35	35 (2) (d) full and satisfactory information or documentation, as the case may be, in respect of each of the matters specified in Part 1 of Schedule 1 and this information or documentation is available at the service for inspection by the service regulator; There was missing information in relation to safe staff recruitment in the following 2 areas , Two written references, including a reference from the last employer, if any. A full employment history, together with a satisfactory written explanation of any gaps in employment.	Achieved

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