Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

G.H. Supported Living Limited

41a, Llethri Road, Llanelli, SA14 8EY

01792465435

The inspection visits for this service took place between 10/08/2026 and 11/08/2026

Service Information:

Operated by:	G.H. Supported Living Limited
Care Type:	Domiciliary Support Service
Provision for:	Supported Living
Registered places:	0
Main language(s):	English
Promotion of Welsh language and culture:	The provider makes an effort to promote the use of the Welsh language and culture or is working towards a bilingual service.

Ratings:

Well-being	Good
Care & Support	Good
Leadership & Management	Good

Summary:

Well-being is rated as good because people are supported to live safely, make choices and maintain independence. Feedback was consistently positive, with people saying staff are "*great*," *caring and understanding*," and that they feel safe, respected and involved in decisions about their lives.

Care and Support is rated as good because people receive personalised, outcome-focused care that reflects their needs and preferences. Care records evidenced effective assessment, planning, risk management and review processes. People and relatives spoke positively about the quality of support, and safeguarding, medication and infection control arrangements provided assurance that people are protected from harm.

Leadership and Management is also rated good as the service is led by an experienced Responsible Individual (RI) and Registered Manager (RM) who provide regular oversight. Staff described leadership as supportive and said they felt valued and well supported. Recruitment, supervision and training arrangements are effective, and previous compliance issues had been addressed. However, quality assurance systems would benefit from clearer audit arrangements, stronger oversight of improvement actions and improved training compliance in some areas.

Overall, people experience positive outcomes, receive good quality care and support, and are supported by a stable workforce with effective leadership. Minor improvements are needed in governance arrangements and the Welsh language active offer.

Findings:

Well-being — Good

People are supported to live safely, maintain independence and have control over their daily lives. Feedback from people using the service was consistently positive, with individuals describing staff as *"great,"* "*caring and understanding"* and reporting good relationships with staff. People said they felt safe, are treated with dignity and respect, and are involved in decisions about their care and support.

People benefit from a person-centred approach that promotes choice, independence and positive risk-taking. Records and feedback demonstrate that people are supported to make decisions, maintain relationships, access community activities and pursue interests important to them. Individuals describe being supported to go shopping, socialise and participate in activities of their choosing.

Strengths include positive risk management, effective safeguarding arrangements and support that enables people to remain connected to family, friends and their local communities. People report feeling safe and there were no open safeguarding concerns, notifications or compliance issues identified during pre-inspection analysis. Relative feedback was also positive, with one family member reporting they had "*no complaints at all*," felt their relative is safe and would recommend the service.

The service demonstrates a commitment to ensuring people's voices are heard and respected. Care planning records evidence people's involvement in decisions affecting their lives and support arrangements. Environmental improvements, including redecoration and new furnishings, had also enhanced people's living environments. RI oversight identified positive outcomes for people, good record keeping and effective management of incidents and risks.

No significant concerns were identified in relation to people's well-being. However, the service remains at a "working towards" stage in relation to the Welsh language active offer. Information was not available bilingually; bilingual signage was not in place and there was limited evidence of Welsh language provision. While this had not adversely impacted the people currently using the service, opportunities remain to further strengthen the Welsh language offer.

Overall, evidence demonstrates that people experience positive well-being outcomes, feel safe and respected, maintain control over their lives and receive support that promotes independence, choice and community inclusion.

Care & Support — Good

People receive personalised care and support that helps them achieve their outcomes. Records reviewed demonstrate detailed assessments, care plans, risk assessments, regular reviews and evidence of people's involvement in planning and reviewing their support. Care was monitored appropriately and referrals to health and other professionals were made when required.

People spoke positively about the service and consistently said they felt safe, respected and involved in decisions about their lives. Comments included, "*They spoil me, they are great*," "*Brilliant, staff are caring and understanding*," and "*I get on well with them."* People confirmed staff treated them with dignity and respect and supported them to maintain independence and access community activities.

Case tracking evidenced person-centred care, clear outcome-focused planning, up-to-date risk assessments and effective monitoring of health and wellbeing needs. Records demonstrate timely access to healthcare professionals, support to maintain relationships, and opportunities for people to participate in activities important to them.

Relative feedback was positive, with one family member reporting they had *"no complaints at all,"* and felt their relative is safe and would recommend the service.

Medication management, safeguarding arrangements and infection prevention systems provide assurance that people are protected from harm. Records showed incidents, including falls, had been appropriately managed, reviewed and audited.

There were no significant concerns identified regarding the quality of care and support provided. However, assurance would be strengthened by further development of governance and quality assurance processes to better demonstrate how audit findings, training compliance and quality information are analysed and used to drive continuous improvement. These issues had not adversely impacted outcomes for people.

Overall, people receive safe, outcome-focused care from staff who know them well and support them to remain independent, make choices and achieve positive outcomes.

Leadership & Management — Good

People benefit from a well-led service with an experienced RI and R M who provide regular oversight through audits, supervision, quality reviews and RI visits. Governance arrangements support positive outcomes, safety and person-centred care. RI visits evidenced good record keeping, effective oversight, compliant health and safety arrangements and positive outcomes for people, with no significant concerns identified.

People are supported by a stable and experienced workforce. Recruitment processes, supervision, appraisal arrangements and training systems are in place and staff files reviewed are compliant. Staff consistently describe management as supportive, approachable and responsive. All staff who provided feedback would recommend both the service and working there.

Feedback from people using the service, relatives and staff was overwhelmingly positive. People said they feel safe, respected and supported to make choices, while staff highlighted strong teamwork, a positive culture and effective leadership. Quality assurance processes and RI oversight have contributed to service improvements, including environmental upgrades and ongoing monitoring of outcomes for people.

Leaders have demonstrated evidence of improvement since the previous inspection. Previous non-compliance had been addressed and there was no outstanding compliance issues identified. Governance systems, staffing arrangements and oversight mechanisms are functioning effectively and supporting positive outcomes for people.

However, some quality assurance arrangements require strengthening. The quality assurance policy does not fully specify audit ownership, frequencies, escalation processes, trend analysis or how improvement actions are tracked and signed off. In addition, some training compliance gaps remain, particularly in safeguarding update training. While these issues had not impacted outcomes for people, stronger governance documentation and clearer quality monitoring arrangements would improve assurance of continuous improvement and learning.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

CIW has no areas for improvement identified following this inspection.

CIW has not issued any Priority action notices following this inspection.

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