Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Galluogi Potens Wales

Plas Pentwyn, Castle Road Coedpoeth, Wrexham, LL11 3NU

01978758854

www.potens-uk.com

The inspection visits for this service took place between 08/01/2026 and 16/01/2026

Service Information:

Operated by:	Potensial Ltd
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:

Galluogi Potens Wales provide a mixture of outreach support and supported living provision, in Wrexham, Denbighshire and Conwy. They support individuals with physical disabilities, learning disabilities and mental health issues. The service has established links within the local communities they work in and ensure people are encouraged to join social groups, volunteering and learning opportunities in their area to suit their individual interests.

Support staff are committed to supporting people to achieve good wellbeing outcomes and encourage them to pursue their interests and goals. People receive a good care and support service because support staff know them well and have formed positive and friendly relationships with them, based on trust.

Management has an open-door policy and ensures people and staff are listened to. Whilst there are some issues with the demands and pressure upon team leaders at present, resulting in an area for improvement, people are always prioritised and good oversight of the service ensures people continue to achieve good wellbeing outcomes.

The service had an area for improvement at the last inspection for the delivery of care and support which has now been met.

Findings:

Well-being — Good

People are supported to make their own choices and to maintain as much independence as possible in their day to day lives. They are achieving good wellbeing outcomes in line with their wishes, such as accessing volunteering and paid employment roles. They are encouraged to participate in activities which empower them and give them a voice, such as volunteering on peer education projects and interviewing new members of staff. Support staff ensure people can participate in leisure activities and holidays of their choice. They also support people to manage daily living tasks, assisting them to do the things they are able for themselves. We met one person who had been supported to decorate their home. In one area, a pet visiting service has been introduced and people are benefitting from contact with pets belonging to members of staff. This is helping increase some people's activity levels as they enjoy walking with the company of a dog. Support staff review and adapt people's support to meet fluctuating needs, for example, when recovering from a period of illness. Documents can be produced in Welsh, and the service user guide is available in Welsh. The service provider has recently started a Welsh champions group, encouraging staff to access Welsh language courses.

People are supported to voice their concerns effectively, and staff listen attentively when they do so. People told us they are confident to raise concerns. One person told us, "*Staff are brilliant – always here for me*." The service provider liaises with external agencies when concerns are identified and engages in safeguarding processes to protect people. Support staff know people well and follow personal plans to support and reassure people if they are agitated or distressed.

People are exceptionally well supported to make friends and engage in their local community. People have formed kind and caring friendships with the people they live with. Relatives told us people are supported to maintain relationships with friends and family and have good communication with the service. Support staff know people well and many people have trusting and caring relationships with them. One person told us, "*Staff are very good to talk to and good at solving people's problems and offer great advice."* Support staff encourage people in different houses to meet and interact. In one area, people have formed a community across different houses and regularly meet up to enjoy meals together.

Care & Support — Good

Support staff ensure people's personal plans contain clear and detailed information about them, and their individual likes, dislikes, interests, and personalities. The service provider is introducing "about me" videos which consist of interviews with the people they support and are incorporated into their personal plan. If people do not feel confident to be filmed, they can co-produce a slideshow of their interests using photos and clip art. This strong, collaborative approach allows people the opportunity to be fully involved in the information they would like their support staff and other professionals to know about them. Personal plans are strengths based, enabling support staff to promote and encourage their independence as far as possible. There is clear information on people's preferred daily routines. People's communication and positive behaviour support plans contain detailed information for support staff to follow. This means they know how to best support people if they become agitated or distressed. Personal plans also contain clear person-centred outcomes, describing the goals people would like to achieve. Personal plans and risk assessments are reviewed regularly and in response to any changes. There was an area for improvement at our last inspection relating to the delivery of care and support which has now been met.

People are safe from the risk of harm and abuse. Support staff are trained in safeguarding and are confident to raise concerns. They have good working relationships with health and social care professionals, and ensure people are supported to access health care appointments when required. We saw support staff deliver care and support in line with people's personal plans, ensuring any healthcare monitoring is completed. A health care professional we spoke with told us they have effective communication with support staff and their advice is followed. There are personal emergency evacuation plans and missing persons documentation in place which can be followed in an emergency.

People receive their medication as prescribed in line with national guidance and the service provider's medication policy. Medication is stored securely in locked boxes in people's rooms. Support staff assist people to self-medicate if they can do so. There are clear instructions in personal plans for the ordering and collection of prescriptions. We found medication administration records are accurately completed and there are protocols in place to monitor the use of 'as required' medication. This means support staff monitor the use of this medication for its effectiveness and side effects.

Leadership & Management — Good

Permanent staff undergo routine and regular vetting checks to ensure they are suitably fit to work in the service and are required to register with Social Care Wales, the workforce regulator. New staff are required to undergo disclosure and barring service (DBS) and reference checks. Support staff complete regular training and many staff have up to date core training. They also have access to specialist training to enable them to meet individual needs. Support staff told us there are good training opportunities with the service and they can request additional courses. They receive regular supervision and observations with their line manager. We found team leaders are currently struggling to balance the demands of their management responsibilities alongside fulfilling their duty on the rota. Staff at all levels are committed to delivering a good quality service to people and prioritise people's needs. As a result, this is not currently affecting outcomes for people. However, when there are concerns or extra demands on the service this places increased pressure on team leaders and management. There is a risk this will affect people if it is not addressed. We have issued an area for improvement and expect the service to take action.

The service provider's oversight and governance arrangements foster a positive and compassionate culture in the service. Staff consistently told us management are approachable and supportive. They told us they have positive relationships with team leaders and managers, and any ideas are listened to and put into practice where possible. The manager and area manager complete regular audits and 'leadership walkarounds' to ensure the service is running smoothly. Clear records are maintained of any safeguarding issues or concerns, and the service works openly with external professionals to ensure issues are addressed. The responsible individual (RI) conducts regular visits, ensuring they speak with a selection of people and staff. They review a selection of records as part of their visits. They also put in place action plans where they find improvements could be made. We found these have been effective for the service in making changes and improvements. A six-monthly quality of care report is also completed. This considers people's individual achievements and celebrates what is working well, as well as identifying areas for development.

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.

The table(s) below show the area(s) for priority action and/or those for improvement we have identified.

Summary of Areas for Improvement	Date identified
We found there is a risk of poor outcomes for people as senior staff are struggling to fulfil management responsibilities.	08/01/26

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

Welsh Government © Crown copyright 2026.
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.gov.uk
You must reproduce our material accurately and not use it in a misleading context.