Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Seashells Care and Support Services

21 Wynnstay Road
Colwyn Bay
LL29 8NB

Date Inspection Completed

14 January 2025.

17/01/2025

Welsh Government © Crown copyright 2025.
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.

About Seashells Care and Support Services

Type of care provided	Domiciliary Support Service
Registered Provider	Seashells Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	11 July 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

Seashells Domiciliary Support service provide home care across several regions in North Wales. People spoken with are happy with the care they receive and praise the care staff for their work and support. People told us communication with the office is good and they feel able to influence the care they receive. They said staff treat them with dignity and respect and they receive care from the same care staff who are familiar with their needs. Care staff spoken with said they receive good training and support to help them in their role. Policies and procedures are updated and are available for staff to enable good practice. Managerial structures are in place to provide support and over-see staff to ensure a quality service. The Responsible Individual (RI) audits the quality of service given to people and produces bi-annual reports recording the findings as per the legislative requirements.

Well-being

People feel they have a voice and can influence the service they receive. People and their families told us they receive good and appropriate care during their allotted visit times. They said they are involved in their personal plan reviews and can express their views. People told us there is good communication with the office and contact regarding their care is good. They said the service is as flexible as possible and visits can be organised around medical appointments and social events to support them to be as independent as they are able. People told us they are supported by a consistent care staff team who know their needs well.

People feel care staff treat them with dignity and respect. One person said *"There's good communication, I'm included in regular care reviews. I can bring up any issues and feel I have a voice. The length of visits are good, they get done what I need of them. Care staff treat me with dignity and respect. I get the same staff, so they know me well. Communication from the office is generally good."* Other people cared for by the service said, *"We get the same carers; they know us well. We get involved with care reviews and feel we have a voice. We can phone the office if there are any problems, there's good communication. We get treated with dignity and respect."* A person's family said, "*They give them a choice if they want to get up or not. They treat us with dignity and respect. We get the same carers who know us well. There is good communication with the office."* They called the service "*Marvelous*".

Care staff told us they are aware of local safeguarding processes to keep people safe from abuse and neglect. We saw this training is included on induction and in mandatory training. Care staff spoken with said senior staff are approachable should they have any concerns about a person's care.

Care and Support

Care is planned according to people's individual needs. People are assessed prior to them receiving a service to ensure the service can meet their needs. Care records show people are involved in their care from the onset of the service. Personal plans are regularly reviewed to ensure they remain fit for purpose and people are involved in their reviews and can influence their care. People's preferences are recorded in the personal plans including their first language choices. People said they have choices regarding their care to ensure their desired outcomes are met.

People feel their home and property are respected. Risk assessments, including fire evacuation, are included in the personal plans and are reviewed as required. There are general risk assessments for the home in place to ensure the safety of the person and care staff. People's preferred routines around the home are recorded to ensure staff are aware and remain respectful of the person's needs and home.

Care staff receive medications training and competency testing to enable them in their daily role, this is reflected in training records. Care staff told us training is good as is the support they receive from senior staff. People spoken with said they are given appropriate aid with their medications.

The service reports any incidents, accidents or safeguarding issues to Care Inspectorate Wales (CIW), and local authorities appropriately. Senior staff have processes in place to investigate and learn from safeguarding issues to ensure a continually improving service. Care staff receive safeguarding training and are aware of local procedures should they be concerned about people's safety.

Environment

We do not assess the environment in domiciliary care services as care is provided in people's homes. However, we saw utility checks for the office have been conducted and are up to date. Fire tests and drills are conducted regularly to ensure office worker's safety. Liability insurance for the service is within date. The hoist and equipment used for care staff training are serviced as per requirements.

Leadership and Management

There is good governance in place to ensure the smooth running of the service. There is good managerial structure and each region served by the service has a team of supervisors and managers to support people and care staff. The RI conducts audits of the quality of the service and produces reports detailing the results and any actions taken. This is compliant to regulatory requirements. Senior staff state they receive good support from the RI to enable them in their role.

Staff recruitment and retention are good. We saw from personnel records, checks are in place to ensure staff are appropriate to work with vulnerable adults, processes are in place to ensure these remain in date. We saw examples of diversity in the recruitment process. Care staff are supported to remain registered with their governing body to ensure good practice and legislative requirements. Records show care staff training and supervision are within date to enable them in their daily role. Care staff spoken with said they are happy working for the service, and they feel well trained and supported. Care staff spoken with said, *“It’s a good company to work for, I had a good induction for the post. I have good training and supervision. I feel people have good care and can stick to their individual routines. The managers are approachable,*” and “*The best manager I’ve worked under, very approachable. I have regular training and supervision for the role. I feel people have good care and can stick to their individual routines.”*

The provider has not advised CIW of any financial difficulties within the service. Care staff numbers are good, and training and equipment are procured for care staff’s daily work and to keep people safe.

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.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- Inspection report survey

If you wish to provide general feedback about a service, please visit our Feedback surveys page.

Date Published 05/03/2025