Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

JSJ Supported Living Ltd

Unit 53 Singleton Court Business Centre, Wonastow Road Industrial Estate (west), Monmouth, NP25 5JA

01600716911

The inspection visits for this service took place between 06/10/2026 and 19/10/2026

Service Information:

Operated by:	JSJ Supported Living Limited
Care Type:	Domiciliary Support Service
Provision for:	Care and support for adults
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	Requires Improvement

Summary:

JSJ Supported Living Ltd provide care and support to adults in their own homes. People and relatives praised the service, most describing them as excellent. Personal plans are in place, and regular reviews occur. Feedback is sought, considered and analysed. People have developed positive relationships with their consistent care staff. ‘Well-being’ is good

Personal plans are person centred and the service has recently reviewed all risk assessments and improved these to ensure they are accurate and reflective of the individual. Medication requires improvement but the service has been responsive to our feedback by implementing systems and improving records to ensure these are in line with policy and guidance. Care staff and people are confident in the service to respond and take action when needed. Overall ‘Care and Support’ good.

There is a Responsible Individual (RI) and registered manager in position, who care staff and people know. We saw regulatory matters identified at the previous inspection have not been addressed, we found further areas of improvement regarding staffing. However, the service is responding well to our feedback and implementing new and improved systems to maintain oversight and ensure care staff are well skilled, trained and supported in their roles, in addition to ensuring they are appropriately registered. ‘Leadership and management’ requires improvement.

Findings:

Well-being — Good

People are treated with dignity and respect. Personal plans identify some outcomes such as 'remain living at home' and we discussed with the RI ways to enhance these to consider personal goals and aspirations in addition to health needs. People have control over their day to day lives and are aware of their rights. We saw information is available to people in their plan, and people told us they know how to find information if they need it. We saw the service attempts to capture feedback, but this is, at times, is inconsistent. We discussed with the provider ways to clearly evidence reviews and feedback.

Some people receive social support to enable them to access the community. People have built good relationships with their consistent care staff. They told us they appreciate them and look forward to seeing them. One person said, *"They have a chat and a laugh."* People told us they don't always know who's coming to their home as they do not receive rotas; we shared this with the RI who provided assurances action would be taken regarding this.

People's well-being and safety is considered by identifying and managing risks. Risk assessments are in place; and the service has taken action to ensure these are consistently person centred. The service is working on driving improvement in relation to medication to reduce risk and promote independence. People told us they knew how to raise concerns and everyone we spoke to knows who the manager and RI are. People and relatives are confident in the care staff and management team. One relative said, *"Absolutely amazing, lovely team of people, really keen to help."*

The service ensure they ask people if they would like their service in Welsh or English and we saw this information reflected in personal plans. They told us they make changes where appropriate to meet people's communication needs, and we heard some examples of care staff learning basic phrases to aid in communication. Welsh language courses are offered to staff. There are no individuals who speak Welsh currently using the service.

Care & Support — Good

Personal plans include some detailed and person-centred information to aid care staff in understanding the person and their history. People's interests, past life, likes and dislikes are reflected. There is a person-centred bibliography which is very detailed and includes the person's history aiding staff in understanding them. Plans include important information such as the person's allergies, GP and social worker. A weekly summary shows the basic details of care call times and what support is required, providing quick and easy access for care staff. People's plans consistently include the persons routine and specifics regarding how they want their support and provide intricate detail such as how many sugars they like in their tea. The service is ensuring they are conducting thorough reviews to guarantee plans are consistent. People and relatives praised the service, with everyone telling us they are happy. Relatives describe the service as *"Excellent"* and told us, "*They're looking after him,"* and *"No complaints at all, really good."*

We saw evidence to show personal plans are regular reviewed and there is a good system in place to ensure office records are reflective of those in the community ensuring care staff all have access to up to date information. We found most people receive reviews and people know how to use their plans to access information. However, some people told us no one from the service goes through the plan with them. We discussed the need to ensure the personal plans are reviewed and not just the person's satisfaction with their care and support. Accident and incidents are recorded and clear actions taken following falls. Care staff complete and ensure daily records are in place, and these provide a good narrative of people's daily outcomes and general well-being.

People receive their medication as prescribed. However, we found systems and records are not in line with the services policy nor national guidance. The service medication policy needs to be reviewed to ensure that it can guide staff and managers. The service is not recording 'When required medication' in line with national guidance and medication administration charts lacked detail to ensure care staff can cross refence information with prescribed medicine. Audits are completed but these fail to accurately consider where good standards are maintained. Care staff receive medication competencies, but these are lacking in detail and show limited evidence to justify care staff are competent. The service took swift action and are implementing new systems and records to improve the safe management of people's medication, and we will consider this at the next inspection.

Leadership & Management Requires Improvement

There is an RI in position and a manager who is appropriately registered with Social Care Wales, the workforce regulator. They oversee the day to day running of the service alongside senior care staff. We discussed with the RI the need to consider service structure to ensure roles and responsibilities are clearly documented and staff are accountable. The service has policies in place, but these require strengthening, this is because they do not always provide clear information for care staff to guide them in line with national guidance. The RI completes their regulatory duties, and gains feedback from care staff and sometimes people during their service visits. Feedback from people is considered and analysed, staffing levels are reviewed and concerns and improvements identified. However, we found several areas of improvement to be ongoing since the last inspection, and these had not been considered nor addressed. Audits of quality are in place, and the service is working on improving their processes to better assess quality.

We found some areas requiring improvement in relation to recruitment, vetting and support and development for care staff. The service was very responsive to our feedback and took immediate action to start addressing these concerns. They are implementing HR audits and taking action to make improvements in addition to registering all care staff with Socal Care Wales. Care staff contracts need to be improved to include important information. Care staff receive an induction, but these need improvement to ensure they reflect national guidance and requirements. This remains and area for improvement and we expect the provider to take action to address this. The service operates by employing care staff on zero hours contractual arrangements. Whilst some staff told us these suit their circumstances, it does not apply to all. We found the service has not reviewed these contracts as required by regulation. This remains and area for improvement and we expect the provider to take action to address this.

Care staff told us they feel well supported by management, with one saying, *“They are the most supportive, they go above and beyond for all clients and staff.”* Care staff told us they enjoy their roles and get everything they need. However, we found supervisions have not been completed consistently every three months as required, with some showing significant gaps. Care staff receive training which covers areas such as medication, dementia and safeguarding; however, training needs strengthening to ensure care staff understand people’s individual need. Action is being taken to allocate care staff to person-centred training. This is an area for improvement, and we expect the provider to make improvements. The service provider has implemented systems for scheduling care worker visits, and we were assured sufficient travel time would be allocated to avoid potential late visits.

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
Peoples health may be at risk if the provider does not ensure arrangements for medication are safe and effective	06/10/26
People may be at risk if care staff do not receive the appropriate support and development to ensure they remain skilled and competent	06/10/26
People could be at risk of harm if recruitment practices are not robust and full vetting checks are incomplete on all staff working at the service	10/10/24
The provider must ensure care staff are provided with the choice of alternative contracts to support staff retention and to support people to receive continuity of care from a supported and valued care team	10/10/24

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

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