

Consensus Support Services Limited

The Gables

Inspection report

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Ratings	
Overall rating for this service	Good •
Is the service safe?	Good •
Is the service effective?	Good •
Is the service caring?	Good
Is the service responsive?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

The Gables is a care home that offers nursing and personal care to 16 adults who have complex needs. There were 11 people living there when we visited.

People's experience of using this service

- People showed they were happy living at The Gables, they felt safe and liked the staff who looked after them. The provider had systems in place to manage risks and keep people safe from avoidable harm. The provider employed enough staff to meet people's physical, social and emotional needs. Staff gave people their prescribed medicines safely. They followed good practice guidelines to help prevent the spread of infection. Equipment was available so that staff could support people in a safe way.
- Staff had the skills and knowledge to do their job well and knew each person's preferences. Kitchen staff cooked a range of nutritious meals to satisfy everyone's taste and external healthcare professionals helped people maintain their health. Staff supported people to make decisions in all aspects of their lives.
- People and staff had warm, caring relationships with each other. A member of staff said, "We do so much more than just personal care. We're helping people live their lives. It feels like a family all looking after each other." A relative described the staff as, "Professional, very caring and passionate about what they do." Staff respected people's privacy and dignity and encouraged independence wherever possible.
- People were fully involved with staff in deciding what activities, outings and entertainment each person wanted to do. People were part of the local community. People knew how to complain if they wanted to and were confident the registered manager would resolve their issues.
- Everyone praised the registered manager who gave staff strong leadership and managed the home well. Staff understood the provider's ethos and values and made sure that people's lives were as comfortable and fulfilling as possible. People, their relatives and other stakeholders had opportunities to comment about how the home was run. The quality-monitoring system included checks the staff and provider did to make sure that they identified any necessary improvements. A member of staff told us, "I like [registered manager]; everyone likes her. She is so passionate [The Gables] is her baby and she knows what she's doing."

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

At the last inspection we rated this service Good (report published on 22 June 2016).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor intelligence we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we might inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Good •
The service was safe	
Details are in our Safe findings below.	
Is the service effective?	Good •
The service was effective	
Details are in our Effective findings below.	
Is the service caring?	Good •
The service was caring	
Details are in our Caring findings below.	
Is the service responsive?	Good •
The service was responsive	
Details are in our Responsive findings below.	
Is the service well-led?	Good •
The service was well-led	
Details are in our Well-Led findings below.	



The Gables

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We planned this inspection to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team

We selected this service to be part of our national review, looking at the quality of oral health care support for people living in care homes. The inspection team included a dental inspector who looked in detail at how well the service supported people with their oral health. This includes support with oral hygiene and access to dentists. We will publish our national report of our findings and recommendations in 2019. The dental inspector's findings are not included in this report.

One inspector carried out the inspection.

Service and service type

The Gables is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and we looked at both during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We carried out the first inspection visit, unannounced, on 18 December 2018. We returned, announced, on 6 February 2019 to finish the inspection. The delay was due to the availability of the inspector and the registered manager.

What we did

Before the inspection visit we looked at information we held about the home and used this information as

part of our inspection planning. The information included notifications. Notifications are information on important events that happen in the home that the provider must let us know about. In March 2018 the provider had sent us a completed provider information return (PIR). The PIR is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

During our inspection we saw how the staff interacted with people who lived at The Gables. We spoke with two people who lived there. We spoke with six members of staff: three care workers; a nurse; a maintenance person; and the registered manager.

We looked at two people's care records as well as other records relating to the management of the home.

After the visit to the home, we contacted one person's relatives, three external healthcare professionals and a business professional who met people regularly. The person's relative and one professional responded and we have included their responses in the report.



Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

Good: People continued to be safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- One person was able to tell us that they felt safe at The Gables. They said this was because staff always came quickly if they needed them. We saw, from other people's body language and facial expressions that people felt comfortable and safe with the staff.
- The provider had systems in place to protect people from abuse and avoidable harm. Staff had received training and understood what they needed to report and to whom.

Assessing risk, safety monitoring and management

- The provider had systems in place to assess and manage any potential risks to people. People's complex needs meant that risks were very high for things such as pressure sores, weight loss, skin damage and staff moving them. Detailed guidance for staff in people's support plans and staff training had succeeded in minimising the risks to people.
- The registered manager had obtained any equipment which would support people to stay safe.
- Maintenance staff undertook regular checks of all the equipment in the home to make sure it was safe for people and staff to use. This included checks of the fire safety equipment to ensure it would all function properly in the event of a fire.

Staffing and recruitment

- There were enough staff on duty on the day we visited to meet people's needs, including enabling people to choose what they wanted to do. We noted that staff answered call bells quickly and staff spent time chatting with people.
- All staff worked for the good of the people using the home. The registered manager said, "There's no 'them and us', everyone works together. We all do everything that's why it works."
- The provider's recruitment policy ensured as far as possible that new staff were suitable to work in the home.

Using medicines safely

- Staff continued to manage medicines safely and gave people their medicines as the prescriber intended.
- One person told us that staff supported them well to take their medicines adding, "They've never forgotten to give them to me."

Preventing and controlling infection

- The provider had systems in place to make sure that staff practices controlled and prevented infection as far as possible.
- Staff had undertaken training and were fully aware of their responsibilities to protect people from the spread of infection.

Learning lessons when things go wrong

• The registered manager checked and analysed incidents and accidents and used them as learning opportunities for the whole staff team to try and prevent further occurrences. The registered manager ensured they communicated any resulting changes in staff's practice to the team.



Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

Good: People's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The registered manager fully assessed a person's needs before she offered the person a place at the home. She ensured that staff delivered up to date care in line with good practice.
- Equipment was available to enhance people's care and promote independence. For example, a health/social care professional told us the registered manager had bought a bed for one person, designed to meet their specific needs.

Staff skills, knowledge and experience

- The registered manager continued to support staff's learning and development to enable them to support people effectively. She arranged training from sources such as healthcare professionals and she worked alongside the staff. One person told us, "[Staff] know what they're doing."
- Staff felt well-supported by each other and by senior staff and management. All staff received supervision and attended staff meetings regularly. Staff knew that the registered manager's door was always open. The registered manager told us, "I work alongside my staff to give them the confidence they need to make sure the support we give is of the highest standard."

Supporting people to eat and drink enough with choice in a balanced diet

- Kitchen staff involved people in deciding on the menu and produced a range of nutritious and appetizing food. One person said, "The food is lovely. [The cook] will do me something else if I don't want what's on the menu."
- All staff knew about people's likes and dislikes as well as any medical needs, such as allergies to certain foods or the need for a high-calorie diet. The cook made special meals for people who needed them.
- Staff monitored people's weight and encouraged people to eat and drink in ways that suited the individual. For example, one person liked beer so staff gave them non-alcoholic beer to increase their fluid intake.

Staff working with other agencies to provide consistent, effective, timely care

• Staff worked closely with other agencies such as the local hospitals to make sure that they met people's needs. Care plans included a 'This is me' document, which contained all the information about the person that hospital staff would need to know. This meant that the person's care would continue even if they were unable to explain their needs to the hospital staff.

Supporting people to live healthier lives, access healthcare services and support

- Staff knew when people were not well and involved other healthcare professionals to support people to maintain their health. These included the GP, community nursing team, a chiropodist, dentist and optician as well as specialists relevant to the person's condition.
- One person told us about a wound they had, which the nurses were treating daily. They reported that it was getting better and said, "[Staff are] looking after it properly."

Adapting service, design, decoration to meet people's needs

- The provider had adapted the building for wheelchair access. Everyone had space, indoors and outdoors, to be with other people or be alone.
- The maintenance person had redecorated several bedrooms and other areas of the home. One person who lived there was very good at interior design and had helped people decide on colour schemes for their rooms.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

• Staff knew how the MCA and DoLS applied to their work. They asked people for their consent before they carried out any personal care and they offered people choices in all aspects of their lives. One member of staff said, "We don't assume someone doesn't have capacity [to make a decision]. We give people choices, such as showing people a choice of outfits to wear."



Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

Good: ☐ People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well-treated and supported; equality and diversity

- Most people who lived at The Gables did not use words to communicate. However, we could see that they felt comfortable with the staff, enjoyed their company and had good relationships with them. One person told us, "They're a lovely bunch of carers, laughing and giggling with me." Another person said, "The staff are nice."
- All staff knew each person well and made each person feel that they mattered. One person told us, "They know me inside out. Sometimes they know me better than I know myself."

Supporting people to express their views and be involved in making decisions about their care

- In the PIR the provider wrote, "Staff are required to use Person Centred Thinking and approaches to provide person centred support." We saw this in action and one person told us staff involved them in all decisions about their care. They said, "Staff ask each morning what I want to do: sometimes I choose to have a 'duvet day'. I stay in my room."
- Staff communicated with each person in a way that that person understood best. A grab sheet and communication passport in one person's care records detailed how the person communicated.
- Staff told us they usually had time to sit and chat with people to make sure that each person had everything they needed.

Respecting and promoting people's privacy, dignity and independence

- Staff fully respected and promoted people's privacy, dignity and independence. One person told us, "They cover me up and they knock before they come in [to my bedroom], or yell out."
- Staff encouraged people to do as much as they could for themselves. A relative said, "The care is outstanding. The staff encourage independence as much as possible whilst recognising the clients' needs and wishes."
- The staff team always made visitors and relatives very welcome. They told us that the home was like one big family.
- One person confirmed that staff did not talk about people in front of others and staff made sure that they stored any confidential information about people securely.



Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

Good: ☐ People's needs were met through good organisation and delivery, with some elements of outstanding.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Each person who lived at The Gables had a fully person-centred support plan, which detailed the person's preferences about the way they wanted staff to give them care and support. One person said, "I'm involved in deciding on my care, in my care plan and in the reviews of my care."
- Staff worked closely with people's families to find out as much about the person as they could. This included the person's history, their likes and dislikes and how they wanted to spend their day. A relative said they had had "full participation" in compiling their family member's care plan and in regular reviews. They added, "Communication in this respect is excellent."
- The registered manager showed us photographs to illustrate how much one person's physical and mental state had improved since they came to live at The Gables. This person had been unable to do anything for themselves or make any decisions. Within six months they had improved so much that, even though they did not communicate using words, they had arranged their own review of their care. They now led a full and meaningful life.
- The registered managed had arranged for one person to have their own vehicle. They could now attend hospital appointments with two escorts and staff and their family could take them out.
- Staff ensured that people had enough to do during the day. They arranged activities, outings and entertainment based on what each person wanted to do. They also acted 'on the spur of the moment', such as popping out for coffee or visiting people in another of the provider's services.

Improving care quality in response to complaints or concerns

- The provider had a complaints process, which people, relatives and staff all knew about. They were confident that the registered manager would address any complaints.
- The registered manager had recently investigated one person's complaint. The complaint was not upheld, however, the registered manager worked with the person to try to ensure they would be more satisfied with this aspect of their care in future.

End of life care and support

- The registered manager told us, "We work very closely with outside professionals to give the best end of life care. We make sure that, where we can, [the person] stays with us in their home."
- The registered manager and staff had given people and their families opportunities to discuss the person's end-of-life wishes and she had recorded these in people's care plans. Where relevant, the GP, the person and their family had completed a DNAR (Do Not Attempt Resuscitation) form.



Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

Good: The service was consistently managed and well-led, with some elements of outstanding. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- People were happy living at The Gables. One person said, "I can't think of anything to make life better. I'm happy here." Several people did not communicate with words, so were not able to tell us how they felt about living at the home. However, from their body language, facial expressions and reactions we saw that they were happy and that they enjoyed the company of the staff.
- A relative told us, "My [family member] has lived with several care providers and this business is without doubt the best that they have been involved with." A member of staff said, "I like it here. It feels like a big family and feels really warm and good."
- The registered manager understood that staff needed to feel supported and appreciated. She knew each of them well and encouraged them to talk to her. She helped with their individual situations and was pleased to report that this had led to "a massive reduction in sickness levels."
- People who lived at the home and the staff team had produced a 'Service Vision for The Gables', which detailed the values of the provider and the home. Staff knew they had to give a high-quality, person-centred service, based on these values.
- The registered manage promoted transparency and honesty. She had a policy to openly discuss issues with relevant parties if anything went wrong.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager provided strong leadership and managed the home well. She said, "I lead from the front and do not expect anyone to do any task that I wouldn't do myself."
- People and relatives liked her management style. One person said, "[Registered manager] idolises the home. She's done a lot, she's always thinking about the home, never switches off." A relative stated, "[The management] is outstanding, which is in my view due to the excellent home manager who cares passionately in what she and her staff do."
- Staff were happy and proud to be working at The Gables. They felt they worked well as a team and that the registered manager supported them well. One member of staff said, "[The registered manager] is brilliant. Her door's always open; she makes you feel you're doing your job properly; she encourages you."
- The provider had a quality assurance system in place to ensure that staff continued to give high quality care. The registered manager and the provider's representative carried out a range of audits as part of a continuous improvement plan

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager encouraged everyone involved with The Gables to express their views on a day to day basis about the way they ran the home. A member of staff said, "[Registered manager] will listen and takes your ideas on board."
- The provider sent out an annual survey and ensured the staff team completed any actions that resulted from comments made.
- The Gables was very much a part of the local community. Visitors came to the home and people used local facilities such as shops and the pub.

Continuous learning and improving care

- The registered manager and staff told us that they were always trying to improve. One member of staff told us, "Everyone does their best. We're aiming for perfect but there's always something that can be improved."
- The registered manager was very proud that nominations for several internal and external awards showed that she and the staff team were achieving success. She added, "Recognition doesn't have to be formal: saying "thanks" costs nothing and goes a long way."

Working in partnership with others

• Staff and the management team worked in partnership with other professionals and agencies, such as the GP, other health care professionals and the local authority to ensure that people received joined-up care.