

Mr & Mrs J Boodia

Gables Care Home

Inspection report

Pembroke Road
Woking
Surrey
GU22 7DY

Tel: 01483828792

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Ratings

Overall rating for this service

Good 

Is the service safe?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

About the service

Gables Care Home is a care home which provides personal care and accommodation to people with a mental health diagnosis or a learning disability. It can accommodate up to 16 people and has communal lounge and dining areas. At the time of our inspection 10 people were living at the service.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

People's experience of using this service and what we found

People said they felt safe living at Gables Care Home. They said staff were kind to them and there was always staff around. People said the provider was approachable and they would go to them if they had any concerns.

Staff knew how to recognise and report any safeguarding concerns. Risks to people had been identified and staff worked with health care professionals to help support people to live a good life and receive good care.

We were assured by the provider's infection control processes. We had no concerns about the infection prevention and control practices of staff.

Staff told us they felt supported by the registered manager. They said they worked well together as a team.

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

Rating at last inspection

The last rating for this service was Good (report published 26 May 2018).

Why we inspected

This targeted inspection was prompted following anonymous concerns we received which indicated people may be at risk of receiving unsafe care. This included infection control, the risk of abuse and a poor culture within the service. We made the decision to inspect and examine those risks. We found no evidence during this inspection that people were at risk of harm from these concerns. The overall rating for the service has not changed following this targeted inspection and remains Good.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

At this inspection we reviewed selected Key Lines of Enquiry in the key questions of Safe and Well-Led only and this report covers our findings in relation to those.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Gables Care Home on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme, when we will carry out a fully comprehensive inspection looking at all key questions. If we receive any concerning information we may 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?

At our last inspection we rated this key question Good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question Good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Gables Care Home

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection prompted by anonymous concerns we had received about the quality of care people received. These concerns indicated people may be at risk of harm. During the inspection we looked at some elements of the key questions of Safe and Well-Led. This included risks, safeguarding, infection control and the culture within the service.

Whilst at the inspection, we looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

Inspection team

This inspection was carried out by two inspectors.

Service and service type

Gables Care Home 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 both were looked at 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 agency is run and for the quality and safety of the care provided.

Notice of inspection

This was an unannounced inspection.

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. This was because this was a targeted inspection prompted by specific concerns received.

We reviewed information we had received about the service since the last inspection.

During the inspection

We spoke with five people who used the service about their experience of the care provided. We spoke with four members of staff including the registered manager, the deputy manager and care staff.

We reviewed a range of records. This included two people's care records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We asked the registered manager to provide us with a copy of their infection control policy.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as Good. We have not changed the rating of this key question, as we have only looked at the part of the key question, we have specific concerns about.

The purpose of this inspection was to check on concerns we had received about safeguarding, safe care and infection control.

We will assess all of the key questions at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management

- People told us they felt safe at the service. One person said, "I would go to [registered manager] if I was worried about anything."
- Individual risks to people had been identified and detail and guidance was in their support plan to assist staff in caring for them appropriately.
- One person had an allergy to a particular food and this was clearly recorded in their nutritional care plan and overall summary.
- A second person's health had deteriorated and they had an increased risk of falls because of this. As such, staff were always aware of where this person was and staff accompanied them when they were mobile.
- Where people had specific mental health conditions, triggers had been identified in their care plan which induced certain behaviours. Staff were guided in ways to calm the person.
- We noted the lift at the service had not been checked for three years and the floor of the lift was below the corridor level meaning people could stumble when entering. We raised this immediately with the deputy manager who said they would organise a lift engineer to call. In the meantime, they displayed an 'out of order' sign on the lift. As people were mobile, the lack of lift would not stop them from being able to move around their home.
- The anonymous concerns alleged that people were being fed out of date food. We checked the fridge and cupboards in the kitchen and found this not to be the case. There was a large quantity of fresh fruit and vegetable available and other items we checked were within the use or sell-by date. One person told us, "The food is really nice."
- The anonymous concerns also alleged a lack of staff during the night. Everyone we spoke with told us they could receive staff input if they needed it at night time. There was one staff member on duty at night and the registered manager and provider lived on site so were on hand if needed.

Systems and processes to safeguard people from the risk of abuse

- Where people had experienced incidents that constituted abuse, staff recognised these and took appropriate action in response. One person told us, "No one has been unkind."
- Safeguarding concerns had been raised with the appropriate authority and the service worked with the safeguarding team to investigate or provide additional information when required.

- Staff had a good understanding of what constituted a safeguarding concern and told us they would report these to the office. A staff member said, "I would tell the manager." Another staff member said, "I know where to go. I have the number [for the local safeguarding authority] saved in my phone."

Preventing and controlling infection

- The anonymous concerns alleged a lack of hot water in people's rooms as well as the kitchen, but we found this not to be the case. People also told us they were able to bathe in hot water. We were also told there was a lack of Personal Protective Equipment (PPE) and staff reused gloves or gave people used masks to wear. People told us this was not the case and that whenever they went out they had their own mask and it was a new one. People said staff always wore their masks, gloves and aprons and on the whole we observed this during the inspection.
- We asked the deputy manager of their expectation of staff's requirement in relation to PPE and they told us, "They must always wear a mask and wear gloves and an apron when carrying out personal care." However, we observed this was not always the case as one staff member was seen without a mask. The registered manager and deputy manager said they would address this and we saw the staff member wear their mask throughout the rest of our inspection.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

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.

At the last inspection this key question was rated as Good. We have not changed the rating of this key question, as we have only looked at the part of the key question, we have specific concerns about.

The purpose of this inspection was to check on concerns we had received about the culture within the service and the competency of staff.

We will assess all of the key questions at the next comprehensive inspection of the service.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People told us they were happy at Gables Care Home and staff could do no more for them. One person said, "It's very nice and I like it here. There are always staff around if I need them." A second reiterated those comments. A third person said they had, "A really nice room" and they were happy.
- Staff did what they could to promote good outcomes for people. They liaised with health care professionals to help support them with people's care. There was correspondence in care plans from the registered manager demonstrating their wish to address any deterioration in people's health in order to reduce stress or further anxiety for people. Staff we spoke to knew how to respond to people's needs. One member of staff said, "[Name] has a call bell and a sensor (to monitor for falls) and the doctor has been told."
- One person had stated they would like a part-time job and it was noted staff would support them with this wish, once the restrictions of the pandemic were lifted.
- The anonymous concerns alleged staff 'shouted at people'. People told us they had not experienced this and they were not worried in staff's company. We did however receive comments about a senior staff member who people had heard raising their voice at other staff. One person said, "I stay away from him. He has a bad temper." Although this staff member was not aggressive towards people, we felt this did not reflect a positive culture within the service. We raised this with the registered and deputy manager who said they would address this. We will continue to monitor this as part of our ongoing regulation of the service.
- Staff told us they worked at a team and there was a good atmosphere amongst them. A staff member said, "Everyone is kind and we work together." Another member of staff told us, "I can always go to [registered manager] with any questions and for advice." Staff also said they could go to the registered manager and deputy manager if they had any concerns.