

Mrs Rashmi Bhautoa

Gledwood Care Homes

Inspection report

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Date of inspection visit:
30 October 2023

Date of publication:
16 November 2023

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

Gledwood Care Homes is a care home without nursing for up to 6 adults with mental health needs. The service is a family run business. At the time of our inspection, 3 people were living at the service.

People's experience of the service and what we found:

People were happy and well cared for. They felt safe and their needs were met.

The staff worked closely together. They were well supported and had the training and information they needed to care for people.

Risks to people's safety and wellbeing were assessed. They received their medicines in a safe way and as prescribed. People were supported to access other healthcare professionals. Their mental and physical healthcare needs were assessed and planned for.

People were able to make choices about their care and were involved in making decisions about their lives.

There were effective systems for monitoring and improving the quality of the service which included acting on feedback from stakeholders. The staff liaised with other professionals and kept themselves updated with good practice guidance and changes in legislation.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service Choose an item this practice.

For more information, please read the detailed findings section of this report. If you are reading this as a separate summary, the full report can be found on the Care Quality Commission (CQC) website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was Good (published 23 January 2018)

Why we inspected

We carried out the inspection based on the date of the last inspection.

Follow Up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Gledwood Care Homes

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 checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 1 inspector.

Service and service type

Gledwood Care Homes is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Gledwood Care Homes is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection the registered provider was also registered as the manager.

Notice of inspection

The inspection was unannounced.

What we did before the inspection

We looked at all the information we held on the provider. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

During the inspection

We met all 3 people who lived at the home, the registered manager, another care manager and a support worker. We looked at records used by the provider for managing the service. These included the care records for 3 people.

Is the service safe?

Our findings

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

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- There were procedures to be followed in the event of suspected abuse. The staff had training in these.

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- Risk assessments were comprehensive and included action to help protect people from harm. People were encouraged to take positive risks and make decisions about their own wellbeing.
- Risks within the environment were assessed and planned for. The provider made sure checks on equipment, and the health and safety of the environment were made.

Staffing and recruitment

- There were sufficient numbers of suitable staff.
- The service was a family run business, and all members of staff were part of the family and had worked at the service since registration. The provider had procedures for recruiting new staff but had not needed to do so.
- The provider had a contract with a staffing agency so that suitable staff could be sourced if needed, for example during periods when all other staff were absent. Staffing agencies carry out their own recruitment checks and provide evidence of these checks to care providers.

Using medicines safely

- People were supported to receive their medicines safely.
- The staff worked with people using the service and healthcare professionals to make sure medicines were regularly reviewed and were suitable to meet people's needs. People had regular healthcare checks and the effects of medicines were monitored.
- Staff were trained to understand how to manage medicines safely. There were arrangements for safe storage, receipt, disposal and recording of medicines. People were supported to manage their own medicines when they wanted to, and when it was safe to do so.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- The staff helped to make sure the environment and equipment were clean. There were suitable arrangements for laundering clothes.

- The provider had reviewed and updated procedures in line with government guidance during the COVID-19 pandemic. Staff (and people using the service if they wished) had access to personal protective equipment (PPE), information about vaccinations and COVID-19 testing when needed.

Visiting in Care Homes

- People were able to receive visitors without restrictions in line with best practice guidance.

Learning lessons when things go wrong

- The provider learnt lessons when things went wrong.
- The staff recorded all accidents, incidents and adverse events. They had meetings to discuss these with each other, people using the service and managers to make sure they learnt from these and improved when things went wrong.

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.

At our last inspection we rated this key question Choose rating. At this inspection the rating has remained Good. This meant 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

- People's needs were assessed. Care and support were delivered in line with current standards to achieve effective outcomes.
- The provider liaised with people using the service and the professionals involved in their care to make sure their needs were assessed and planned for. Assessments were regularly reviewed and updated.

Staff support: induction, training, skills and experience

- The provider made sure staff had the skills, knowledge and experience to deliver effective care and support.
- Staff accessed a range of training to understand about their roles and best practice. Staff were supported to undertake professional qualifications. The provider had access to a wide selection of online training which staff could undertake at any time. They also made use of training provided by others including the local authority.
- There were regular meetings between staff and managers to make sure they shared information and felt supported.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to eat and drink enough to maintain a balanced diet.
- People were able to make choices about the food they ate. Staff supported them to understand about healthy eating.
- People's dietary needs and preferences were assessed, planned for, and met.

Staff working with other agencies to provide consistent, effective, timely care● The staff worked closely with other healthcare professionals. People had regular healthcare reviews. Recommendations from these healthcare professionals were incorporated into care plans.

- The staff worked closely with commissioners and social workers to make sure people's placements were reviewed and remained suitable for them.

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

- People were supported to live healthier lives and to access healthcare services.
- People's mental and physical healthcare needs were assessed, planned for, and monitored. Staff understood about people's conditions and supported them to make choices to promote better health and emotional wellbeing. The staff responded appropriately when people's health had declined or their needs

changed.

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

- People's individual needs were met by the adaption, design, and decoration of the premises.
- People were able to personalise their own bedrooms. Communal areas were furnished and decorated to meet people's needs and reflect their tastes and how they liked to use these spaces.

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 MCA 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 Safeguarding (DoLS)

- The provider was working in line with the Mental Capacity Act.
- People living at the service had the mental capacity to consent to their care and make choices about their lives. They were asked to consent to care and treatment. Their choices were respected.

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.

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people were supported and treated with dignity and respect. They were involved as partners in their care.

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

- People were well supported.
- People had good relationships with the staff. They liked them and felt safe with staff.
- We observed interactions between staff and people. These were kind, supportive and polite.
- People's ethnicity, religion and diversity needs were known, and they were supported to meet these.

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

- People were supported to express their views and make decisions about their care.
- People had been involved in developing and reviewing care plans. They made choices about their lives and how they spent their time. These were respected.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence were respected and promoted.
- People had their own bedrooms and staff respected their private space, making sure they knocked on bedroom doors. Staff addressed people politely and using their preferred names and pronouns.
- People were supported to be independent when they were able. The staff helped them to develop skills and make decisions about their lives.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people's needs were met.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People were supported as individuals, in line with their needs and preferences.
- Care plans reflected people's individual needs and preferences. They were involved in reviewing these.
- People's needs were met. Staff knew them well and supported people to achieve personal goals and objectives.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The provider was meeting the Accessible Information Standards. Information was available in different formats if people needed these.
- People's communication needs were understood and supported. People living at the service at the time of the inspection could communicate in and understand English. They did not need any additional support with communication.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to maintain relationships, follow their interests, and take part in activities that were relevant to them.
- People spent their time pursuing individual activities they were interested in. They were supported to go into the community if they wished and needed this support. There were a range of games, books, and resources at the home for people to use if they wanted. People had their own phones and computer equipment to use when and how they wanted.

Improving care quality in response to complaints or concerns

- People's concerns and complaints were listened to, responded to, and used to improve the quality of care.
- There were procedures for dealing with complaints and people knew who to speak with if they had any concerns. There had not been any formal complaints. Concerns were appropriately dealt with.

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 our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- There was a positive and open culture at the service.
- People had good relationships with staff. They felt at home and safe at the service. They were able to live the lives they wanted and pursue their own interests.
- Staff worked well together and with managers. They had good systems of communication.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider understood their responsibilities under the duty of candour.

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

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- The provider was a registered individual. They were also registered as manager at the service. They worked with their partner (also a manager) and family members. People using the service felt supported by this staffing structure.
- The provider and staff kept up to date with regulatory requirements and good practice. They undertook regular training and had a range of information from different sources to help ensure standards were met.

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

- People and staff were involved in the running of the service. Staff fully understood and took into account people's protected characteristics.
- People had been asked for their views about the service, their care, and their daily lives.
- Staff undertook training in equality and diversity and understood how to respect and meet people's diverse needs.

Continuous learning and improving care

- The provider had created a learning culture at the service which improved the care people received.
- There were effective systems for monitoring and improving the quality of the service. These included

asking people living at the service for their views and carrying out a range of audits and checks.

Working in partnership with others

- The provider worked in partnership with others.
- The staff consulted with other healthcare professionals and followed their guidance to make sure people's needs were being met.
- The management team met with other managers and representatives from the local authority to keep themselves updated with best practice.