

Cavell & Lind Limited

# The Gables Residential Home

## Inspection report

22 Post Office Road  
Dersingham  
PE31 6HS  
Tel: 01485 540528  
Website: Not applicable

Date of inspection visit: 30 October and 3 November  
2014  
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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 

### Overall summary

This inspection was carried out over two days which were 30 October 2014 and 03 November 2014. The first day was unannounced, the second day was announced. The last inspection was carried out 10 July 2013 and no breaches were found.

This is a residential care home for up to 24 older people. This home has a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like

registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

People felt safe and secure in the home. They told us they were comfortable and supported safely. Relatives were confident their family member was safe and well looked after.

The staff were knowledgeable about the people they supported and had been trained in safeguarding people. They knew what signs to look for regarding any poor treatment and who to report this to.

# Summary of findings

Staff were supported with an induction programme on commencement of employment and also continued training. The knowledge required by staff on the Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS) was evident during our discussions.

People who required special meals or supplemented diets were supported appropriately by kitchen staff who had gathered information on people's likes, dislikes and dietary requirements when the person was admitted into the home. There was a choice of meals available at each meal time.

If health care support was needed, people were referred to the local doctor and district nurse as was necessary. Any subsequent advice and support provided was then followed by members of staff to promote the health of people.

Throughout the day we heard and observed caring and supportive conversations from staff with people living in the home. Members of staff spoke and behaved in a respectful, kind and caring way. Relatives told us that the staff were always very caring and knew their jobs.

The home had an activities programme and people had the opportunity to be involved when they wanted. People who preferred their own company were supported with one to one time to ensure they did not feel isolated.

People living in the home and relatives were confident that any concerns or complaints would be acted upon quickly and efficiently. Regular meetings were held with people and their relatives to discuss ideas and make changes as and when required.

# Summary of findings

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

The service was safe.

Staff had received training in safeguarding and knew how to report any concerns regarding possible abuse.

People felt safe and secure in this home.

Staff used safe methods to assist people when moving around the home. People's needs were assessed to ensure the correct amount of staff were on duty.

Medicines were managed and monitored correctly.

Good



### Is the service effective?

The service was effective.

Staff training was up to date and training on the Mental Capacity Act had been completed and staff understood the implications of the Act.

People were given a choice of meals that met their dietary needs.

Good



### Is the service caring?

The service was caring.

People living in the home felt that the staff were very good at their job and always caring.

Staff showed a good knowledge of the people they were supporting and spoke respectfully about people at all times.

Good



### Is the service responsive?

The service was responsive

Care plans were relevant and held the information that helped staff to deliver the care and support required.

People had access to a wide range of meaningful activities and were supported to be involved in their local community.

Regular meetings were held with people who lived in the home to ask their views and all suggestions were discussed and agreed actions were taken.

Good



### Is the service well-led?

The service was well led.

People felt supported and listened to by the manager. Staff had regular supervisions and annual appraisals.

People and their families were asked their opinion on the quality of the service and action was taken if any was required.

Good



# The Gables Residential Home

## Detailed findings

### Background to this inspection

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

This inspection took place on 30 October 2014 and was unannounced; a second visit on 03 November 2014 was announced. One inspector visited the service to carry out this inspection.

Prior to this inspection we reviewed information that was in CQC records before the inspection visit such as the Provider

Information Record (PIR) and notifications. The PIR gave us information about how the people using the service were offered care and support. Notifications told us of any deaths, significant incidents and changes or events which had taken place within the service provided.

During the inspection we spoke with seven people using the service, five relatives and friends, three care staff, one cook, one health professional and management. We looked closely at three care plans and observed the lunchtime experience in one dining area.

We looked at records such as management audits, medicine records, menus, health and safety records, staff rotas and training records.

# Is the service safe?

## Our findings

The people who talked with us said that they felt safe in the home. One person said, “Staff are always there when you need someone.” Another person said, “I feel like this is my home and although it is not, it feels almost the same.” One visiting relative told us, “Staff are always about and I have no worries or concerns about safety here at any time.”

Two relatives told us they had looked at choices of homes in the area and that The Gables was, “By far the best of the lot.” They said that they felt happy at the choice and staff acted in people’s best interest at all times.

We noted that care staff were not rushing when supporting people. They used current safe techniques to assist people to move around the home. We observed that staff were competent when using any equipment and they told us they were trained to use any necessary equipment.

Staff discussed their training on safeguarding people and explained their understanding of protecting people from abuse. They gave examples of what may be seen as abusive and what action they would take if they suspected abuse might be happening. People living in the home said the staff were always happy and ready to listen. Relatives told us that they knew staff listened and were always eager to assist when needed with any worries.

The manager told us that all potential risks were assessed and when required, plans were put in place to reduce any risk to people living in the home. We read risk assessments

for three people and noted all were reviewed regularly or when a situation had changed. This showed us that information was up to date and adjusted as soon as this was needed.

We noted throughout the day that when the call bell system was activated staff did attend to a person’s needs. People were supported in a timely manner by sufficient numbers of staff who could meet their needs. Staff said that all admission assessments were discussed and the appropriate number of staff were then put on shift before the individual arrived at the service. Each person therefore received support and care from the appropriate number of staff needed to meet their needs.

We looked at three sets of recruitment files to check that staff were suitable and that safety checks had been completed prior to employment. We found all files had the relevant records to show that safe recruitment practises had been followed; ensuring people were cared for and supported by a suitable staff team.

The management of medicines were checked during this inspection. We found that the practices being undertaken were appropriate and in accordance with current legislation. The manager showed us how she audited records and followed up on any areas relating to medication that may need some review or discussion with staff. We found that the home had the correct storage and record keeping to ensure controlled medication was managed safely.

# Is the service effective?

## Our findings

The people we spoke with told us that the staff who supported them with their care were knowledgeable and skilled to do their job. One person said, “Staff know me and how I like things. They are all really good here.” One relative told us, “The staff know my relative and act just the same as I would. At a hospital appointment, they asked all the right questions so we all knew what was happening.” A health professional told us that the staff were good and seemed to know their job. They said that staff knew the people they supported and always had up to date information about each person.

Discussions with members of staff showed that induction, training and ongoing support programmes were in place. They told us they were able to do their jobs as they received any training that was required. The manager showed us the training plans to ensure staff had the relevant updated training and support to carry out their work. Staff told us that they were able to ask for any additional training they felt would benefit people living in the home. They confirmed that supervisions were regularly completed and the manager was always available for any informal discussions.

Training also included the Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS). CQC is required by law to monitor the operation of the MCA and DoLS and to report on what we find. During discussions with staff we found they were aware of their responsibilities regarding the Mental Capacity Act. Staff described certain incidents where they had considered the liberty and rights of the people concerned. Staff told us they would always act in the person’s best interests and if they had any doubts they would discuss matters with their senior member on duty or with the manager. The manager had dealt with any MCA

issues in the first instance but these discussions showed us that staff had understood their training and knew their legal responsibilities regarding this area of care and support.

We sat in one dining area during the lunchtime meal. People were offered choices and told us they enjoyed their food very much. One person told us, “I never ask for anything different as the food is always so very good.” A menu was on display and available for anyone to read through. People showed us where these were and they discussed the day’s choices with much humour and joking between themselves and the staff team.

The catering staff told us that they were aware of what people liked and how they enjoyed their meals served. Any special requirements for needs relating to diabetes, allergies or religion were catered for. People told us that they had discussed their food likes and what meals they enjoyed.

People told us the GP was called as soon as staff had any concerns about a person’s health. We heard staff discussing health appointments made during the staff handover. Two visitors told us that they were always kept informed about any appointments regarding their relative’s health. Their family member living in the home told us, “My family are kept well informed as that is what I like. It stops them worrying about me and they know I am being looked after.”

The mental capacity of people living at the service was assessed. Contact had been made with the relevant local authority department when further information or clarification had been required by the manager. One relative told us that their family member had difficulty remembering things and staff recognised when this person was not certain. We were told that staff were always ready and available to gently remind the person of the daily routine or events. They said that staff were very considerate, knowledgeable about people’s needs and took time with people.

# Is the service caring?

## Our findings

The people we spoke with made complementary comments about the staff team who supported their care needs. They told us staff were kind and treated them with respect. One person said, "I like all the staff, we are well looked after here." Another person said, "The staff know me and all of them work together to make sure I am alright." One relative said, "They are all very caring here and it feels so relaxed whatever time we visit." They told us they were welcome to visit at any time and that the manager and staff always knew what was happening with their relative. They listened if there were any worries and helped as much as they could.

During our inspection we listened to and observed staff as they were working. We noted that conversations with people were kind and respectful with people being given explanations as to what was happening. The manager was asked about an appointment and explained the outcomes clearly and patiently.

Throughout conversations we heard staff offer choices to ensure people living in the home were ready for whatever was taking place. For instance, we heard people being asked if they were ready for their lunch and where they would like to eat it. This provided people with choices about their meals and their dining experience. People who were hard of hearing were spoken to at their level and staff allowed time for the person to respond.

People we spoke with, plus relatives, knew about their care plan and knew that staff would ask them questions about their care and how they liked to be supported. One person said, "Oh yes they ask me and we regularly sit and talk about my needs." Another person told us, "The manager is always available for me to talk to if I have any questions about what I need."

Quality audit questionnaires were regularly sent out and we saw records of some issues that had been responded to. Family members said that the manager was always available to discuss any concerns and that they did not always complete questionnaires as they discussed things immediately. The questionnaires we read had contained positive comments.

One relative told us how they lived some distance away and that the staff group always made certain they were informed about anything they needed to be told.

The staff we spoke with were respectful about the people they were caring for during our conversations. It was obvious that they knew the people and what their support needs were, particularly their family history. For example, we heard one member of staff discussing recent family events with one person who was very happy about some family information they had received. It was clear from this discussion that the member of staff knew who the family members were and where they lived.

# Is the service responsive?

## Our findings

We found comprehensive information in people's individual care plans and these also contained risk assessments. These assessed the level of risk to a person and then plans were put into place to either eliminate or reduce that risk. We found information that showed what people had chosen about such things as how they received their medication, independence, what interests they would like to still be able to enjoy. One person enjoyed a drink of wine with their main meal and this was arranged. Daily records written by staff provided information that showed how the person had spent their day as well as how they had felt in themselves.

The activities provided showed a range of choices that people had made, making certain that these would be enjoyed. Following discussions at a recent meeting, one area of the home was being developed to accommodate a larger craft table. A separate area was also being made available for one person who enjoyed using a desk for writing. Staff continued to explain how they had thought of various ways to support the activities people enjoyed.

The care staff we spoke with told us how the home made certain that information was passed to all staff. We were told by catering and care staff that the manager supported members of staff and ensured information was given when needed. We attended the staff handover at the beginning of a shift. This was thorough with each person living in the home being discussed, even if there were no problems at the time. Staff explained how they always made certain information was passed to other staff and how they could

catch up on relevant information. This supported staff to be up to date with information to work effectively and to respond to the individual needs of people living at the service. We were told by people living in the home that they had lots of varied things to do to occupy them. We heard of the forthcoming Christmas activities and family members told us about events they had attended. There was a newsletter that was issued regularly to tell people about what was planned for the home. One person was asking about a news item that had involved pets being brought into to the home for people to enjoy.

People who preferred to stay in their own rooms had the opportunity to spend one to one time with a staff member. One person told us, "I like my room and staff keep me informed of everything. If I want to join in I can, I like it quite a lot of the time." People were supported to attend their chosen place of worship and assisted with any events in the community they wanted to enjoy.

When speaking with people living in the home, they told us they had no complaints about the care they received. They told us the manager and staff were very caring and listened and act on any concerns or worries raised. Relatives we spoke with also confirmed this was the case.

One relative told us that any issues were dealt with quickly and they felt staff would always take appropriate action. We found complaints had been recorded and acted upon, but due to open discussions and concerns acted upon straight away, formal complaints were few. We saw that the staff team had received numerous letters and cards of thanks for their care and support.

# Is the service well-led?

## Our findings

We saw visitors and people living in the home entering the main office at any time to speak with the manager. People we spoke with told us the manager was approachable and always very supportive and helpful. One person said, “She seems to really know her job. She is on the ball and knows exactly what is happening whenever I ask things about my relative.”

People told us that the home was always relaxed and had such a friendly, welcoming atmosphere. At this inspection there was decorating being carried out both inside and outside of the building. This was being carried out as calmly as possible and with minimal disruption. There were appropriate signs letting people know that decoration was in progress.

The staff members we spoke with were familiar with the procedure if they had any concerns about how a member of staff worked. They said they would have no hesitation about whistle blowing and felt that appropriate action would be taken if this was necessary. Staff said without question they would talk about this to their senior and would not just ignore any poor practice. Staff explained that they all discussed matters between themselves and felt that every staff member wanted the best for people living in the home.

Relatives and people we spoke with told us that meetings were regularly held to discuss any areas of concern or changes required within the home. We saw copies of such meetings and what action had been taken.

Staff we spoke with told us the manager was always available, listened to them on any matters and they felt

supported. All relatives and people living in the home said that the manager’s door was always open if they needed to discuss anything. People were listened to and action was taken to address any concerns

Information we reviewed showed us that the manager regularly reviewed paperwork and completed daily observations around the home. They started the day with discussions about the night shift, spoke with people living in the home and checked any appointments for the day.

We were told meetings with staff were held regularly and that the manager had an open door policy for all people living in the home and their families to ensure they were available to talk with them when required. We discussed this with people who lived in the home, their relatives and staff. They all confirmed that the management ensured the home was running appropriately each day and that meetings took place regularly. This enabled people to discuss any adjustments to the service or the building itself.

Staff confirmed they had regular one to one support meeting and an annual appraisal with management. They said that the manager was also available at any time and was always ready to listen to them. They explained that they felt valued as the manager considered their personal welfare as well as their professional development. Staff told us this made them feel supported and could ask for further support if they required it.

People involved in the home were regularly sent questionnaires to ask their views on the quality of the service. People living in the home and their relatives confirmed this was regularly completed. We read the results that had previously been gathered and saw an action plan had been acted upon. People were listened to and action was taken on any suggestions for improvements to the quality of the service.