

The Gables Care Limited

The Gables

Inspection report

7 West Moors Road
Ferndown
Dorset
BH22 9SA

Tel: 01202855909

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08 January 2020
09 January 2020

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Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
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Is the service effective?	Good ●
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Is the service caring?	Good ●
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Is the service responsive?	Good ●
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Is the service well-led?	Good ●
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Summary of findings

Overall summary

About the service

The Gables is a care home registered to provide accommodation and personal care for up to eight people diagnosed with autistic spectrum disorders and learning disabilities. At the time of our inspection there were eight people living at the home in one adapted building in a residential area of Ferndown.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. Registering the Right Support ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. Although the service is larger than Registering the Right Support recommends, people using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

People told us they felt safe and enjoyed living at The Gables. People were relaxed and happy with staff, who knew them very well. People received a personalised service from friendly, supportive staff who treated people with patience, kindness, dignity and respect. Relatives spoke highly of the management and staff team and commented they were very happy with the service and level of care their relative received.

There were robust recruitment processes in place and people were supported by a consistent team of staff who knew them well. There was an ongoing process of staff recruitment and clear systems in place to monitor appropriate staffing levels to ensure people were cared for safely.

Staff spoke knowledgeably on how to identify and report abuse and were well supported in their roles. Staff received regular supervision and annual appraisals to enable them to carry out their roles competently. Staff received core and specialist training and support to assist people in ways to meet their needs.

Risks to people's health, safety and well-being were regularly assessed, reviewed and updated. People and their families were fully included and involved in their care and support. People's views and opinions were listened to and acted upon wherever possible.

People's health care needs were met, and staff supported them to see healthcare professionals when appropriate. Medicines were managed, stored and administered safely. People were supported to take their medicines safely by staff who had received the appropriate levels of training.

Communication styles and methods were tailored to individual people and staff supported people to understand the choices available to them.

People received healthy, nutritious meals which they enjoyed planning. Meal times were a social occasion

where people could choose to spend time with others. People told us they enjoyed the meals which were, "very nice".

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 supported this practice.

The service was well led by a registered manager whoessentials and staff. There were clear quality assurance systems in place to drive improvement and ensure the home offered a safe, effective, caring and responsive service.

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

Rating at last inspection

This last rating for this service was good (published 24 May 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. 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?

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. This inspection was planned 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

The inspection was conducted by one inspector.

Service and service type

The Gables is a care home. People in care homes receive accommodation and nursing or personal care. CQC regulates both the premises and the care provided, and both were looked at during this inspection. This service did not provide nursing care.

The service had a manager registered with the Care Quality Commission. This means 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

The first day of this inspection was unannounced.

What we did before the inspection

We reviewed the information we had received about the service since the last inspection. We sought feedback from the local authority and health professionals who regularly worked with the service. We used all of this information to plan our inspection. The provider was not asked to complete a provider information return prior to this inspection. 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. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We met and spoke with six of the people who used the service and spent some time with them. We observed

and listened to how staff interacted with people. We spoke with the registered manager, the service manager and three members of staff.

We observed how people were supported and, to establish the quality of care people received, we looked at records related to people's care and support. This included two people's care plans, care delivery records and all of the Medicine Administration Records (MAR). We also looked at records relating to the management of the service including: staffing rotas, staff recruitment, supervision and training records, premises maintenance records, quality assurance records, training and staff meeting minutes and a range of the provider's policies and procedures.

After the inspection

We spoke with four relatives on the telephone to gather their views on the service provided at The Gables and wrote to six health professionals for their views. We sought clarification from the provider to validate evidence found. We reviewed photographs of events and days out people had attended that the registered manager had sent us.

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. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were relaxed with staff and told us they felt safe living at The Gables. One relative told us, "I feel [person] is safe there."
- The provider had effective safeguarding systems in place. Staff had been trained and spoke knowledgeably about how to recognise the different types of abuse and knew how to report any concerns.
- There was a safeguarding and whistleblowing policy in place which gave staff clear guidance to follow if they needed to refer any concerns to the local authority.

Assessing risk, safety monitoring and management

- Personalised risk assessments were in place. These considered risks relating to the environment as well as any risks to the person. People were supported to take positive risks and were involved and included in their risk assessments. This ensured a reduced risk of harm with the least possible restriction to people's freedom, and independence. One relative told us, "[Person's] behaviour incidents are being managed well... they seem to put different plans in place which is working very well and giving them boundaries, which is working well."
- Some people had positive behaviour support plans in place. These were up to date and in line with best practice and gave clear guidance for staff on what may trigger anxiety or incidents for each person and how to safely de-escalate a situation.
- There were systems in place to ensure the premises were maintained safely. There were personalised plans for people to ensure a safe evacuation from the premises in an emergency such as a fire.
- Up to date service and maintenance certificates relating to electric, gas, fire and water systems were available. Legionella testing was scheduled to be completed immediately following the inspection. Legionella are water borne bacteria that can be harmful to people's health.

Staffing and recruitment

- The registered manager was in the process of recruiting further staff. During our inspection we observed staff were working at full capacity. We discussed staffing levels with the registered manager who confirmed extra staff were brought in if people needed to be supported to health appointments or had scheduled visits that needed additional staff for support. One member of staff told us, "Some days we have four staff on and that works better, at the moment we have three. We very rarely use agency staff, but if we do they are the same people. In general they have a consistent staff team, we pretty much get on well as a team."
- Staff rotas correctly reflected the levels of staff on duty during our inspection visit. Annual leave or staff sickness was covered by existing staff or a small supply of agency staff who knew the service and people well. This ensured people received care from a consistent staff team who knew them well.

- There were robust recruitment practices in place and the relevant checks had been completed on all staff. People were involved in the recruitment of staff if they wanted to and were asked their opinion of prospective staff. One person told us, "I like the staff, they are nice."

Using medicines safely

- Medicines were safely managed, stored and administered. People received their medicines when they needed them.
- Staff who administered medicines had received up to date medicine training and had their competency checked.
- There were clear protocols for administering PRN (as required) medicine and staff spoke knowledgeably about administering PRN medicines. People had known allergies recorded and there was a system of body maps in use to ensure people had their creams administered correctly.

Preventing and controlling infection; Learning lessons when things go wrong

- There was appropriate equipment and cleaning schedules in place to clean the home effectively. People were supported by staff to keep their bedroom clean and hygienic. We spent time chatting with one person while they were cleaning under their bed. They showed us how they used the broom to reach under their bed. They said, "I can get it all out now...look!"
- Staff had access to personal protective equipment and wore it appropriately. Staff had received training in infection control and food safety and understood how important it was to reduce the risk of cross contamination.
- There was a clear procedure in place for reporting and recording accidents and incidents. All incidents were reviewed, analysed and monitored for any trends or patterns of behaviour, this ensured incidents were responded to appropriately and lessons shared and learned with staff.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- The provider worked closely with health professionals to make sure people's physical, emotional and social needs were fully assessed before they began to use the service.
- People and their relatives were involved in their day to day care and support and told us they felt listened to and able to make their own choices. Staff worked with people to encourage and support their independence. Assessments were unique to each person and contained information and guidance for staff to follow to ensure people were effectively supported in ways they preferred.
- People were supported to be themselves and given access to information and support to live their lives as they chose. This included them being provided with support to consider all aspects of their gender, sexual orientation and disability.

Staff support: induction, training, skills and experience

- Staff spoke positively regarding the induction process they had received. Staff completed their induction on site at The Gables and then spent time shadowing more experienced staff so they got to know the people before caring and supporting them independently. One member of staff said, "Everything was covered on induction. I did shadow shifts and there is always someone to help if I needed to know anything. I feel listened to and well supported. I'm really happy here."
- People were well supported by appropriately trained staff. Staff told us they found the training provided useful and well delivered. One member of staff told us, "Most of the training is done on line... breakaway and stoma training was done by an independent company, face to face... I thought it was good, I take it in better on a practical basis."
- Staff received regular supervision meetings which were helpful and supportive. The sessions were used to develop and motivate staff, reviewing their practice and checking if staff wanted to progress further or develop specific skills or training related to their interests.

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

- People told us they enjoyed their meals, one person said, "The food here is ok, I like it. My favourite is fish and chips. I like tea and I like it nice and black. I like going out for food and I like McDonalds." A relative told us, "[Person] loves the food, they have a wonderful appetite and it's so good they have a lot of healthy food and choices of meals." Another relative said, "[Person] loves their food, it's all well balanced and healthy, they really enjoy their meals there."
- People were encouraged and supported to be fully involved in the planning and preparation of the meals for themselves and others living at the home. We observed meal times were relaxed and friendly with people choosing where and what they wanted to eat.

- There were pictorial menus on display showing people what meals were planned for the week. People received home cooked, healthy, nutritious meals. People's dietary needs were recorded in their support plans.
- Staff understood people's dietary needs and ensured these were met. Where nutritional needs had been assessed, clear guidelines were in place for staff to follow. For example, one person needed to have their food cut into bite size pieces and we saw staff followed the Speech and Language Therapy plan that was in place.

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

- The environment reflected the homely, friendly atmosphere of the service. People had their own bedrooms which were highly personalised and decorated to their individual taste. Shared communal areas were bright and comfortable which helped provide a warm, family friendly atmosphere.
- The provider was developing a sensory room for people to use and there were two craft rooms where people could enjoy making and taking part in craft sessions. The nominated craft rooms meant people could safely leave their craft projects out ready for them the next day without having to clear it all away at the end of each day. One person enjoyed using pool table throughout our inspection visit.
- A health care professional had recommended a permanent solid structure to be put in place in the garden for one person who liked to spend a lot of time sitting outside. The registered manager told us this was in the process of being organised.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- The service worked collaboratively with external health care professionals and specialists. A range of professionals were involved in assessing, planning, implementing and evaluating people's care and treatment to ensure people got the right healthcare. Records reflected this was the case for ongoing health issues and emerging issues.
- People received the support they needed to manage their health, including any assistance they needed to arrange and attend appointments with health professionals.
- People received an annual health check as per best practice for people with a learning disability.
- People had 'Pictorial Traffic Light Passports'. These gave important information about each person, their likes, dislikes and things that were important to them. This information would need to be known if the person transferred to another service such as a hospital.

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 when this is in their best interests and legally authorised under the MCA. 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 had received training in The Mental Capacity Act 2005 and spoke knowledgeably regarding how it

applied to the people they supported at the service.

- Care and support records contained details of people's consent.
- Where people lacked capacity to make decisions about their care and support, best interests decisions had been made for them.
- The service involved people, relatives and relevant care professionals in any decisions made in people's best interests.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved partners in their care.

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

- People were treated with respect, kindness and compassion. People and relatives told us the staff were caring and kind and knew everyone very well. One person told us, "The staff are all good (and signed a thumbs up)." One relative told us, "They are really good at being lovely, they are caring and look after people so well." Another relative said, "The staff we have met are very caring in their jobs and trained to look after everyone very well."
- Relatives told us they were kept fully informed in the care of their relative and found the staff team approachable, friendly and professional. One relative told us, "They let me know if anything has happened... I'm kept well informed."
- A health professional gave us written feedback that stated, "Every staff member I have met and spoken to come across as caring."
- Throughout the inspection we observed positive interactions between staff and people. Staff showed genuine warmth and compassion when supporting people. Staff knew people well, knew their life histories, things that were important to them and their wishes. This enabled staff to support people in ways they preferred.
- The service took a person-centred approach to care and support. Staff were respectful about the people they supported and had completed training on equality and diversity. People's care plans and support records set out aspects of people's characteristics, beliefs and preferences to ensure people's equality and diversity was respected.
- The registered manager was in the process of supporting one person to attend a LGBT+ friendly social group as they had expressed they wanted to attend.

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

- One relative told us, "The staff and manager have done a great job and we really rate it... people's care needs are given as individuals and they have created a great family feel in the home."
- People, family members, staff and health professionals were all involved in decisions regarding ongoing care and support. People were supported by staff to make choices affecting their daily care and support.
- Support plans considered people's disabilities, age, gender, relationships, religion and cultural needs.
- There were weekly house meetings where people were given the opportunity to share information that was important to them and put forward their views, preferences and ideas.
- Each person had a detailed service user guide which gave clear information about who, when and how to contact people if they had any concerns or queries. Information included all aspects of the service and included the provider and staff team, and how to feedback if people were unhappy about any aspect of the

service.

- People were offered encouragement and support by staff to make decisions they may find difficult. Staff respected people's choices and their rights to do what they wished.

Respecting and promoting people's privacy, dignity and independence

- Staff understood the importance in respecting people's rights to privacy and dignity and this was supported throughout people's care and support records.
- Staff promoted people's independence and people were encouraged to set themselves achievable, realistic goals to work towards.
- Staff respected people's bedrooms as their private space, seeking permission before entering.
- Personal information was kept secure and staff understood the importance of maintaining secure documents and care records to ensure people's confidentiality was maintained.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

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

- The service and staff demonstrated an individual, person-centred approach which was reflected in the care and support plans people received. Throughout the inspection we observed staff had a good understanding of people's needs and provided care and support tailored to their needs.
- People's care and support plans were detailed, informative and provided clear guidance for staff. Care and support plans were regularly reviewed and reflected people's physical and mental and social needs. This ensured people received tailored, individual care and support that best suited their needs.
- Care and support plans focussed on promoting people's independence and supporting them to achieve their agreed goals as well as how they preferred their care and support to be given. For example, "It's really important my day gets off to a good start. I like to know what's going on and it helps if I know what to expect."
- Care plans included life history information and details of people's likes, dislikes, hobbies and interests. This information guided staff to get to know people well and support them in activities they enjoyed doing.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The service complied with the Accessible Information Standard (AIS). Some people living at the service were not able to communicate verbally; staff communicated in ways that suited all the people.
- People had detailed communication plans that described whether they used words, gestures, sounds, picture cards or their own specific signs. If people were not able to communicate verbally, pictorial support cards were available for them and their support plans gave clear explanations and guidance on their preferred communication methods. For example, one person's support plan stated, "I communicate by using facial expressions, objects, pointing signs and some words".
- Care and support plans included clear guidance for staff on how to communicate with each person for example, "Ask me to show you, ask me to repeat, give me time show me objects and photographs and use my name."
- People had current communication passports. These gave clear guidance on how the person preferred their support to be given and how they liked to communicate. They included clear guidance on how the person would present if they were happy or unhappy and how staff could support them with their 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 encouraged and supported to see their family and friends regularly. Relatives spoke positively about the support they had received from the management team and staff at The Gables. One relative told us, "It's been marvellous, very, very good, they manage [person] needs so well."
- We asked a relative what they thought the service did particularly well, they replied, "They keep [person] occupied, there are super activities and with the new vehicles its super they go out all over. [Person] is very happy, when they come home they are always very happy to go back to The Gables and jumps out of the car to go in. They are very happy there."
- Where possible people led active lives and were encouraged and enabled to pursue hobbies and a wide range of activities both in the home and in the wider community. These included watching films, cinema visits, horse riding, swimming, visits to cafés and restaurants, playing football, shopping trips, arts and crafts and music sessions.
- Staff told us about a trip to the Fire Station that they had organised and we saw photos of people enjoying their day out there.
- People and staff told us about the holiday they had attended at a seaside holiday camp. One person said, "It was good fun, I liked it". People were supported to maintain and improve their independence; activities they took part in played a positive role in teaching people independence. These included; ordering and paying for meals out, preparing their own snacks and light meals at The Gables and shopping for personal items.
- People received support and learning around key life skills which included doing their own personal care such as brushing their teeth, showering and choosing their clothes for the day and completing household tasks such as sorting their washing, tidying and cleaning their bedroom.

Improving care quality in response to complaints or concerns

- The service had not received any formal complaints since the last inspection. People and relatives told us they knew how to make a complaint if they needed to. One relative told us, "We are fully aware of how to complain if we ever needed to and feel the ownership and management are well led."
- The provider had a clear complaints policy, and guidance leaflets in both written and pictorial formats were freely available around the home for people to refer to if they needed to complain. This ensured people were supported to make complaints and encouraged to put forward their views and concerns as necessary. This promoted an open, supportive culture.

End of life care and support

- At the time of the inspection the service was not supporting any one with end of life care. The registered manager told us they would be looking to support people with their end of life plans if they wished.
- The registered manager was in the process of putting advance care plans in place for people who wished to have them completed. They included pictorial stories about decisions to do with people's future, spirituality, religion, funeral arrangements and changes that can happen to people at the end of their life.

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

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Relatives and staff spoke positively about how the service was managed and the open, honest and supportive culture that was in place. One relative told us, "It's good, there has been a management change both in owner and management and that has led to much improvements. The environment is much improved, and we have been very impressed with the registered manager, they have good judgement and consults with us regularly." A staff member said, "There is a clear vision of where we want to be. We all get on very well and I feel supported in my role."
- There were effective systems in place for the registered manager and provider to oversee The Gables and monitor the quality of service provided. There was a process of continual improvement and quality assurance with a variety of audits completed to ensure the quality of the provision was maintained.
- Staff were confident in the quality of care, support and guidance they were able to offer people which gave a strong focus on person centred, individualised care for people.
- Notifications to CQC, as required by the regulations, had been appropriately made.
- There were regular team meetings held where staff felt comfortable to raise any issues or concerns and felt valued and listened to.
- Staff told us team meetings provided a valuable time to discuss lessons learned and different ways of helping and supporting people. Staff viewed team meetings as supportive and helpful.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; and how the provider understands and acts on duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- Staff and relatives told us they felt the service was well-led, with a clear management structure in place. One relative said, "They make it as homely as possible and we are very happy with the care [person] receives." A member of staff told us, "This is one of the better companies I have worked for. Everyone is easy going and friendly and the manager is very approachable and supportive."
- One member of staff told us, "I feel like I am being listened to and well supported. I'm really happy here."
- A health professional provided written feedback that stated, "From conversations I have had with the manager it seems that the team are well supported and have clear guidelines to follow, which ensures a more consistent and confident approach from everyone."
- Staff told us the management team operated an approachable, open door policy and they were always available for advice and guidance.
- The registered manager and provider understood their responsibilities to be open and transparent if

anything went wrong.

- There was a clear process to report, review and analyse incidents and accidents. The provider acted in line with their duty of candour.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- There was a system of annual quality assurance questionnaires in place for obtaining the views of the service from people, staff and relatives. Surveys had recently been sent out and results from these questionnaires were in the process of being analysed. Surveys had been positively completed, any areas of weakness or concern would be identified and acted upon.
- People were given the opportunity to attend weekly house meetings. These gave people a forum to put forward their views and raise any concerns they had. People's views and requests were listened to and acted upon.
- The service worked collaboratively with all relevant external stakeholders and agencies. Staff told us the support and guidance they had received had made positive impacts on the lives of the people who lived at The Gables.
- The registered manager kept up to date through the receipt of monthly briefings from CQC, regulation and Adult Social Care guidance documentation and attending a variety of local adult social care forums, events and workshops.