



Inspection Report on

Thomas Gabrielle General Nursing & Dementia Residential Home

**Victoria Street
Cwmbran
NP44 3JP**

Date Inspection Completed

09/07/2019

Welsh Government © Crown copyright 2019.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

Description of the service

Thomas Gabrielle general nursing Home and dementia residential home is located in Old Cwmbran provides personal care and accommodation for people who have dementia needs, and general nursing care for up to 69 people.

The service is owned and operated by Virgo Care Homes Limited and has a nominated responsible individual (RI) Mark Virgo who has overall responsibility for the service and two managers who oversee the day to running of the home. Both managers are registered with Social Care Wales (SCW)

Summary of our findings

1. Overall assessment

We found that people living at Thomas Gabrielle were satisfied with the care they receive. Staff are well trained and are very happy working at the service. Management was effective within the home and committed to continual improvement to meet the needs of the people they care for.

People were accommodated in a clean, warm and welcoming environment and had access to social engagement and interaction, which enhances their quality of life further.

2. Improvements

This was the first inspection since the home re-registered under the Regulation and Inspection of Social Care (Wales) Act 2016.

3. Requirements and recommendations

Section five of this report sets out our recommendations to improve the service and the areas where the care home is not meeting legal requirements. These include the following:

- Glass in the door at end of corridor needs replacing, due to being cracked.
- Some internal doors would benefit from painting.
- Safeguarding referrals to be kept in a central place with an outcome sheet for data to be accessed and interrogated.
- Maintenance files contain old information and some could be archived for ease of use.
- Safeguarding policy to contain legislation and clear guidance on how to report abuse.
- Call bells to be answered promptly at all times.

- Daily recordings could be expanded to reflect care being given.

1. Well-being

Our findings

We saw evidence that people are treated with dignity and respect by staff and are always given choice where practically possible. We saw evidence that care planning documentation was person centred and included the wishes of the person being cared for, and people and their relatives were included in the care planning process and reviews. We saw evidence of people being treated as individuals and receiving the appropriate care to meet their needs and external referrals being made appropriately. Thomas Gabrielle has appropriate quality assurance processes in place, which include seeking the views of people using the service. The RI had very good oversight of the service and fulfils legal requirements in regard to the role. We viewed the statement of purpose of the service and found that care was being provided in line with arrangements set out in the statement of purpose. We conclude that people have day to day control over their lives.

We saw that there were enough suitably trained staff to meet the needs of people living at the service, and clear evidence that staff understood the needs of the people they were caring for. We viewed medication processes and found that they were safe and robust. Medication was stored safely and securely and administered to people when required using an electronic Medication Administration Recording (MAR) system. The home has appropriate systems in place to ensure the safeguarding of people they care for. We saw that referrals are made to safeguarding team when required; we recommended that referrals are stored in a central location so that data can be analysed. People are cared for in a safe environment which has all appropriate equipment in place to maintain independence and safety. We noted that one external door window had a slight crack and within hours the service had ordered a new door to be fitted as soon as possible. We saw evidence that people have opportunity to engage with others and have access to social activities that are important to them. The service employs two full time activity coordinators who arrange activities in and out of the home, including group activities, one to one sessions and external entertainers visiting the home. We conclude that people's physical and emotional needs are met appropriately.

Thomas Gabrielle is made up of two separate buildings; one for dementia residential residents and one for general nursing residents. We found that both buildings were warm and welcoming and decorated to a high standard. We noted that some internal doors in the nursing unit would benefit from painting and were given assurances that there was a redecoration programme in place.

People had ample space within the home to spend time privately or communally and were cared for in single bedrooms. There were ample bathrooms and toilets with appropriate equipment for people to bath and shower safely.

We saw evidence that the service provides clear information to people using the service and potential residents via a service user guide and statement of purpose as well as verbal discussions with management and staff. The home had a robust complaints policy in place. People we spoke with told us that they would have no issues making a complaint. We conclude that people live in accommodation that meets their needs.

2. Care and Support

Our findings

People received the care they require, as and when they require it. We saw staff providing care to people with dignity and respect, and had a clear understanding of their needs. There were sufficient staff present during both visits so people received care as and when they required it. We noted on one visit that call bells were taking some time to be answered, but this was not the case on the second visit. We were given assurances that management would address this issue. We viewed a selection of care plans and found them to be clear, robust and thorough. These plans are extremely important as they instruct staff on how to care for the individual. The plans were person centred and reflective of the person being cared for and had been reviewed regularly. A visiting professional told us *“the care plans are excellent and always updated when required, it is rare that we have to ask for any changes to the care plan”*.

We noted that some daily entries within the notes were brief and advised the management that notes should be more detailed to reflect the care being given. We were assured that this would be addressed. We saw evidence that external referrals were being made and any recommendations or guidance was fed into care plans and followed. A visiting professional told us *“they always refer people in a timely manner. I come to this home regularly and have never had to raise an issue”*. We observed medication practices within the home and found them to be safe and robust. Medication was stored securely and administered as required. The home used an electronic administration system which contained a picture of all residents and instructions on how and when to administer. Staff we spoke with told us *“the system is excellent and reduces risk of medication errors”*, which evidences that the home used systems to administer medication as safely as possible.

People have autonomy, choice and control over their day to day lives.

We saw that people chose when time to get up in the morning, when to go to bed at night and how they spent their time in between. Thomas Gabrielle view social activities and social inclusion as extremely important to the well-being of the people they care for and employed two activity co-ordinators and a dedicated staff member to take people out into the community every afternoon. We spoke with one activity co-ordinator at length who told us that she attends an activity co-ordinators forum regularly, which enables her to network with other activity co-ordinators to share ideas and gain knowledge of activities and services available to people living in care homes. The activity co-ordinator also told us that *“management are very supportive of my role and provide anything I ask for”*.

We saw evidence of social activities being provided in groups and on a one to one basis. There was a timetable of activities on display within the home which included chair yoga, arts and crafts, massage therapy and singing. We saw people being taken out by the dedicated staff member and saw a birthday party taking place for a resident. The home had an adapted vehicle which is used to take residents on day trips and to community events. The home had recently hired the local cinema for sole use by residents who enjoyed getting out to watch a film. We spoke with kitchen staff and viewed a selection of menus and saw that people were offered a choice of meals. The kitchen staff had a good understanding of dietary needs and kept a record of any specific dietary requirements of residents. We observed the lunch time experience during our first visit and saw that people were treated as individuals. Some people were supported to eat independently, while others were given assistance as required. People who required full assistance to eat were supported with

dignity, patience and respect. No one was rushed to eat their meals and there were enough staff to enable everyone eat together and enjoy the experience.

People we spoke with told us that they were happy with the service they received. Families that we spoke with were extremely complimentary about the home and described the staff and management as "*brilliant*". One person said that she had noticed a hole in her mother's bedding and within half an hour of raising the issue the bedding was changed, which evidences that complaints are responded to in a timely manner.

3. Environment

Our findings

Thomas Gabrielle is registered as one service but is made up of two units which are separate buildings, one for general nursing residents and one for dementia residential residents. Both units were warm and welcoming with good odour control throughout. The general nursing unit is an older building and we noted that some of the internal doors would benefit from painting and were assured that a redecoration programme is ongoing. We also noticed that some glass in an external fire door was cracked and by the time of our second visit a new door had been ordered.

Both units benefited from spacious and homely communal areas, which people were free to use as they wished. There was also space for people to receive visitors privately if they wished. People were cared for in spacious single rooms which were decorated tastefully, warm and clean. People were encouraged to bring their personal belongings and personalise their rooms as they wished. We viewed a selection of bedrooms and noted that they contained the personal items of the person occupying them. People had access to communal bathrooms, toilets and shower rooms which were clean, clutter free and contained appropriate equipment in place.

Thomas Gabrielle is a locked facility which only allows authorised access to visitors. On both of our visits we were asked to sign the visitor's book and our identification was checked before we were allowed access to the home.

The home was clutter free and had appropriate hand rails in situ and flooring which enabled safe use of walking aids and wheelchairs. There is a lift in each unit to enable people to move safely between floors. The stairs had lockable gates in place and evacuation equipment in the event of a fire. All windows had appropriate restrictors in place and all harmful chemicals were stored away safely and securely.

We saw that all residents had a Personal Emergency Evacuation Plan (PEEP) in place, which is a plan on how people should be evacuated in the event of an emergency or fire. We viewed the maintenance file and saw that gas and electricity safety testing was all up to date and all serviceable equipment had certificates to confirm that they had been serviced appropriately. We did note that the maintenance files were very large and contained historical information and recommended that this is archived to make the files more user friendly and were assured that this is something the home intends to do.

Both buildings we found were in a good state of repair with maintenance carried out routinely as the home employs a maintenance worker, who is on site daily and carries out any work required.

4. Leadership and Management

Our findings

Both buildings benefit from a manager who is registered with Social Care Wales (SCW) and a deputy manager. The deputy manager in the nursing unit is registered nurse and has the role of the clinical lead within the home.

Staff we spoke to told us they were well supported and could approach the management with any issues, work or personal. A nurse we spoke with told us *"I have been a nurse for many years and this is the best place I have ever worked, they really do put the resident's needs first"*. A number of staff described the manager of the nursing unit as *"lovely"*.

We examined the supervision matrix and saw that staff were receiving supervision regularly; staff told us that the management were *"approachable and they would not hesitate to raise any issues"*.

Staff told us that they received regular training and could access any specific courses they wished to attend. We examined that training matrix and saw that there were very few gaps in training. We saw that the home had training courses booked in advance and had a system to identify staff training needs and book staff on in advance.

We viewed staff rotas and saw that staffing levels were being provided in line with those set out in the homes statement of purpose, which were sufficient to meet needs of people using the service at that time. The home had a full complement of care staff, but had a very small use of agency nurses due to shortages with nurses.

Leadership and management within the home understand legal requirements and are continually striving to make improvements.

We spoke to the RI on both days of inspection and were satisfied that he understood the requirements in regard to the role. The RI is very active and visible within the service and had completed quarterly visits with reports detailing consultation with staff and people using the service.

The home also completes six monthly quality assurance monitoring which informed what the service was doing well and where improvements need to be made. We viewed the last quality assurance report and felt it was thorough and robust and clearly evidenced how and when any improvements would be made.

The service had a clear complaints process in place and we were able to see evidence of complaints being taken seriously and dealt with swiftly. One family member described the management at Thomas Gabrielle as *"open and honest"* saying *"from the day we came here they have always been clear about what they can and cannot provide"*.

We viewed a selection of policies and procedures and again found them to be thorough and robust, but we did advise that the safeguarding policy would benefit from updating to include legislation and clear guidance on how to report abuse. We saw evidence that the home were making safeguarding referrals, Deprivation of Liberty Safeguard (DOLS) applications and submitting regulation notices as required, which evidenced that legal requirements were understood and being met. We saw that safeguarding referrals were being stored in different locations and advised that safeguarding referrals should be stored centrally with outcomes recorded, to allow audit of the information. We were given assurances that this would be implemented as soon as possible.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

This was the first inspection since the home re-registered under the Regulation and Inspection of Care Services (Wales) Act 2016.

5.2 Recommendations for improvement

The service was fully compliant with regulations, the following recommendations were made;

- Glass in the door at end of corridor needs replacing, due to being cracked.
- Some internal doors would benefit from painting.
- Safeguarding referrals to be kept in a central place with an outcome sheet for data to be accessed and interrogated.
- Maintenance files contain old information and some could be archived for ease of use.
- Safeguarding policy to contain legislation and clear guidance on how to report abuse.
- Call bells to be answered promptly at all times.
- Daily recordings could be expanded to reflect care being given.

6. How we undertook this inspection

We visited the service unannounced on 05 July 2019 arriving at 08:00am and leaving at 15:00pm. We returned announced on 09 July 2019 at 10:30am and left at 15:00pm. The following sources of information were used to formulate our report:

- A tour of the home.
- Discussion with RI and managers.
- Discussion with people using the service.
- Discussion with visitors present on the days of inspection.
- Discussion with professionals visiting the service.
- Review of a selection of policies and procedures.
- Review of a selection of service user files.
- Observations of practices within the home.
- Review of staff personnel files.
- Discussion with staff.
- Feedback from questionnaires.
- We reviewed information held by us including statement of purpose and notifications.
- *We used the Short Observational Framework for Inspection (SOFI). The SOFI tool enables inspectors to observe and record care to help us understand the experience of people who cannot communicate with us.*
- *We are committed to promoting and upholding the rights of people who use care and support services. In undertaking this inspection we actively sought to uphold people's legal human rights.*
<https://careinspectorate.wales/sites/default/files/2018-04/180409humanrightsen.pdf>

Further information about what we do can be found on our website:
www.careinspectorate.wales

About the service

Type of care provided	Care Home Service
Service Provider	Virgo Care Homes Ltd
Manager	There is two managers in post who are registered with Social care Wales
Registered maximum number of places	69
Date of previous Care Inspectorate Wales inspection	This was the first inspection following re-registration under RISCA.
Dates of this Inspection visit(s)	05/07/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	No
Additional Information:	

Date Published 10/09/2019