



Inspection Report on

Gelli Mor

Milford Haven

Date Inspection Completed

10/03/2023

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About Gelli Mor

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Gelli Mor Ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	18/02/2022
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People living in Gelli Mor are settled and comfortable. They are encouraged to become as independent as possible and make choices regarding how they live their lives. Care staff treat people with dignity and respect and have a good understanding of the needs of the people they support. Care documentation is accurate and up to date, helping care staff deliver good quality care. Care staff feel supported in their roles and receive regular, relevant training so they remain sufficiently knowledgeable and skilled. A safe recruitment process ensures care staff have the necessary skills and qualities needed for working in the care sector. Governance and quality assurance is overseen by the Responsible Individual (RI) who visits the service to discuss provision with people and staff. Written information such as policies and procedures are kept under review and guide staff to ensure best practice is followed. The environment is maintained to a good standard and promotes the independence and well-being of people living at the home.

Well-being

People are protected from harm and abuse, as far as is possible. People have risk assessments and management plans in place, helping to keep them healthy and safe. Care staff receive safeguarding training and there is a safeguarding policy which is aligned with current national statutory guidance. Care staff we spoke to said they are aware of their safeguarding responsibilities and the process for reporting concerns.

People are supported with their health and well-being and their independence is promoted whenever possible. Care staff know the people they support well and can recognise physical or mental health issues quickly. We saw evidence that advice is sought from relevant professionals, such as psychologists, GPs, social workers, dentists and opticians in order to promote people's health and well-being. There are medication management systems in place ensuring people's medication is stored and administered safely.

People are encouraged to voice their opinions and are treated with dignity and respect. House meetings are arranged in which people are supported to contribute and offer their opinions. People are also regularly consulted on an individual basis. People and their relatives or representatives are involved in their care planning and contribute to reviews of their care documentation. Personal plans are up to date and accurately reflect people's needs. We saw care staff interacting with people in a sensitive, respectful and informed manner.

People live in a home which supports their well-being. The home is spacious, clean and comfortable throughout. People personalise their rooms to their preference if they choose to. The home is maintained to a good standard. An ongoing programme of maintenance, checks and servicing promotes environmental safety.

Care and Support

All people living at the service have personal care plans in place. These set out the best ways of supporting people to achieve their personal outcomes. Care plans are person centred, meaning they are specifically tailored to each individual. We examined a selection of care plans and found they are clear and concise. Risk assessments are also included. These highlight potential risks and strategies for keeping people safe, both inside the home and in the community. They also highlight the benefits of taking risks, allowing people to experience positive risk taking. Care plans are regularly reviewed to ensure they remain relevant.

People have good relationships with care staff and with each other. We were given assurance by the manager for the service that people living in the home would always be consulted and considered before a prospective new resident was to be introduced. We observed positive interactions between people and care staff throughout our inspection. It was evident care staff know the people they support well and are familiar with their needs and daily routines. We saw care staff engaging with people in meaningful conversations, speaking in a friendly, informed and respectful manner.

Medication management systems are effective, ensuring medication is stored and administered safely. People have medication support plans detailing how and when they take their medication. They also contain information about their medication and any risks associated with it. There is a medication policy and care staff receive training to help them administer medication in line with best practice guidance.

Written information is available for people to view. The statement of purpose sets out the service's aims and objectives and evidences how it can meet the range of needs which are catered for. People are informed about the ways in which any concerns or complaints can be reported.

Environment

Gelli Mor can accommodate up to five people. The home is set over two floors and people use the different communal areas to socialise, participate in activities or have quiet time alone. People appear very comfortable within the service. Individual's rooms are personalised and people can decorate them as they wish. Accessible and well-maintained grounds are used throughout the year. People are encouraged to clean and tidy the home and to maintain the building to a good standard.

There is a continuous programme of checks and maintenance ensuring the environment, its facilities and equipment are safe. Utilities are regularly inspected by appropriately qualified people and have the necessary safety certification in place. There is a fire risk assessment and fire safety features such as alarms and firefighting equipment are regularly serviced. There is sufficient storage space available and substances hazardous to health are stored appropriately. The home is secure from unauthorised access with visitors having to sign in on arrival and out on departure.

The spacious, domestic style, kitchen/dining room is accessible to everyone and offers a natural place for people to socialise. Support workers promote independence and encourage people to buy and prepare their own meals. People discuss and agree the menu together and alternative meals are also available if people wish to choose something different.

Leadership and Management

Care staff are subject to a thorough recruitment process. This is to ensure they are suitable to work with vulnerable people. Pre-employment checks include references from previous employers and Disclosure and Barring Service (DBS) checks. On commencement of employment, new employees must complete a structured induction which is aligned with the All-Wales Induction Framework. Care staff are required to register with Social Care Wales, the workforce regulator. This is to ensure they are suitably qualified.

Care staff are trained to meet the needs of people living at the service and feel valued and supported. Care staff receive core and specialist training. Core training covers generic topics such as health & safety and safeguarding. Specialist training is specific to the needs of the people living at the service. We looked at records relating to training and found the service is compliant with its training requirements. We also looked at records relating to supervision and appraisal and found care staff are receiving the required levels of formal support. Care staff we spoke to said they feel supported in their roles. They told us they are supported well by their manager, who they can approach at any time, and by their colleagues. They reported a high sense of team morale and said the home is a good place to work in.

Governance and quality assurance measures help the service run smoothly. The Responsible Individual (RI) has good oversight of service provision. They visit the home and meet with people and staff to discuss their experiences and gather their views to inform improvements.

The staff rota indicates that sufficient numbers of staff are employed to meet the assessed needs of people living in the home and this appeared to be the case at the time of the inspection.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people’s well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement

Regulation	Summary	Status
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N/A	No non-compliance of this type was identified at this inspection	N/A
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Date Published 04/09/2023