



Inspection Report on

The Gables Care Home

**The Gables Care Home
Conway Old Road
Penmaenmawr
LL34 6YB**

Date Inspection Completed

28 June 2023.

28/06/2023

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About The Gables Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Inspired Homes Network Ltd.
Registered places	21
Language of the service	English
Previous Care Inspectorate Wales inspection	1 March 2022.
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

The Gables Care Home has a stable staff team who know people's needs well. We observed a good rapport between people and staff. Staff can anticipate people's needs and provide for them in a timely way. Care is planned around people's individual requirements and preferences which enables them to have choices in daily life. People can participate in activities if they wish and can go out for the day if they are able. There is open visiting in the home.

People are provided with the care they need. They have frequent reviews from the Advanced Nurse Specialist (ANP) to ensure they are in good health. There is good communication between the home and local GP surgery. People can access their prescriptions easily and as prescribed.

The home is an older building and is subject to continued maintenance to address wear and tear. The recommendations from the home's environmental health report have been actioned. They await a re-inspection to measure the improvements put in place. Outside areas have been cleared and there is a space for people to sit outside should they choose to. People have personalised their rooms to a high degree and told us they are happy with them.

There is good oversight of the smooth running of the service by the responsible individual (RI) who visits the home on a regular basis. Staff training and supervision are up to date. Staff told us the manager is supportive and approachable. Policies and procedures are available for staff to ensure good practice. These are regularly reviewed and updated.

Well-being

People have personal choices and are treated with dignity and respect in The Gables. We witnessed staff giving sensitive care and attention to people. Staff have a good rapport with people and can anticipate their needs in a timely way. People have personal choices such as how to spend their day. Their preferences are reflected in their personal care plans which are centred around their individual requirements. People told us they are happy in the home and are treated well. We saw people's rooms are personalised to a high degree; they can choose their own décor. We saw this incorporates people's favourite colours and themes. Staff know people's preferences, and can discuss people's routines, for example, who likes a night light and who does not. People can have a choice of meals, and snacks and drinks are readily available.

There is open visiting in the home and people are supported to remain in touch with loved ones. People can go out for the day if able. We saw the manager taking a person to the local shop which they enjoyed. Another person was assisted to use the phone to speak to a relative. Other residents were seen watching TV and conversing in the lounge. We saw a person enjoying a visit from a relative. There are lounges for people to use and an outside area to sit in if they wish.

Staff have updated training in safeguarding, this is to keep vulnerable people in their care safe. Staff can describe local processes for contacting the safeguarding team should they be concerned about people's care.

Care and Support

People have care plans which are tailored to their individual needs. Personal plans provide a pen picture of the person, their preferences and chosen routines. Personal plans are frequently reviewed to ensure the care given meets people's needs. Appropriate risk assessments are in place to keep people as safe as possible; these are up to date. Health care appointments and outcomes are documented to inform all staff of any changes to the person's care needs.

People are supported to be as healthy as possible. We saw evidence of people being enabled to attend appointments such as dentist, optician, and outpatient clinic appointments. The Advanced Nurse Practitioner (ANP), in the local GP practice praised the manager and staff for anticipating people's needs and always contacting them with any problems in a timely manner.

People have their medications as prescribed. We saw medications are stored in a safe and appropriate manner. Medications are dispensed as per the prescription chart. Staff are updated regarding their medications training. Staff praised the local GP practice and said they always ensure people have their prescriptions and have regular health reviews.

Staff are aware of local safeguarding procedures to keep people safe. Appropriate incidents are reported to the safeguarding team and CIW.

Environment

The home was given many recommendations by the environmental health service regarding the kitchen, these have now been addressed. The service awaits a re-inspection from the environmental health team to measure the many improvements they have made. The main part of the home is an older building which is subject to usual wear and tear. There is an ongoing plan for maintaining the home inside and out. The management team and RI have given their free time to clearing outside spaces, cutting trees, and creating a new area for people to sit out in. The inside of the building presents as clean and tidy, corridors and fire escapes are free from obstructions. The RI assures us the maintenance is ongoing to ensure a comfortable home for people.

Regular checks are in place to ensure good environmental health and safety. The service has their own maintenance person who ensures utility safety checks for water, gas, electricity, and servicing of essential equipment are in place. People can access equipment needed for their safe care; these are serviced regularly. Indemnity insurance for the home is up to date.

Leadership and Management

The RI has good oversight of the service. The RI visits the home regularly and keeps records of who he has spoken with to ask their views regarding the service. This is to ensure a continually improving service to meet the needs of people and staff. There is a good managerial structure in place to ensure that there is cover when the manager is on leave. The RI measures the quality of the service provided and produces a report in compliance with the regulations.

There is good recruitment and retention of staff. We saw this from personnel files and work rotas. Staff told us they are happy working in the home and are well supported. Staff told us managers often work alongside them and are approachable. Staff records have checks in place to ensure staff are appropriate to work with vulnerable adults. Staff training and competencies are up to date, this supports them in their work ensuring they have updated knowledge and skills. There is evidence of up-to-date supervision and annual appraisal for staff. This ensures staff are supported and use best practice in their work. Policies and procedures are within date and are available for staff to refer to.

The RI has not declared financial difficulties to CIW. People have access to plentiful meals and snacks. Equipment needed for people's care is in good condition. Staff numbers and retention are good.

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
27	The service provider must ensure there is an up-to-date safeguarding policy and procedure in place.	Achieved
44	There are signs of general wear and tear in different areas of the home. The service provider must ensure the redecoration and upgrades required to the environment are carried out.	Achieved
35	The service provider must ensure all checks in relation to staff suitability to work with vulnerable people are completed prior to their employment at the service and are kept on file.	Achieved
36	All staff must have an annual appraisal which provides feedback on their performance and identifies areas for training and development in order to support them in their role.	Achieved
79	The RI must put suitable arrangements in place to ensure policies and procedures are kept up to date and are in line with national guidance.	Achieved
57	The RI must put suitable arrangements in place to ensure the fire risk assessment and policy is up-dated.	Achieved

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