



Inspection Report on

Green Gables

Bridgend

Date Inspection Completed

13/03/2023

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About Green Gables

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Values in Care Ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	8.7.2021
Does this service provide the Welsh Language active offer?	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 at Green Gables benefit from care and support delivered by a consistent staff team who are familiar with the needs and wants of the people they support. The service actively promotes choice which enables people to do the things that matter to them. There is a person-centred approach to care planning, ensuring people's outcomes are identified and they are treated as individuals. People live in a pleasant and homely environment that is warm and suitable to meet their needs. There is information available for staff to understand how to best meet people's care and support needs. Staff are available in sufficient numbers to provide support to people. Care workers receive appropriate support and supervision to meet regulatory requirements. Care workers are knowledgeable, respectful, and caring. Safety equipment is in place and health referrals are made when necessary to promote people's health and well-being. There are checks and processes in place to keep service delivery under constant review.

Well-being

People are supported to make choices and to have control over their day-to-day lives. The service has an established team of care workers who know the people they support well. Personal plans set out people's outcomes and contain detailed information on how best to support the person. Plans are detailed, clear and concise. Plans are reviewed routinely to ensure they are current. Risks are thoroughly assessed, and care workers are aware of the thresholds for intervention. People can access individually tailored activities that include leisure pursuits as well as domestic tasks.

There are measures in place to keep people safe. Care workers are aware of their safeguarding responsibilities and are trained to keep adults at risk safe. Care workers are recruited in line with regulations and are subject to pre-employment checks to ensure their suitability for the role. Medication is securely stored and administered as prescribed. Policies and procedures are available which promote safe practice. Care staff adhere to infection prevention and control measures and have access to a plentiful supply of personal protective equipment to reduce the risk of cross contamination.

People live in suitable accommodation, which supports and encourages their well-being. Rooms are personalised with items of choice. They are suitably furnished and have facilities, which encourage independence whilst maintaining safety. The environment is safe, free from hazards and well maintained. Safety checks are completed when required and there is a fire risk assessment in place. Alarm testing and fire drills take place regularly and people have personal evacuation plans in place.

There is a clear management structure for the service. We received positive feedback from the staff we spoke with, who told us they feel valued and supported by the manager. There are effective systems for monitoring and auditing standards of support and the environment. The statement of purpose is available to individuals or their representatives.

Care and Support

Personal plans set out people's care, support needs, and highlight any risks to the person's health and well-being. We examined a number of personal plans and found they are outcome focused and person centred. This means the information recorded in them is specific to the care and support needs of the person. Files contain a social history of each person so care staff can get to know them and their lives before coming to the home. Personal plans are regularly reviewed to ensure they are up to date and reflect people's current needs. Risk assessments outline people's vulnerabilities and provide information on how to keep people safe. Daily records are up-to-date and are used to monitor people's overall health when necessary. Care workers support people to eat as varied and as balanced a diet as they can. There is a four-week rolling menu and we saw food is freshly prepared. People have an individual, varied and regular programme of activities. Relatives told us *"I'm happy with the care, I totally trust them"*, *"I'm more than pleased with this place"* and *"in one word its marvellous"*.

Care workers are able to identify when people may be at risk of harm or abuse, and appropriate safeguarding procedures are in place. We saw risks to people's health and safety are included in care plans and risk assessments. The staff members we spoke to are aware of their personal responsibilities in keeping people safe and told us they would report any issues of concern. They are aware of the whistleblowing procedure, and said they feel confident approaching the manager if they need to. Staff told us they had undertaken training in safeguarding and there is a current safeguarding policy for all staff to access and follow.

The service has safe systems in place for medicines management. There is an appropriate medication policy and procedure in place with regular audits completed by shift leads. Medication administration records are accurate. We saw that medication is kept secure in the locked medication room. As and when required medication (PRN) is appropriately administered in line with instructions. There are procedures in place for ordering medication and disposing of unused medications and records of this were seen.

Environment

People are cared for in safe and secure surroundings. People living in Green Gables have a personalised bedroom with one person living on the ground floor having their own lounge area as well. There is an ongoing programme of refurbishment. People now benefit from a newly designed kitchen, which promotes inclusion. There is an activity room in the garden which has sensory lights, books and games console.

There is an ongoing programme of maintenance, repair and checks in place to ensure the environment is safe. Restricted areas are locked and safety features such as window restrictors are fitted. We examined records relating to environmental safety and found utilities, equipment and fire safety features are subject to routine checks and servicing by suitably qualified trades people. The service completes health & safety audits monthly.

The service maintains good standards of hygiene and infection control. We found the home to be clean and hygienic throughout. All staff follow current Public Health Wales (PHW) guidelines, and appropriate personal protective equipment (PPE) was available throughout the home during the inspection. Infection control audits are undertaken.

Leadership and Management

Care staff enjoy working at the service and feel supported in their roles. Records relating to supervision show staff are receiving the required levels of formal support. This helps aid their professional development and gives them the opportunity to discuss things like workload or concerns they may have. Care staff we spoke to confirm the management team are always accessible and provide a good level of support. Care workers told us “*The manager is helpful, we get on great*”, “*I enjoy working here*” and “*she is very supportive*”.

Staff caring for people living at Green Gables are safely recruited but improvements are required to ensure they are suitably trained. Training records show not all care staff have up-to-date refresher training in core areas of care. We advised this is an area for improvement, and we expect the provider to take timely action to address this.

Quality assurance measures support good practice. Documented evidence shows the responsible individual (RI) visits the service regularly and discusses operational matters and service delivery with staff and people. The RI also analyses a range of different areas relating to people, staffing and the environment to look for areas of good practice and identify where improvements are needed. On a six-monthly basis a quality-of-care report is produced which highlights the services strengths.

Written documents including policies and procedures support the smooth running of the service and promote safe practice. We saw policies are reviewed regularly so they remain aligned with current legislation and best practice guidance. Other written documents we saw included the statement of purpose and the service user guide. Both documents accurately describe the service and contain all the required information.

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

36	The provider is not compliant with Regulation 36(2)(d) and not all staff have completed core refresher training	New
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Date Published 20/04/2023