



Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru
Care and Social Services Inspectorate Wales

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Care Standards Act 2000

Inspection Report

Thomas Gabrielle EMI Home

Victoria Street
Old Cwmbran
Cwmbran
NP44 3JP

Type of Inspection – Focussed
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Summary

About the service

Thomas Gabrielle EMI Home is one of three registered care homes operated by Virgo Care Homes in Old Cwmbbran. It is registered to provide personal care to up to 26 service users with dementia.

What type of inspection was carried out?

We (CSSIW) carried out an annual unannounced focussed inspection. We concentrated on the quality of life of the people who live in the home but in doing so, also made findings relevant to the quality of staffing, the environment and home management.

Sources of evidence included:

- Examination of care plans and other residents' records.

- Observation of care practices and daily life in the home.

- Discussion with the manager and deputy, care staff, two service users, a visiting relative and a visiting Health care professional.

- Analysis of the records relating to service user activities and the staff Induction process in discussion with the Home's activities co-ordinator and Virgo Care Home's training manager respectively.

What does the service do well?

- Provides a well managed, person centred service in a warm and friendly environment.

- Documents care provided to a high standard.

- Pays particular attention to meeting people's need for social stimulation.

What has improved since the last inspection?

No requirements were made at last inspection. However the service continues to critically assess its performance with a view to enhancing its existing high standards. Issues relating to documentation and referral process drawn to attention at the last inspection have been fully addressed.

What needs to be done to improve the service?

We found the Home to be compliant. Some best practice issues were identified in discussion with the manager which resulted in some observations/recommendations being made with regard to record keeping and care planning.

Quality of life

Physical and Emotional well being

We (CSSIW) found that people experience positive outcomes with regard to their physical and emotional well being. This is because:

Appropriate referrals are made to Health care professionals.
 People are supported by staff who know them well.
 Comprehensive record systems are in place detailing people's needs and the actions staff should take to meet them. Record systems are well maintained.

The above was evidenced by:

Positive feedback provided by a visiting Health care professional on the day of inspection, who confirmed that staff are pro-active in making referrals and act reliably on guidance given to promote health and well being.
 Direct Observation of staff/resident interaction which confirmed that staff are vigilant in providing support to people who show signs of distress.
 Detailed observation of the midday meal provided (in the upstairs dining room). We observed that staff provided a range of support based on individual need, fostering independence by the discreet and respectful use of verbal prompting but also giving one person full assistance to eat in an unhurried manner.
 Two residents spoken with who expressed their satisfaction with the care they receive. One resident made special mention of staffs friendliness, the other said she was "happy in every way" with life at the home.
 One resident's relative interviewed who said she was very satisfied with the care provided and felt that her mother had benefitted particularly from the opportunities to socialise offered by the Home.
 Computerised record keeping and communication systems in place which facilitate regular review, the updating of records and ease of managerial oversight. Records are maintained to a high standard.
 Some paper based record systems are also in place to assist staff in monitoring care provided. For example, records relating to food and fluid intake are held in folders in the homes dining rooms. Where intake is a matter of concern, very detailed records of food and fluids given and quantities consumed are recorded throughout the day. Individual records seen were completed in full with no gaps in recording. There was also evidence that residents potentially at risk due to concerns regarding their nutritional intake are weighed regularly.

In view of the above we are satisfied that queries raised at last inspection with regard to the effective monitoring of residents nutritional intake and skin integrity and subsequent action taken with regard to appropriate referral have been addressed in full by the evidence in place.

Fulfilment

We found that people are supported and encouraged to lead fulfilling lives. This is because :

There is a commitment to promoting stimulating activities within the Home and to supporting people to access the community.
Residents benefit from the services of an experienced Activities Co-ordinator.

The above was evidenced by:

An analysis of activities records in discussion with the Activities Co-ordinator. In house activities take place in the afternoon and include quizzes, exercise to music, sing-along's, bingo and food tasting.

The Activities Co-ordinator keeps detailed records on an individual basis and scores factors such as participation, enjoyment and concentration with regard to each activity against a fixed scale. Scores determined provide not only information useful in tailoring activities to meet people's preferences but may also be used to gauge well being. For example, records would highlight a diminishing ability to concentrate over time.

Direct observation of the support staff provide to promote social interaction. In the morning this involved staff sitting and talking quietly with individuals and some people being given one to one support to access the community. In the afternoon visiting relatives, lively activity sessions and use of the Home's garden all served to create a warm, friendly stimulating environment.

Rights and Control

We found that the Home respects people's rights and promotes choice and independence. This is because :

There is a person centred ethos within the Home.

Due process is observed when decisions are taken in people's best interests and is used to empower them in decision taking. Process is well documented.

The above was evidenced by:

Discussion with the Cook and direct observation of the control people exercise over meal choices.

Documentation in place in residents records with regard to mental capacity assessment and best interest decisions.

Record of complaints investigation.

Full documentation demonstrating the involvement of appropriate stakeholders in validating a residents wishes in respect of resuscitation.

We made three observations to the manager regarding best practice and the Home's record keeping and care planning systems. She confirmed the following:

Remaining examples of 'group records', where information relating to an aspect of one person's personal care cannot be viewed without also seeing information relating to others, are being phased out.

Staff continue to work to achieve the greater personalisation of care plans.

We pointed out that assessment and care planning systems in place do not use the same headings. One possible consequence of this is that care plans may not be put in place to address each identified need. We illustrated this by reference to communication needs. The manager pointed out that some aspects of communication were referred to in existing care plans but agreed it would be

best practice to put comprehensive communication care plans in place and confirmed her intention to do so.

Quality of staffing

This inspection focussed on Quality of Life. CSSIW did not consider it necessary to look at the Quality of Staffing in detail on this occasion. However an analysis of the home's induction process in discussion with Virgo Care Home's training manager confirmed that a well organised programme of induction (including taught workshops, shadow shifts where new staff are supernumerary and mentoring) is in place.

In addition, discussion with a team leader confirmed that she felt the training and support offered in the home ensured she was well prepared to provide residents with the care required.

Quality of leadership and management

This inspection focussed on quality of life. CSSIW did not consider it necessary to look at the quality of leadership and management on this occasion. However discussion with staff and records inspected provided clear evidence that the home is well managed. Staff comments indicated that they value the open style of communication adopted by the home's management staff and that they feel well supported in their work.

In addition very clear systems of devolved responsibility (to team leaders and key workers) regarding various aspects of residents' care are in place and records confirm appropriate oversight by management staff.

Work carried out (for example, satisfaction surveys and internal audit) in preparation for the production of a Quality Assurance report was also noted.

Quality of environment

This inspection focussed on quality of life. CSSIW did not consider it necessary to look at the quality of the environment on this occasion. However, general observation confirmed that good use had been made of signage and colour coding to assist people with dementia to orientate themselves within the Home.

How we inspect and report on services We conduct two types of inspection; baseline and focussed. Both consider the experience of people using services.

Baseline inspections assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

Focussed inspections consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focussed inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focussed inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet 'Improving Care and Social Services in Wales'. You can download this from our website, [Improving Care and Social Services in Wales](#) or ask us to send you a copy by telephoning your local CSSIW regional office.