

# CAERPHILLY COUNTY BOROUGH COUNCIL, DIRECTORATE OF SOCIAL SERVICES

## COMMISSIONING TEAM

### Contract Monitoring Report

**Name/Address of provider:** Gilwern House

**Date/Time of visit:** 5 July 2018

**Visiting Officer(s):** Caroline Roberts, Contract Monitoring Officer

**Present:** Deborah Gordon, Registered Manager  
Iris West, Registered Individual

## 1 Background

- 1.1 Gilwern House is a large detached building in Pontllanfraith, which is registered to provide residential care to 13 people.
- 1.1.2 At the time of the visit, there were 12 residents; therefore leaving 1 vacancy. The last full monitoring visit was unannounced and was conducted on 16 January 2018 and there were no Corrective or Developmental Actions noted.
- 1.1.3 The visiting officer employs a variety of monitoring systems to gather and interpret data as part of the monitoring process, including observations with staff, service users and relatives where possible.
- 1.1.4 This monitoring visit was announced and included examination of documentation, speaking to staff, residents and relatives and spending a large proportion of the day within the home.
- 1.1.5 CCTV was introduced to the home in 2017 after a consultation period with residents/relatives and staff. The home has ensured that notices are clearly displayed and that the Information Commissioners Office has been informed.

## 2 Previous Recommendations

- 2.1 Corrective actions
- 2.1.2 None recorded
- 2.2 Developmental actions
- 2.2.1 None recorded.

### **3 Findings**

#### **3.1 Documentation**

- 3.1.1 For the purpose of the monitoring visit, two resident files were examined. Both files contained a pre-admission assessment, which identifies if the home can meet the needs of the individual.
- 3.1.2 The Personal Plans were very detailed and were person centred. One file evidenced that the individual's daughter had been involved in the development of the plan and had signed it. With the second file viewed, again it was evident that the person's daughter had assisted with the development of the Personal Plan; however, there was no signature. This was discussed with the Manager who advised that she was aware of this matter and would endeavour to obtain a signature.
- 3.1.3 Risk Assessments were observed to be present on both files and were detailed. The assessments covered pressure areas, falls, challenging behaviour, hygiene, skin viability, use of bed rails etc.
- 3.1.4 The information contained within the documentation clearly evidenced that staff have a good understanding and knowledge of the individuals that reside at the home. This was also evidenced when speaking to a member of staff and when observing staff interaction.
- 3.1.5 Whilst under the new regulations (RISCA) reviews are to be undertaken 3 monthly, it was positive to note that reviews are undertaken on a monthly basis, with the last being recorded as being undertaken on 26 June 2018. Any change in need is recorded appropriately and relayed to staff via handover and via the communication book, which is accessible to all staff employed at Gilwern House.
- 3.1.6 Both files evidenced that the home makes appropriate referrals to outside agencies i.e. SALT, OT, GP, Falls clinic, Chiropodist.
- 3.1.7 Both files contained information that should an incident occur, family members are to be contacted.
- 3.1.8 Up-to-date PEEPs (Personalised Emergency Evacuation Plans) were also observed on both files.
- 3.1.9 Whilst being a sensitive subject to discuss, it was positive to note that whilst viewing both files, DNACPR (Do Not Attempt Cardio Pulmonary Resuscitation) discussions had taken place; therefore, allowing individuals a choice and to express their wishes.
- 3.1.10 The Manager advised the visiting officer that appropriate DoLs (Deprivation of Liberty Safeguards) applications had been made. The Manager was observed making telephone contact with the DoLs Team in order to enquire on the position of the applications already submitted.

#### **3.2 Relatives and Residents**

- 3.2.1 The home operates an open door policy and there are no restrictions as to when relatives of the residents may visit.

- 3.2.2 During the monitoring visit, the visiting officer had the opportunity to meet with a relative and discuss the care and support her mother receives as a resident of the home.
- 3.2.3 Throughout the conversation, the visiting officer asked the relative various questions in respect of the care and support offered. The relative advised that she always feels welcome when visiting her mother and that the atmosphere at the home is always good.
- 3.2.4 Whilst being invited to relatives/resident meetings, the relative advised that she chooses not to attend.
- 3.2.5 The relative informed the visiting officer that whilst she has no complaints, she would feel comfortable in approaching the manager or any of the senior staff.
- 3.2.6 The staff were described as “*really nice*” and the relative advised that all at Gilwern House have assisted in making the resident comfortable and providing a good quality of life.
- 3.2.7 The resident was present during the discussion with their relative and contributed to the conversation. The resident was very complimentary about the home and also the staff. The resident presented as looking well and was appropriately dressed for the warm weather.
- 3.2.8 Another family member recently fed-back that ‘*If all the Residential Homes were like Gilwern House in Wales, we would be the envy of the World*’

### 3.3 Activities

- 3.3.1 On arrival at the home, the visiting officer observed the majority of residents sitting the lounge area, playing a game with the activity co-ordinator. This concluded and music was played for those present to undertake armchair exercises. The residents were laughing and talking with each other whilst exercising and engaging with the carers that entered the room. The atmosphere was relaxed and residents and staff were engaging with each other with ease and familiarity.
- 3.3.2 Photo’s of activities and visiting artists are on display and hardcopies are also stored in a photo album. It was a special birthday recently for the RI and therefore, the home held a birthday party and it was clear from the photo’s that a good time was had by all.
- 3.3.3 The home has held an Eisteddfod day, with residents submitting hand made crafts, personalised poems etc. They also held their very own Eisteddfod bar ceremony!
- 3.3.4 It was evident that the home makes every effort to ensure that the residents are entertained. This can be in the form of sing-a-longs, parties, arts and crafts, playing memory games, visiting artists etc.
- 3.3.5 One individual has made the choice not to leave their bedroom; therefore, staff will go and sit with the resident and hold discussions on what is on the T.V. or are happy to be led by the individual. This is the residents wish and it is respected by the staff.

### 3.4 Facilities and Observations

- 3.4.1 Due to a number of residents now using mobility aids, the home will be expanding the lounge area into the conservatory; thus allowing more room for residents to mobilise. Consultation has taken place with the residents, family and staff employed at the home.
- 3.4.2 Just outside the conservatory is a small garden, which is home to a gazebo and garden furniture. During the monitoring visit, the garden area was being enjoyed by a few residents and their guests, while others chose to remain indoors.
- 3.4.3 The dining tables were neatly and invitingly laid out, with name plates and appropriate drinking cups available.
- 3.4.4 A fire assessment is expected to be undertaken in September 2018. During the last inspection one recommendation was made and has been completed. Fire drills are undertaken every 3 months, with the last being in April 2018.
- 3.4.5 Arrangements are in place for the safe storage of money and valuables. Records are appropriately maintained of any monies going in/out and are witnessed by 2 staff members.

### 3.5 Quality Assurance

- 3.5.1 The visiting officer was advised that the home is currently commencing the process of undertaking quality assurance. Questionnaires are expected to be distributed this month. Unfortunately at the time of the visit, the home was approximately one month behind its Quality Assurance. The final report will be shared with the visiting officer on completion.
- 3.5.2 Whilst the home has a Complaints/Compliments process in place, very few complaints are received. The visiting Monitoring Officer has not received any complaints in respect of the home and Social Services have referred no complaints the Local Authority's Commissioning Team in the last year. However, the Manager advised that she receives sporadic minor representations from residents, which are amicably resolved within Gilwern House without the need to escalate within the complaints procedure.
- 3.5.3 Staff meetings are held every 3 months and various topics are discussed i.e. the legislation regarding data protection (General Data Protection Register), finance/budgeting, training, expectations, personal plans, fire drills, I Stumble (fall assessment tool) etc. Minutes are taken of the meetings and staff are required to sign in order to evidence that they have read, understood and agreed the content of the minutes.
- 3.5.4 Resident/Relative meetings are also held on a 6 monthly basis. The last meeting held discussed: activities, suggestions, ideas, bingo, menu changes, the resident's entertainment fund and what the residents would like to spend it on etc. Minutes are also taken of the meeting.

3.5.5 With regard to the staff handover process, this is the Day's Senior Carer's responsibility and each individual is discussed to advise staff coming onto duty of any relevant, important changes etc. Whilst minutes of the handover are not recorded, there is a specific format of how the handover is to be undertaken. There is also a separate communication book insitu, for Senior Carers, which was put in place as a result of a suggestion made by a carer. The Manager advised that the book is an asset and is working well as it communicates appointments, records of specimen samples, reminders to contact professionals, medication issues etc. which are separate matters from everyday communications with all staff.

3.5.6 The home currently has no individual that communicates in the medium of Welsh. When asked how the Active Offer is being implemented, the Manager advised that whilst she has basic knowledge of the Welsh language, consistent care in the medium of Welsh, would not be possible at present.

### 3.6 Training

3.6.1 The Manager of Gilwern House is recognised as a Dementia Champion, with staff being Dementia Friends.

3.6.2 Should an individual require support or advocacy services, then the home makes a referral to the organisation 'Disability Can Do' and staff are also aware of how to direct individuals to other advocacy services.

3.6.3 The visiting officer viewed the Training Matrix. As of April 2018, 92.3% of care staff had the expected qualification with the remainder working toward it. The Manager has Level 5 in Social Care.

3.6.4 Mandatory training is undertaken and was found to be up-to-date. Such training includes Food Hygiene, Safeguarding, Infection Control, First Aid, Medication Awareness, Dementia. Non Mandatory training is also undertaken to assist and support the residents i.e. Oral Care, I Stumble, Sepsis, Advance Care Planning, Skin Integrity, Data Protection (GDPR).

3.6.5 Training is provided by the Home Manager, privately commissioned facilitators and also the Blaenau Gwent and Caerphilly Social Care Workforce Development. Whilst e-learning is not currently accessed by staff at Gilwern House, this is under consideration.

3.6.6 Training is evaluated by staff feedback and by the Manager observing the staff implementing the skills and knowledge obtained from a course.

3.6.7 The Supervision Matrix was viewed and it showed that staff are in receipt of 3 monthly supervisions. However, the Manager acknowledged that supervision is currently a month behind due to recent changes in staff roles/responsibilities.

3.6.8 Supervisions are held on a 1:1 basis and appraisals have been scheduled to commence in August 2018.

## **4**      Staff Questions

- 4.1      During the course of the visit, one member of staff was spoken to in depth. The individual had an extensive background in caring and was an experienced member of the team.
- 4.2      The visiting officer asked questions about a particular resident and the member of staff was able to demonstrate excellent knowledge of the residents they support and good insight into personal preferences.
- 4.3      The member of staff advised of how they communicate with an individual who chooses to remain in their room due to mobility problems. They discuss tennis and the individual especially enjoys the rugby season.
- 4.4      They advised that they are encouraged to offer suggestions regarding improving the quality of life for residents and that the Manager actively listens to ideas.
- 4.5      The member of staff advised that she does not feel restricted in the role or restricted by tasks and routines. The carer advised that she was flexible in her approach as she has assisted with cleaning, undertaking activities with the residents and also assisting in the kitchen.
- 4.6      Safeguarding was discussed and the member of staff advised how she would act upon seeing poor practice.
- 4.7      The visiting officer also spoke with Manager in respect of the support that is offered to her by the Registered Individual (RI). Support is regularly available with the RI frequently visiting the home and being actively involved.

## **5**      General

- 5.1.2    Gilwern House is a family business and has a very warm and homely feel to it. During the visit there were no malodours identified and no hazards.
- 5.1.3    The carers were observed to be very attentive to the residents and there was a very positive response to the activities being undertaken during the visit. The atmosphere was informal, with all present addressing each other by first names.

## **6**      **Corrective and Developmental Actions**

### 6.1      Corrective

- 6.1.2    Personal Plans are to be signed by the Manager.
- 6.1.3    Personal Plans are to be signed by the resident or a representative.

### 6.2      Developmental actions

- 6.2.1    None

## 7 **Conclusion**

- 7.1 The monitoring visit was positive with the visiting officer observing good interaction between staff and residents.
- 7.2 Routine monitoring will continue at Gilwern House and Monitoring Officer would like to thank all involved for the hospitality shown during the visit.

Author: Caroline Roberts  
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Date: 17 July 2018

N.B. This report will be made available via Caerphilly County Borough Council's Internet site. Hard copies of the report will also be made available to prospective residents and/or their families should they ask to see them.