

Mr & Mrs D Caley

Laurieston Care Home for the Elderly

Inspection report

Laurieston Care Home
Albion Terrance
Saltburn By The Sea
Cleveland
TS12 1JY

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Laurieston Care home for the elderly is a 'care home.' People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

Laurieston care home for the elderly is located in Saltburn-by-the-Sea. The service can accommodate up to 16 older people who require residential care. This includes people who live with a dementia. At the time of inspection, there were 11 people using the service.

At our last inspection on 19 March 2016, we rated the service as good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

Staff supported people to live in a safe environment; staff understood the procedures to follow to protect people from abuse and harm. Risks were continually assessed, although some risk assessment records needed to be amended to provide the information needed to support staff. Planned fire drills had taken place. The fire risk assessment was out of date. Accidents and incidents were reviewed and there was evidence that lessons had been learned. Staff were recruited safely and there were always enough staff on duty. People's medicines were safely managed. Water temperatures were low; however, these were addressed during inspection. The service was clean.

Staff understood and followed recognised guidance for caring for older people. Staff were supported with regular reviews and training to do this. People were supported with their nutritional and healthcare needs. Recommendations from health professionals had been followed. An improvement plan was in place to continue to update the environment. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People told us they were happy with the care and support they received from staff which was dignified at all times. People were involved in all aspects of their care and staff knew how to access local advocacy services for people.

People received person-centred care from experienced staff who knew their needs well. Staff were responsive when people's needs changed and action was taken to seek support. Care records were in the process of being updated but did provide the information needed. People were involved in regular activities and the service was well known in the local community. No complaints had been received since the last inspection.

The registered manager and staff worked as a team to provide the right support for people. Quality assurance systems were in place, however needed to be more formally recorded. Information was shared with people, their relatives and staff and any areas identified for action had been addressed. The staff at the service were transparent during inspection and when working with other health and social care professionals. Notifications had been submitted when required.

Further information is in the detailed findings below.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service remained good.

Is the service effective?

Good ●

The service remained good.

Is the service caring?

Good ●

The service remained good.

Is the service responsive?

Good ●

The service remained good.

Is the service well-led?

Good ●

The service remained good.

Laurieston Care Home for the Elderly

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We carried out an unannounced comprehensive inspection on 3 and 4 December 2018. One adult social care inspector carried out this inspection.

Before our inspection we reviewed all the information we held about the service. We examined the notifications received by the Care Quality Commission (CQC). Notifications are changes, events or incidents that the provider is legally obliged to send us within the required timescales. We also contacted the local authority commissioning team at Redcar and Cleveland Borough Council to seek their views on the service provided. This information was used as part of our inspection planning.

We used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection we spoke with three people using the service. We also spoke with the provider, four care staff and the cook. We reviewed two care records, two medicine administration records, two staff recruitment and induction records, four supervision, appraisal and training records as well as records relating to the day to day running of the service.

We carried out observations of practice during inspection in communal areas. We also visited people in their room with their permission.

Is the service safe?

Our findings

At the last inspection we rated the safe domain as good. At this inspection, the service had maintained this rating.

People told us they felt safe living at the service. One person told us, "I feel very safe here. The staff look after me really well." Staff knew people well, understood and managed the risks to people. Risk assessment records needed to be updated to reflect the current risks to people. Safeguarding procedures had been followed when needed. Accidents and incidents had been recorded and actions put in place to reduce the risk of reoccurrence. The systems in place ensured lessons were continually learned.

Up to date certificates were in place to show the building and equipment was safe for people and staff. Planned fire drills had been completed, but been noted in a diary rather than formally recorded. The fire risk assessment had not been reviewed for over a year. The registered manager took immediate action to address this. People and staff, we spoke with knew the action they needed to take in the event of a fire. Some water temperatures were below safe temperature limits. The provider arranged for a plumber to attend the same day of inspection to address this.

People were recruited safely. We asked the provider to review whether staff in non-caring roles, such as the cook and domestic staff needed a DBS certificate because they had regular contact with people. Shortly after inspection, the registered manager told us applications for a DBS certificate had been submitted. There were enough staff on duty at all times. Good practices were in place to manage people's medicines. The service was clean and tidy. Staff understood their roles in the management of infection prevention and control.

Is the service effective?

Our findings

At the last inspection we rated the effective domain as good. At this inspection, the service had maintained this rating.

Thorough assessments had taken place before people moved into the service and this information was reviewed to make sure the care people received was in line with their needs. Staff were supported to deliver safe care and support to people. This included supervision, appraisals and training. They had been recorded in a diary, rather than formally recorded. Staff were also able to raise concerns or ask questions informally.

People were supported with their nutritional needs. Menus were in line with people's preferences and all the food was freshly cooked each day. One person told us, "The food is great, just the kind of stuff I like." Drinks and snacks were available in communal areas for people to have at their leisure. Staff were aware of who needed support with fortified (increasing the nutritional value) meals and whose nutritional and fluid intakes needed to be monitored. One person told us, "The staff are always trying to get me to eat a bit more. I know they are looking after me." Staff followed the guidance provided by health professionals and records had been kept up to date.

People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS). During this inspection, there was no-one at the service who had a current DoLS in place. MCA assessments had been put in people's care records for each specific care need for those people who had capacity. The provider told us this was in-line with external advice. We asked them to remove these because this practice was not in-line with MCA (2005).

The provider had maintained the features of the building whilst maintaining the decoration of the service. Carpets and decorative aspects of the service needed to be updated; an improvement plan was in place to address this. People were able to navigate their way around the building easily.

Is the service caring?

Our findings

At the last inspection we rated the caring domain as good. At this inspection, the service had maintained this rating.

People told us they enjoyed living at the service and were very happy with the care and support they received from the experienced staff team. One staff member told us, "We have the best love to give to people. There is plenty of good care and plenty of laughter." One person told us, "I get looked after. They [staff] are wonderful." During inspection we observed people's dignity was maintained at all times. When we spoke with people, they confirmed this to be the case.

During our discussions with people and staff and from our observations, we found that staff knew people's needs well. Staff were relaxed in their approach and we observed plenty of positive interaction and friendly banter between people and staff as well as relatives. One staff member told us, "I like that it's small here. I've got to know all of the residents, their stories and backgrounds. It's never too busy and we have time for everyone."

People told us staff were able to meet their needs and they had been involved in all aspects of their care which was regularly reviewed. Staff knew how to access support for people from their local advocacy services if needed.

People were supported to maintain relationships with those important to them. Relatives were invited to stay for meals and staff had supported one family to hold a silver wedding anniversary party. During visits, people were given the time and privacy which they needed. Relatives told us they could visit at any time and during the inspection we saw people receiving visitors. The registered manager told us care records would be available for people in large font if required. In addition, other reading material such as books were available in large font.

Is the service responsive?

Our findings

At the last inspection we rated the responsive domain as good. At this inspection, the service had maintained this rating.

People received person-centred care and support in line with their needs, wishes and preferences. Staff told us about people's individual needs, likes and dislikes. People could get up and go to bed whenever they wanted. Care records were in the process of being developed to make sure they gave a thorough overview of people's needs. However, we could see that staff knew people very well. One person told us, "The staff know how to look after me and my care is excellent. I couldn't ask for more."

People were involved in a variety of activities. On the day of inspection, a Christmas shopping trip had been arranged with lunch. People showed us the individual Christmas cakes they had made and iced. People had also participated in chair based exercises, knitting, sing-a-longs, crosswords and Christmas crafts. The service had its own resident dog which we saw brought comfort to people. One relative also brought in their own dog.

Prior to inspection, some people had been supported with end of life care. Staff were confident in accessing the support needed to make sure people's needs were addressed during these times. After people had passed away, the staff team carried out an analysis of people to determine whether they had taken appropriate action, if there was anything they needed to change and whether any development was needed. The registered manager told us this was part of their procedures for delivering a good service.

No complaints had been raised since the last inspection. Everyone we spoke with was aware of how to make a complaint. We could see small issues had been raised informally and had been addressed. One person told us, "If I had any issues, I would see the staff or the [registered] manager."

Is the service well-led?

Our findings

At the last inspection we rated the well-led domain as good. At this inspection, the service had maintained this rating.

The provider was also the registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons.' Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.' They were aware of their responsibilities and notifications about events at the service had been submitted when required.

The staff team were supportive of each other and the registered manager and understood the visions and values of the service and their role in delivering these. One staff member told us, "I enjoy the people I work with. It's very rewarding to look after people. We are one big family here." Staff told us the registered manager was approachable. They worked alongside health and social care professionals to maintain the standard of care at the service.

A system of auditing was in place and staff understood the process of maintaining the quality of the service. Following feedback from the local authority commissioning team, action was being taken to review the information contained in, and structure of care records. Meetings for people, relatives and staff had regularly taken place. All actions had been addressed from these. Most recently, people had requested to change the evening meal to lunchtime. People told us they were satisfied with this change.

The service was an active part of the local community. People accessed community services, laid a wreath at the Cenotaph, participated in afternoon teas and were planning to attend a Christmas party at the local church.