

Hunters Moor 929

The Laurels

Inspection report

Sheridan Close
Lincoln
Lincolnshire
LN2 4JX

Tel: 01522532596

Website: www.activecaregroup.co.uk

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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 well-led?

Good ●

Summary of findings

Overall summary

About the service

The Laurels is a specialist rehabilitation service. It provides care and support for up to 12 people who have an acquired brain injury and complex neurological conditions. The service supports people to access a range of rehabilitation programs. These are designed individually with the aim to support people to return to life in the community. There were 11 people living at the service at the time of this inspection.

The Laurels is split over 2 floors with ensuite bedrooms and a variety of shared spaces such as a training kitchen, laundry, areas for exercise and therapy, a lounge, a dining area and garden.

People's experience of using this service and what we found

People told us they felt safe and were supported by a staff team who understood how to recognise abuse and were confident to report concerns. The registered manager ensured the relevant authorities were notified of all reportable events.

People had their needs fully assessed and risks to their health and well-being assessed and staff understood how to meet their needs.

People were supported to receive their medicines safely and medicines were regularly reviewed. Staff received training on safe administration of medicines and had their knowledge and practice assessed.

People were supported to access food and drink that met their needs and preferences. Health professionals monitored the needs and support of anyone who had difficulty eating or drinking.

People who required adaptations to their environment or to access specific equipment to support their mobility and improve their level of independence were supported to access or adapt what they needed.

People and those important to them were supported to be involved in reviews of their care and had regular opportunities to speak up. People told us they were happy to approach the registered manager if they had concerns or wanted to change their care and support. People felt listened to.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The registered manager and senior staff team conducted regular audits of the service and used this information to drive improvement.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for the service under the previous provider was outstanding (31 August 2017)

Why we inspected

This inspection was prompted by a review of the information we held about this service. We undertook a focused inspection to review the key questions of safe, effective, caring and well-led only. For the key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

We did not find any concerns at The Laurels but the overall rating for the service has changed from outstanding to good based on the findings of this inspection. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for The Laurels on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

The Laurels

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was carried out by 1 inspector and 2 Experts by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

The Laurels is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. The Laurels is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority, Healthwatch England and professionals who work with the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 8 people and 9 of their relatives. We spoke with 9 staff members including the registered manager, a senior manager and other members of the staff team. We spoke with 6 professionals who knew the service.

We reviewed 3 people's care records and 4 people's medicines records. We looked at recruitment records for 2 staff members and 2 agency staff members. We reviewed policies and numerous audits and quality assurance records.

We are improving how we hear people's experience and views on services, when they have limited verbal communication. We have trained some CQC team members to use a symbol-based communication tool. We checked this was a suitable communication method, and people were happy to use it with us. We did this by reading their care and communication plans and speaking to staff or relatives and the person themselves. In this report, we used this communication tool with 1 person to tell us their experience of the care.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

The last rating for the service under the previous provider was good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from any avoidable harm and abuse.
- The registered manager ensured they notified the CQC of all reportable events. They also referred to the local authority safeguarding team or other professionals as required. Staff had received training in safeguarding and understood who to report to if they had concerns.
- People told us they felt safe. One person said, "The whole place feels safe, [the other people] are nice no bad people in here." Another person said, "I would tell one of the staff about [any concerns], see what they could do. All the staff are lovely."

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- People had risks to their health and well-being assessed and their care plans contained guidance for staff on how to safely support them. The registered manager reviewed risks regularly and made sure everyone had the equipment they required to be able to safely develop their mobility and independence.
- People felt the support was good and they were empowered to take risks that were aimed at helping them progress. One person said, "I need a walker (to mobilise). I had a three-wheeled walker, this had two feet at the back which was safer." Another person said, "I'm working towards a quad stick, turning [is difficult] as I sometimes I don't plant my leg properly. It's a tricky process."

Staffing and recruitment

- The provider operated safe recruitment processes. They ensured they checked the good character and suitability of staff prior to their employment. This included checking their work history and completing a Disclosure and Barring Service (DBS) check. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The provider ensured there were sufficient numbers of suitable staff. People did not have to wait long for support when they needed it. We observed staff taking time to sit and chat to people in addition to delivering care.
- People were happy with the number of staff and felt they could always access a staff member in the day or night. One person told us, "If I want to see staff, I can see them no problem. They do respond quickly to the bell." Another person said, "Night staff check on me every hour, took a while getting use to them."

Using medicines safely

- People were supported to receive their medicine safely. A professional told us, "[Staff] are prompt in

sending clinic letters through so that they can be actioned as soon as possible. They always make sure monthly medications are correct and chase these in a timely manner if they have not received anything."

- Staff were trained in how to do this and had their competency checked by senior staff and the registered manager. The registered manager conducted audits of medicine to check for any errors or concerns and took action to rectify this and ensure the person was safe.
- People were happy they were being their medicines correctly. One person told us, "[Staff] do explain about [my medicine] and bring it down to me." Another person said, "It's given very much to the clock, if I need a painkiller is always available." One person told us how their decision to change the time of the medicines being administered was respected. They said, "[My medicines] is always in a pot sometimes I take it but sometimes a bit early. I like to have my breakfast, I tell [staff] I'm not having that until I've had my breakfast."

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises. One person told us, "It is very clean. My room is very clean. [Staff] regularly change the bed and my bathroom is cleaned every day. Another person said, "Spotless. It is very good no dust anywhere."
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

People were able to receive visitors without restrictions in line with best practice. The provider did have one exception, which was to maintain protected mealtimes due to the nature of the service to give people privacy and support to develop their independence during meals. People told us their visitors could come anytime. One person told us about going out with their relative. A relative told us, "I can go and see [my family member] anytime I like, I have a chat with them." Another relative said, "The staff are all very friendly when you walk in. A lot of friends go in and they're happy with all the visits."

Learning lessons when things go wrong

- The provider learnt lessons when things had gone wrong.
- The registered manager monitored incidents and accidents to identify themes and concerns. Action to reduce the risk of repeat incidents were added to the service improvement plan.
- Staff told us they were supported to reflect on incidents in the service and to take time to consider what else they could do to make it better and avoid it reoccurring.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

The last rating for the service under the previous provider was outstanding. At this inspection the rating has changed to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed and care and support was delivered in line with current standards to achieve effective outcomes.
- The registered manager worked with health and social care professionals when assessing and planning people's care. This enabled them to make sure they considered up to date guidance in how to meet people's individual needs safely.
- The information gathered at assessment was used to develop person centred care plans which reflected each persons goals for independence and support with both physical and cognitive development. They also took into account people's preferences and interests which were sometimes used in supporting people to re-learn skills and ensured their program was at their pace.

Staff support: induction, training, skills and experience

- The service made sure staff had the skills, knowledge and experience to deliver effective care and support. This included an induction programme which was aligned to the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- Staff told us they had the opportunity for a lot of training, which was followed up to check their understanding. They shadowed more experienced staff and were offered other training course bespoke to the needs of individuals to ensure they had the right skills and knowledge to support them.
- People told us they thought the staff appeared knowledgeable and knew how to meet their needs, how far to encourage them and when they needed a break from their physical exercises.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to eat and drink enough to maintain a balanced diet
- Staff recorded daily, people's food and fluid intake, however there were no targets recorded, which meant staff had not taken action to analyse totals or identify concerns. We spoke with the registered manager who planned to review this issue. There had not been any impact to people about this and they all received input from dieticians to review their diet and any swallowing difficulties.
- People were happy with the quality and quantity of food and drink available. People were also being encouraged to utilise their new accessible training as part of their program for rehabilitation. Some further improvements to the kitchen were planned in coming weeks to make this even more accessible. One person told us, "[The food] is good actually, staff are nice, area is nice, I would come here again. I'm being

looked after." Another person said, "The food is fine, decent quality, there is a variety, you know roughly when things are coming up."

Staff working with other agencies to provide consistent, effective, timely care

- The provider ensured the service worked effectively within and across organisations to deliver effective care, support and treatment. A health professional told us about the good relationships they had developed with the staff which promoted partnership working to ensure people's health needs were met in a timely manner.
- The provider arranged weekly multi-disciplinary meetings with all professionals involved in the person's care and treatment to review progress. This ensured they had the correct resources and training and were using a consistent approach. This benefited people to ensure their care was adapted with their changing needs.
- People told us how they were supported by community health professionals at specific times to monitor their health on a daily basis and teach them how to manage their own care.

Adapting service, design, decoration to meet people's needs

- People's individual needs were met by the adaptation, design and decoration of the premises.
- The registered manager told us how the specially adapted training kitchen would have feature such as movable sinks and worktops. The service was designed to support people using equipment such as wheelchairs or walking frames.
- People told us how the registered manager and staff were flexible when changes were identified. One person told us how staff had supported them to move to a different bedroom in order to better accommodate the equipment they required and give more space. Another person told us how staff had ordered them different shower equipment to enable them to take a shower in more comfort.

Supporting people to live healthier lives, access healthcare services and support

- People were supported to live healthier lives, access healthcare services and support.
- Staff supported people to access a variety of health professionals as required such as GP, neurology consultants, OT's, dentists and chiropodists. They kept records of all health appointments and follow up actions were completed. Staff were informed of any changes to people's care needs and risk assessments resulting from health professional feedback.
- People told us they were happy with the access to various professionals. People and relatives spoke highly of the physio but some people felt they would benefit from increased sessions. A person said, "The chiropodist comes every week and is good." Another person told us, "The physio is brilliant, they know how far you can take the pain." A relative told us, "[My family member] has been very vocal and positive about the new physiotherapist. They are enjoying the new techniques."

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA

- The provider was working in line with the Mental Capacity Act. The registered manager had completed mental capacity assessments and followed a best interest process for people who were not able at this time to make specific decisions for themselves. Some people's DoLS had been approved and others were awaiting approval.
- People were supported by staff who understood the principles of the MCA and DoLS. They knew how to support people to continue making decisions and who to go to if the person was unable to do so any longer.
- People told us staff always asked their consent and respected their decisions. Relatives told us they were involved in the decision making process and kept well informed. One relative said, "[My family member] can make decisions and is quite happy there. There are regular meetings and they are present."

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

The last rating for the service under the previous provider was outstanding. At this inspection the rating has changed to good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were well supported. They were treated kindly by staff, who showed sensitivity in regard to people's needs, abilities and cultures.
- People told us they were made to feel welcome, and staff responded immediately when they needed support. One person told us, "The staff are brilliant. Generally speaking, [staff] are very kind and caring, they have my best interests and my wellbeing at heart." Another person said, "[Staff] are lovely people, nothing is too much trouble." A relative told us, "The care is second to none. [Staff] couldn't do more, they are fantastic."

Supporting people to express their views and be involved in making decisions about their care

- People were supported to express their views and make decisions about their care.
- People were encouraged to speak up and had confidence that if anything needed changing the registered manager would implement this. They had weekly keyworker meetings where they could raise concerns and discuss their care, treatment and progress. Where people had consented, relatives and friends were encouraged to be a part of the review process.
- People told us how changes they requested or concerns they raised were then taken forward and discussed with the GP or physio and implemented as a result of their review. One person told us about how they had planned their care to allow for when they became too tired. They told us, "The treatment and care are hard work but my plan has a rest time. I know when to speak up and say things." Another person told us about changes they had requested regarding the frequency of night-time checks as it was disturbing them. They said, "I had my keyworker review and now prefer to being checked every four hours for observation instead of hourly."

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence were respected and promoted.
- Staff understood how to maintain people's dignity and promote their independence by ensuring privacy was upheld. Staff spoke about people using respectful language.
- People were happy with their progress and care. One person told us, "I still have the bed sides up, I still haven't transferred into bed. My [relatives] can see what hard work it is for me but I'm getting better for coming home." Another person told us how they had progressed from needing 2 staff to support them with transfers to their bed to just one staff and the aid of equipment. Another person told us how they had the opportunity to use the new kitchen to prepare their own lunch the way they liked it.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

The last rating for the service under the previous provider was outstanding. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was a positive and open culture at the service. The provider had systems to provide person-centred care that achieved good outcomes for people.
- The registered manager was committed to developing a person-centred culture within the service. They understood their responsibilities to ensure people received the care they needed and stepped in to support staff when this was required.
- People felt their likes and dislikes were known and choices respected. One person told us, "[Staff] do their job exceedingly well. They've taken me to town and I have everything I need." Another person said, "I tend to like to sit after tea and chat to people. I will say when I'm ready to go up and then [staff] take me." Other people told us how they could choose what they wanted to do with their time and staff encouraged this. A person said to us, "I would recommend this place because it's very good." A relative told us, "Overall, it's been great. There is very good personal care. It's so wonderful there. It's a home from home. I am happy with the way [my family member] has been treated. I have full faith and trust in [the staff]."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider understood their responsibilities under duty of candour.
- The registered manager complied with legal requirements for duty of candour; they displayed their rating and we received notifications of significant events as required. They understood the need to apologise to relevant people when things went wrong. They ensured all incidents and concerns were supported by a response in writing to people involved.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery. The provider and registered manager had good oversight of the service and regularly monitored practice through in person visits during the day and night in addition to other audits.
- The registered manager and the staff team understood the requirements of their roles and the legal regulations. The registered manager also ensured their knowledge was up to date by subscribing to newsletters in the care industry and attending networking meetings where applicable. They then shared this information with the staff team.
- Most people knew who the registered manager was and felt happy to raise and concerns with them. One

person told us, "They are often about, they do come and speak to you."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.
- Staff told us they were asked to submit annual feedback about their views of the service. However, feedback from staff was mixed in relation to how approachable the registered manager was outside of this. Some staff felt they were able to speak to them and they were very supportive and other staff did not. All staff felt the registered manager would benefit from being able to adapt their approach to suit the learning style and needs of individual staff members and specific situations.
- People felt they were asked their views regularly and could give feedback. One person said, "I can just tell them what I think. It is positive." Another person told us, "When I've said I want to go back to my room, they generally go big on what I say and if I'm not happy I tell them. There's always a book around somewhere, I think the book is where you can provide feedback."
- Most relatives also felt involved, but some relatives told us they felt communication could improve. One relative said, "The staff are friendly and nice. They ask about [my family member] and get to know them at the meetings. There has been a lack of communication and they are a bit disorganised. I haven't been able to get to recent meetings, but they should have sent me updates and I haven't got them."

Continuous learning and improving care

- The provider had created a learning culture at the service which improved the care people received.
- Processes to assess and check the quality and safety of the service were completed. The registered manager and provider carried out audits and quality monitoring visits. These showed they identified areas of the service that required improvement and made those improvements in a timely way. Records of complaints, accidents and incidents were analysed to find trends or themes and offered staff the opportunity to reflect and learn how to do things differently to promote improved care delivery.
- Staff told us they were supported to reflect on situations during staff meetings or supervisions and encouraged to go on courses to develop their knowledge and skills in this specialist field. Some staff felt not enough time was allocated to them during working hours to keep up to date with e-learning.

Working in partnership with others

- The provider worked in partnership with others.
- Professionals gave positive feedback about the service outcomes, the staff team and the registered manager. One professional told us, "The premises are well secured. [People] appear safe and well cared for. The space is kept clean and tidy. Medications are kept secure and staff are vigilant to ensure supplies are in date and correct. The staff always seems supportive and caring to both [people] and professionals attending the premises. I have only experienced positive outcomes with The Laurel's." Another professional said, "Our clients on the acquired brain injury pathway appear to do well and make a speedy recovery. The team were very open and honest about the services that they could provide to brain injury patients. The facilities were clean and the unit felt homely and relaxed. On a tour of the unit the physio gym appeared well stocked and the therapists came across as knowledgeable and competent in up to date rehab practices."