

Mrs Mary Hall & Ms Georgina Hall

The Laurels

Inspection report

195 Barrack Road
Christchurch
Dorset
BH23 2AR

Tel: 01202470179

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

The Laurels is a residential care home registered to provide care and support to up to 20 people. The building had been adapted and care was provided over two floors with stairs and a stair lift as access. There were 13 people living at the home at the time of inspection.

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

Improvements were needed to the governance systems within the home. The systems for monitoring and checking that the home operates in a safe way were not effective. The registered manager accepted that this was an area for improvement and had started to make plans to improve.

People had risk assessments, but some needed to be more detailed; this had not had a negative impact on people as staff knew them well. The registered manager had started to devise a plan to improve this.

People received their medicines as prescribed. However, improvements were needed to the systems for monitoring the storage of medicines. Recruitment procedures were not as robust as they needed to be to ensure people were safe. We have made a recommendation to the provider about the recruitment of staff.

People and their relatives felt that the home was safe. Staff were confident that people were safe and knew how to identify concerns and what to do if they had them. The home made all necessary referrals to the local authority and the safeguarding teams.

The home had general risk assessments in place to ensure safety within the home. Equipment was checked regularly, and fire safety procedures were in place. The home was clean and tidy and had measures in operation to prevent the spread of infections. Accidents and incidents were recorded and analysed and used to learn.

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 Laurels involved people, their families and staff, using surveys as a way of getting feedback on the care they provide. Everyone we spoke with was complimentary about the registered manager and the provider. Health and social care professionals told us they had a good working relationship with the home and that staff sought their input in an appropriate and timely manner.

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 this service was good (published 9 November 2018).

Why we inspected

We received concerns in relation to moving and handling, staffing levels and the management of the home. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We looked at infection prevention and control measures under the safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has changed from good to requires improvement. This is based on the findings at this inspection. You can see what action we have asked the provider to take at the end of this report.

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.

Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to monitor the service.

We have identified breaches in relation to the management of the service at this inspection.

Please see the action we have told the provider to take at the end of this report.

Follow up

We will request an action plan for the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

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 Care Act 2014.

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

The inspection was carried out by one inspector. An Expert by Experience made calls to relatives following the site visit. 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 or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

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 service improvement and safeguarding teams. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to

send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and seven relatives about their experience of the care provided. We spoke with seven members of staff including the provider, registered manager, team leaders, domestic staff and care workers. We made general observations within the home of interactions between people using the service and staff.

We reviewed a range of records. This included six people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We received feedback from one team of health and social care professionals.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has now deteriorated to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Staffing and recruitment

- The home had a recruitment process. However, this had not always been followed. We checked the process, which stated two references were required. Although one member of staff was known to the provider, they had not obtained two references for them. Another member of staff only had one reference. This meant that checks to ensure safe recruitment of staff were not robust.

We recommend the provider follows their procedure for the employment of all staff to ensure robust checks are made on the suitability of staff to work with people who require care and support.

- There were enough staff on duty. Staff told us they had time to spend with people and they did not feel rushed. The registered manager told us that they worked within the home along with the staff. Rotas were continually under review and staffing adjusted as the needs of people changed.
- Staff turnover was low and many of them had worked at the home for many years. They felt supported and had all had received training in safe working practices. A relative told us, "They seem to be very stable with staff retention, very few new faces." A health and social care professional said, "Whenever we have visited there are appropriate staffing levels."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People had risk assessments for all their care and support. However, there were different formats; some were personalised and others not as detailed. We raised this with the registered manager who told us they would review all assessments and ensure they were to the same standard.
- Staff knew people's risks well. They told us how they would support people safely in different ways, for example, with their mobility and movement.
- There were general risk assessments in place for the home. These included people's individual bedrooms and fire safety.
- Accidents and incidents were recorded. Records were analysed every month to identify themes and patterns. These records together with communication with staff contributed to reducing the likelihood of reoccurrence.

Using medicines safely

- People received their medicines as prescribed. However, there were gaps in fridge and room temperature recordings, so safe storage could not be guaranteed. We raised this with the registered manager who took immediate action to address this.
- Medicine administration records (MAR) were in place for each person and these were completed

accurately. There was an electronic MAR system where each medicine had a barcode and when scanned the correct dosage was displayed. This was an additional safeguard to correct administration. A health and social care professional told us, "The registered manager [name] always keeps on top of medicines and appropriately escalates concerns."

- Where creams were prescribed, body maps were in place which indicated where the cream should be applied and how much.
- Medicines that required stricter controls by law were stored correctly in a separate cupboard and a stock record book was completed accurately. Where people were prescribed medicines they only needed to take occasionally, guidance was in place for staff to follow to ensure those medicines were administered in a consistent way.

Systems and processes to safeguard people from the risk of abuse

- Staff received training in safeguarding people. They knew who to report concerns to both within the home and outside. Staff were confident their concerns would be listened to by the registered manager and acted upon.
- People and their relatives told us The Laurels was a safe place to live. A relative said, "I think my loved one [name] is safe at The Laurels, they care for her extremely well. They keep her safe and well." Another said, "I feel my relative [name] is very safe and have not had any concerns in this respect."
- Staff told us people were safe with their care and support. A staff member told us, "I feel all the residents are safe living here."
- There was a system in place for discussing safeguarding concerns. This was done within daily handovers and in general conversation. Both the registered manager and the provider provided care and support for people and worked alongside the staff within their day.
- Referrals had been made to the local authority safeguarding team as required.

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 meeting shielding and social distancing rules.
- 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 accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

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.

At the last inspection this key question was rated as good. At this inspection this key question has now deteriorated to requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Quality assurance systems did not always operate effectively. Audits carried out by the registered manager had not identified the shortfalls found within the inspection in regard to recruitment, risk assessments and medicines management.
- Actions identified within audits were not managed. Actions were not always completed, and there were no timescales or responsible person to undertake the action. The registered manager and provider told us, "We need to make improvements in this area, things have slipped away from us in regards the management of the home and governance."

This is a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The provider responded during and after the inspection to address the shortfalls identified.

- The registered manager told us they were a member of various local registered manager groups. These had provided much needed support throughout the coronavirus pandemic and the registered manager found this was a good source of information.
- Learning was sought from government guidance and the local authority teams. This was shared with staff through messaging systems and handovers. We saw examples of communications, which were mainly in relation to COVID-19.

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

- Staff felt proud to work at The Laurels. They were complimentary about the home and their colleagues. Some of their comments included: "This is our works family, the team here are amazing", "I really enjoy, everybody that I work with. It's not like work, as I really enjoy it", "We are well supported."
- We received positive feedback about the management of the home. Comments included: "I think the registered manager is really good and definitely approachable", "The registered manager does a really good job especially under the circumstances forced upon her by the pandemic", "The registered manager is very pro-active", "The registered manager [name] is really supportive."

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 registered manager understood the requirements of the duty of candour, that is, their duty to be honest, open and apologise for any accident or incident that had caused or placed a person at risk of harm. They told us the circumstances in which they would make notifications and referrals to external agencies and showed us records where they had done this.
- The registered manager told us they liked to work in an open and transparent way. They appreciated constructive feedback and would work to address the issues identified. We were told that management is visible within the home; for example, a relative said, "The registered manager is very hands on and doesn't hide away."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The Laurels sought people's and their relatives' feedback about the home and the care they received. In a recent satisfaction survey of relatives, all who replied rated the home five out of five overall. A relative told us, "The registered manager will always engage the residents and their visitors in conversation. She is approachable and good at dealing with queries when they arise."
- Staff felt appreciated in their role and felt able to share their views of the home and contribute to its development. The registered manager told us they felt being a smaller, family run home meant they could be more person centred for both people and staff.
- The home had undergone refurbishment of its flooring and kitchen in the last year. This had been in part in response to feedback received. Relatives felt they were listened to and said, "I have been asked several times for feedback or an opinion and my views have been taken into consideration and where necessary implemented."
- The Laurels had good working partnerships with various health and social care professionals. The registered manager told us they had a network of regular supports for the home. A health and social professional told us, "We all have a good working relationship with The Laurels and feel they offer a high standard of care."

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 17 HSCA RA Regulations 2014 Good governance Governance systems did not operate effectively.