

Aegis Residential Care Homes Limited

The Laurels Care Home

Inspection report

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Congleton
Cheshire
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Ratings

Overall rating for this service

Good



Is the service effective?

Good



Overall summary

We carried out an unannounced comprehensive inspection of this service on 15 December 2014 at which a breach of legal requirements was identified. We found the home needed further development in training their staff in the Mental Capacity Act 2005 [MCA]. We also identified issues around their understanding of how to support people when they lacked capacity, including the implementation of DNACPR (do not attempt resuscitation orders). Records lacked evidence that people living at the home or their representatives had signed to consent with the orders in place which had been signed by the GP.

After the comprehensive inspection the provider wrote to us to say what they would do to meet legal requirements in relation to the breach. In addition to this we have also received further clarification from external professionals working in end of life care regarding the completion of DNACPR's which clearly state that the decision is a

medical one and relatives should not be asked to make the decision unless they have power of attorney. This clarification confirmed that our initial findings were incorrect.

We undertook a focused inspection on the 18 June 2015 to check the action plan that had been completed and to confirm that the home now met legal requirements.

This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'The Laurels Care Home' on our website at www.cqc.org.uk

The Laurels Care Home has a 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.

Summary of findings

The Laurels is a care home close to Congleton town centre. Originally a private house it has been renovated and extended to provide care to older people. It is a two-storey building and people live on both floors. Access between floors is via two passenger lifts or the stairs.

At our focused inspection on the 18 June 2015, we found that the provider had followed the action plan they had sent us and that the issues had been addressed.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service effective?

The service was effective

We found that action had been taken to improve the effectiveness of the service.

We found that the home had addressed this issue by providing further training for their staff members.

We have received further clarification regarding DNACPR's and consent which now meant that the provider was now meeting legal requirements.

We have revised the rating for this key question and have now updated the rating to 'Good'.

Good



The Laurels Care Home

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 checked 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 undertook a focused inspection of The Laurels care Home on the 18 June 2015. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection 15 December 2014 had been made. We

inspected the service against one of the five questions we ask about services: is the service effective. This is because we believed the service was not meeting legal requirements in relation to that question.

The inspection was undertaken by one adult social care inspector.

Before our inspection we reviewed the information we held about the home, this included the provider's action plan, which set out the action they would take to meet legal requirements. We also received further clarification from external professionals working in end of life care.

At the visit to the home we spoke with the registered manager, looked at the care records for four people and staff training records.

Is the service effective?

Our findings

At our comprehensive inspection of The Laurels Care Home on the 15 December 2014 we found the home needed further development in training their staff in relation to the Mental Capacity Act 2005 [MCA]. Although the staff we met during the visit had a basic understanding of the MCA they had not received any training on this topic. We also identified issues around their understanding of how to support people when they lacked capacity, including the implementation of DNACPR (do not attempt resuscitation orders.) The records we saw lacked evidence that people living at the home or their representatives had been involved through “Best Interest” meetings in the decision made by the GP. This was a breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 which corresponds to regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following the inspection the provider sent us an action plan explaining how the issues would be addressed.

At our focused inspection of 18 June 2015 we found that the provider had followed the action plan they had sent to us and they had arranged for a training provider to deliver training on the MCA for staff members. During this visit the registered manager did query the initial findings from the

inspection in December and confirmed that all staff had received some training via work books in this area. In addition both they and the deputy manager plus another senior carer who covered in the manager or deputies absence had also received training in this area. We discussed this anomaly and it is unclear why this was not clarified at the time of our initial visit.

With regard to consent we have already stated that our initial findings were incorrect. However the registered manager had still tried to improve the current system and had asked the GPs who had completed the DNACPRs to provide written confirmation that they were discussed with the individual and their family at the time. During this follow up inspection we looked at four people’s care files and could see that this process had been completed.

In addition the registered manager explained that they had reviewed the care plans for all of the people living in the home and were in the process of contacting families to arrange best interest meetings where the person using the service was unable give consent to any care and treatment. They were also re-checking with families if they had power of attorney for welfare so that they could have a copy within the home.

We have revised the rating for this key question and have now updated the rating to ‘Good’.