



Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru
Care and Social Services Inspectorate Wales

Care and Social Services Inspectorate Wales

Care Standards Act 2000

Inspection Report

The Laurels Care Home

23 Meirion Street
Trecynon
Aberdare
CF44 8NH

Type of Inspection – Focused

Date of inspection – Friday, 30 October 2015

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Summary

About the service

The Laurels Care Home is registered with Care and Social Services Inspectorate Wales (CSSIW) to provide accommodation and personal care to 18 residents over the age of 65 years. The registered manager is Julie Ward and the home owner carries out the role of responsible individual (RI), overseeing the day-to-day management of the service.

What type of inspection was carried out?

We (CSSIW) visited the home on an unannounced basis on 30 October 2015. The purpose of our visit was to undertake a focused inspection which formed part of our annual inspection process. As well as considering the quality of life of people living at the home, we followed up on areas of regulatory non-compliance which had been identified at our previous inspection in July 2014. We used the following sources of information to formulate our report:

- observation of daily routines and care practices at the home
- conversations with two service users, two visiting relatives and a visiting professional
- discussions with the RI, various members of staff on duty and with the registered manager (telephone conversation) following our visit
- examination of two service user care files
- examination of two staff personnel files
- the RI's last quality assurance (Regulation 27) report
- the home's Statement of Purpose and Service User Guide
- brief visual inspection of the premises

What does the service do well?

The home provides a supportive environment where all members and grades of staff are familiar with the residents' unique needs and converse with them on a daily basis. We observed that this contact enhanced the residents' sense of wellbeing and promoted relationships of trust.

What has improved since the last inspection?

At the time of the last inspection in July 2014, we informed the registered persons of identified regulatory non-compliances, although no notices were issued. On this occasion we found the registered persons had met compliance with the following regulations as cited in the Care Home (Wales) Regulations 2002:

Regulation 17 (1) (b). Confidential information pertaining to service users was found to be stored securely.

Regulation 13 (4) (a). The building and grounds were free from hazards

Regulation 27(4) (c). We saw that the RI had been evidencing his quality assurance visits in the form of written reports every three months.

Regulation 18 (2). Formal one-to-one staff supervision was being carried out regularly and in accordance with Standard 24 of the National Minimum Standards for Older People 2004.

What needs to be done to improve the service?

We informed the registered persons that they remained non-compliant with Regulation 19 (2) (d) (i) and Schedule 2 (6). This is because a full employment history was not available in the staff personnel files we viewed. We have not issued a non-compliance notice as the RI assured us that all missing information would be sought and that future recruitment would address all requirements pertaining to this regulation.

Recommendations made:

As a good practice measure, we made recommendation to the registered manager and RI that application forms should request the month as well as the year of previous employment dates so that gaps could be easily detected.

Quality of Life

People living at The Laurels enjoy a homely, relaxed environment and experience a sense of belonging. On the day of our visit the communal areas were tastefully decorated ready for Halloween and staff and residents were having fun playing an adapted version of a traditional Halloween game. We spoke with a resident who described the home as “wonderful” and told us that staff were always kind and helpful. A visiting family informed us that the care was “excellent.” They told us their relative was settled and content and had been very keen to return to the home following her stay in hospital.

People can exercise choice and have influence in the home. We saw that residents could choose whether to stay in their rooms during the day or to sit in the communal areas to enjoy the company of others. We spoke with a resident who told us that she could also choose what time to get up in the morning and when to retire to bed at night. A conversation with the cook revealed that residents’ dietary tastes and preferences were considered when planning the monthly menu and that alternatives were always available if individuals did not like the meal being served. The RI advised us that residents are given the opportunity to choose the day’s menu on their birthday.

People are supported to remain active and positively occupied. We observed the RI engaging with residents on a one-to-one basis throughout the day which they clearly appreciated and enjoyed. As well as the aforementioned Halloween games, we heard the activities organiser entertaining a group of residents by reading poems to them in the lounge. She told us this was one of their favourite pastimes along with pamper sessions and singing. The activities organiser had recently commenced a knitting group and the residents had made a blanket for charity. We spoke with the RI who told us that visits had been arranged to the local park in the summer months but the residents had not been interested in going to concerts or involving themselves in any other community activities.

People receive care and support from staff who understand their individual needs and preferences. The service user care files we examined evidenced person-centred support and monthly reviews were comprehensive. This ensured that staff had an up-to-date knowledge of people’s needs and were aware of any changes in their condition or treatment. We found that staff were aware of residents’ spiritual needs and language preferences. The activities organiser told us that many of the residents used to attend church or chapel and the home therefore arranged a fortnightly service led by a community church official. Services were also led by the activities organiser in between these visits and we were shown a book of the residents’ favourite hymns which they had assisted to compile. This included a couple of Welsh language hymns for the enjoyment of a Welsh-speaking resident. We found that three members of staff had attended a basic Welsh course so that they could converse simply with the resident in her preferred language. Staff also facilitated conversations between the resident and Welsh-speaking visitors and informed us that this was greatly appreciated.

People living at the home are assisted to remain as healthy as possible and have access to medical support when needed. Service user care files evidenced the involvement of healthcare professionals. This included GP, district nurse, physiotherapist and optician as well as specialist support at various hospital out-patient appointments. Residents were also visited by their care manager (social worker) to ensure that they were content and their needs were being fully met. We spoke with a visiting professional who was highly

complimentary about the quality of care provided by staff at the home. Care files contained up-to-date risk assessments to promote residents' safety and wellbeing. We observed that when a fall occurred or an injury was sustained, an action plan was devised to minimise the risk of future occurrences.

Quality of Staffing

This domain was not the focus of our inspection on this occasion but will be considered in depth at a future inspection. However, we observed the following:

People can be confident that they are cared for by staff who are appropriately supervised. Supervision in this context refers to members of staff meeting on a confidential one-to-one basis with their line manager to discuss their performance, any issues of concern they may have and their training needs. This in turn impacts on the quality of care the residents receive. Although, in the absence of the registered manager, we were unable to locate staff supervision notes during our visit, members of staff confirmed that they received this regular support. Following our visit, the registered manager advised us that she kept the supervision notes in a separate file and assured us that these sessions were being carried out regularly in accordance with regulatory requirements. As such the registered person has met compliance with Regulation 18 (2).

People can generally be assured that staff who work at the home receive robust pre-employment checks. We saw evidence of identity and criminal record (DBS) checks, appropriate references had been sought and qualifications/ experience recorded. Although the RI was able to show us employment application forms which had been completed thoroughly, there were a couple where information relating to previous employments was missing. Such information is required to meet compliance with Regulation 19 (2) (d) (i) and Schedule 2 (6). We have not issued a non-compliance notice as the RI assured us that all missing information would be sought and that future recruitment would address all requirements pertaining to this regulation. We recommended that the home's application forms should in future request the month as well as the year of previous employment dates so that gaps could be easily detected.

Quality of Leadership And Management

This domain was not the focus of our inspection on this occasion but will be considered in depth at a future inspection. However, we observed the following:

People experience a consistent service based upon quality improvement. We found the RI to be “hands-on” in his approach and was present at the home most days. This involvement enabled him to identify residents’ needs and we saw that he was prompt and forthcoming with purchasing equipment or furnishings which would add to the comfort and wellbeing of the residents. At the time of our last visit in July 2014, although we found evidence that the management focused on quality assurance in the home, the RI had not produced a three monthly report to evidence his visits as per regulatory requirements. We saw that this matter had since been addressed and any deficits noticed by the RI were immediately followed up to ensure quality improvement at the home. We confirmed that the registered person is now compliant with Regulation 27 (4) (c).

Quality of The Environment

Although this theme was not the focus of our inspection, we were able to confirm the following:

People living at the home can be assured that personal information about them is properly protected. This is because on this occasion we found that service user care files and related documentation was stored securely. As such, the registered person is now compliant with Regulation 17 (1) (b).

People can enjoy a safe environment which promotes their wellbeing. We observed that the building and grounds of the home were free from hazards, and equipment or chemicals which presented a risk to people's safety were appropriately stored behind locked doors. We informed the RI that compliance with Regulation 13 (4) (a) had been met.

In addition to the above, we found that people are now able to enjoy a more spacious communal area indoors as the rear of the home had been extended to create a large conservatory/ lounge area. This provided people with more choice as to where to spend their day and the RI told us that it offered a quieter place for residents to sit with their visitors.

How we inspect and report on services

We conduct two types of inspection; baseline and focused. Both consider the experience of people using services.

- **Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

- **Focused inspections** consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focused inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focused inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet 'Improving Care and Social Services in Wales'. You can download this from our website, [Improving Care and Social Services in Wales](#) or ask us to send you a copy by telephoning your local CSSIW regional office.

