



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

# Inspection Report on

**The Laurels Care Home**

**23 Meirion Street  
Trecynon  
Aberdare  
CF44 8NH**

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## **Description of the service**

The Laurels Care Home is located in the village of Trecynon close to the town of Aberdare. The home is registered with the Care and Social Services Inspectorate Wales (CSSIW) to provide accommodation and personal care to up to eighteen people over the age of 65. Within this number no more than five people shall additionally have dementia/ mental infirmity support needs. On the day of our visit we were told that eighteen people were in residence.

The home owner carries out the role of responsible individual (RI), having overall responsibility for the quality and performance of the service. The registered manager is Julie Ward. Both the registered manager and the responsible individual were present during our inspection visit.

## **Summary of our findings**

### **1. Overall assessment**

The Laurels Care Home provides a consistently high standard of care. People are complimentary about the care and support received at the home. People living at the home appear settled and very content. The home benefits from the stability provided by a well established and experienced management team who provide a visible presence. Care is delivered by a familiar team of caring and compassionate staff. The home provides a safe, comfortable environment, which is warm and welcoming. There is a genuine sense of community at the home.

### **2. Improvements**

There were no non compliance notices issued at the last inspection, and no recommendations for improvement were made.

### **3. Requirements and recommendations**

There were no non-compliance notices issued following this inspection. Section five sets out our recommendation to consider an “Active Offer” of the Welsh language.

# 1. Well-being

## Summary

The home has a welcoming and homely atmosphere with a genuine sense of community. People are settled and have good relationships with the staff that care for them. Residents and their visitors are complimentary about the care and support provided at the home.

## Our findings

People living at the home relate well and have good relationships with the staff that care for them, and can feel safe and protected. The home had a calm, welcoming and relaxed atmosphere. We saw that people living at the home appeared very at ease with all staff and there was a genuine sense of community at the home. We saw that staff spent most of their time with residents. Staff appeared to be aware of people's individual needs and responded to residents in a calm, unrushed manner. We saw that interactions between care workers and residents were warm and kind. During our inspection visit we observed that workers supported residents in a kind and dignified manner, providing reassurance and gentle encouragement. For example, one resident was unsettled following a minor disagreement with another resident. Staff were very caring and spent time reassuring and comforting the individual until they settled. We saw during the day that people were enjoying themselves and were smiling and laughing. People living at the home and their visitors were complimentary about the standard of care provided, and were very positive about their relationships with staff. Examples of what people told us are:

*'I'm happy here'*

*'I've nothing to grumble about'*

*'They've been amazing to X and me. It's 100% I can't fault it. It's great to know X is safe and cared for.'* (Relative)

*'I can't praise them highly enough, it's the best thing we did, Y is happy here, and doesn't ask about going home.'* (Relative)

This indicates people are content, happy and safe living in the home.

People are able to choose and participate in activities, and have opportunities to socialise with others. We saw that people living at the home had access to planned and ad hoc group and individual social, recreational, and spiritual events and activities. The home's activities were coordinated by a dedicated member of staff. We saw that the home had a weekly timetable of events. We saw that an 'activities session log' documented people's activities. Examples included newspaper/ events discussion, communion, arts and crafts, bingo, flower arranging, pamper sessions and trips out. We saw photographs of activities that had been undertaken at the home such a visit to a local primary school to watch a rehearsal of a concert, and the school visiting the home. On the day of our inspection six residents went on a trip to the country park, for coffee and a visit to see some donkeys kept locally. This was an event people clearly looked forward to and enjoyed. In the afternoon people were engaged in a seated ball game, and a discussion about topical events. Throughout our visit music was played gently in the background. People who preferred to stay in their rooms told us that staff visited them to talk to them. This would ensure that

people did not feel lonely or isolated. Relatives and friends who visited on the day of our visit were made very welcome by staff.

We conclude that people are provided with sufficient opportunities to feel involved in life at the home through participation in social/recreational activities which enhance their overall well-being.

People are able to exercise choice and control over their everyday lives. We observed people moving freely throughout the home. We saw care workers asking people how they wished their individual care needs to be addressed, and where they wished to spend their time. We observed staff supporting residents in accordance with their wishes. This indicated that staff understood and valued each resident's preferences. We saw that care workers offered residents choices of food and drink throughout the day. We examined care records and saw that people's individual likes and preferences were identified. This shows that people are able to express their individual views and opinions which are valued by people caring for them.

People who may need it are not currently able to receive their care in Welsh. We were informed that none of the people living at the home spoke Welsh. We were told that some staff knew limited Welsh phrases. However, the home did not provide an "Active Offer" of the Welsh language. We recommended that the service should consider the Welsh Government's "More Than Just Words... Follow-on Strategic Framework for Welsh Language Services in Health, Social Services and Social Care", and consider including a section in the home's Statement of Purpose which sets out its position with regard to providing an "Active Offer".

We conclude that the home does not currently promote the use of the Welsh language or offer its services in Welsh for the benefit of residents who may require it.

## 2. Care and Support

### Summary

The home provides a consistently high standard of care. Care planning is 'person centred' and detailed and staff are knowledgeable about people's individual needs, and how their needs should be met.

### Our findings

People are as safe and as well as they can be because they receive proactive, preventative care and their care needs are anticipated. We found that residents appeared relaxed and content. We examined three residents' care files and found that they had been reviewed and updated regularly. They were very detailed in their content and 'person-centred' in their approach. We saw that care files contained essential information in relation to residents' preferences, personal and nursing care needs, medical conditions and medication requirements. Referrals were made in a timely way to relevant health and social care professionals. We saw from individual care records that people were referred to healthcare professionals for assessment and treatment when required such as general practitioner, chiropody, dentist, audiology, and community nurse services. We saw that people had access to and had attended appointments for preventative screening programmes such as the diabetic retinopathy clinic.

We conclude that people receive the right care, at the right time in the way they want it.

People's medication is managed safely. We saw that medicines were stored securely in a suitable locked medication trolley. Medicine bottles were clearly labelled with the date of opening. We reviewed residents' medication administration records (MARs) and found that they had been completed correctly. During our inspection visit we observed that medicines were administered safely, and good practice adhered to on each occasion. This indicated that staff followed safe medication administration practice.

Therefore, people are safeguarded by the home's medication procedures.

People are offered healthy and nutritious meals and drinks. People had access to healthy and varied food options. On our arrival at the home residents were enjoying slices of melon and satsuma. Snacks such as biscuits and various cakes and hot and cold drinks were offered throughout the day. Residents were given choice as to what they wanted to eat and drink. The home had the daily menu displayed on a board in the corridor. On the day of our visit lunch comprised of roast lamb with vegetables and lemon curd sponge and custard. We observed lunch being served and found it to be a calm, relaxed and sociable occasion. We saw that most residents sat at the dining table for lunch, whilst others remained in the lounge/ conservatory or chose to eat in their rooms. We observed that residents were supported according to their needs in a dignified manner. We saw that lunch was appetisingly presented, and appeared to be enjoyed by most people. People commented *'the food is perfect'* *'the food is marvellous'* (relative), and *'I like the food; I eat everything'*. We saw that people in their rooms were served with lunch in a timely manner. We spoke to a resident who remained in their room at lunchtime. They told us because they had a very poor appetite and no sense of taste or smell they only ate certain foods which the home prepared specially. We saw that this was clearly documented in the person's care file and staff we spoke to were aware of these specific needs. The home had been inspected by the

Food Standards Agency in April 2017 and had been awarded a food hygiene rating of 5 which is 'very good'.

We conclude that mealtimes are a positive experience, and that people's nutritional needs are being met.

Deprivations of liberty safeguards (DoLS) referrals are appropriately made. Care files we examined evidenced that applications for DoLS authorisations had been submitted to the relevant local authorities for those whose freedom had been restricted. Therefore people's rights are respected.

### **3. Environment**

#### **Summary**

The home provides a safe, comfortable environment, which is warm and welcoming. The home is well maintained and the décor is homely. The home is light and airy and has plenty of internal and external space for people to use as they wish. There has been a new fire alarm system and a new call bell system installed at the home since the last inspection for the safety and comfort of residents.

#### **Our findings**

People feel uplifted and valued because they are cared for in a comfortable, clean, homely and personalised environment. The home provided accommodation to people over two floors, and also had a separate self contained flat on the top floor which was for staff use. It had five bedrooms on the ground floor and thirteen bedrooms on the first floor each with a vanity unit. People and their families were encouraged to personalise individual bedrooms and we saw that many rooms contained personal items. The home had a large lounge which was open to a generous-size conservatory. Patio doors lead out to a spacious, attractive and well kept garden which was accessible for people living at and visiting the home. The home had a separate dining room close to the kitchen. The décor in the communal areas was homely and welcoming, and the home appeared well maintained. There were sufficient bathing and toileting facilities for residents. We saw that the home was clean and tidy throughout, and no unpleasant odours were noted. This shows that people live in an environment which meets their needs.

People's need for privacy and confidentiality is anticipated. We found that all confidential files were stored securely. This included staff personnel files and residents' care files. The home had a purpose built treatment room for visiting professionals to see and treat people when necessary. This ensured that there was a suitable environment for people to be seen privately and for their dignity to be preserved. We conclude that people's right to privacy is respected.

People are cared for in safe, secure, and well maintained surroundings. We found the entrance to the home was secure and visitor identity was checked before entering the property, along with signing of the visitor book. The home was free from clutter and fall hazards. Substances that may be hazardous to health were securely stored for the safety of people living at and visiting the home. We saw that all health and safety checks and measures in relation to fire certificates, hoists, lifts, gas and electrical installation, and PAT testing were satisfactory and up to date. A new fire alarm system and call bell system had been installed at the home since the last inspection. People are protected from harm and their safety is maintained.

## 4. Leadership and Management

### Summary

People living and working at the home benefit from management provided by a well established and experienced management team which is visible and approachable. Care is provided by a dedicated team of skilled and competent staff. The home has effective quality assurance systems, policies and procedures in place to promote safe practice.

### Our findings

There are clear lines of accountability and leadership at the home. There was a well established management team and the responsible individual was present at the home most days. Staff spoke positively about the support they received from the registered manager, and the management team. We observed that the interactions between the responsible individual, registered manager, residents, visitors, and staff were relaxed and friendly but respectful, and that people appeared able to approach the responsible individual and the registered manager with ease.

We conclude that the management of the home is visible and approachable.

People receive care and support from staff who are safely recruited and appropriately trained for the roles they undertake. We examined three staff files which contained the required information to ensure their suitability and fitness. It was evident from the staff personnel files examined that the necessary pre-employment checks to ensure that staff were 'fit persons' to work at the home, such as references and disclosure and barring service (DBS) checks, had been completed and found to be satisfactory. Care workers we spoke to told us that they had sufficient training to undertake their role competently, and that they had achieved qualifications under the Qualifications and Credit Framework (QCF). We saw that training records contained details of training relevant to the care needs of residents in the home. Training records we saw included diabetes, manual handling, fire, emergency first aid, medication administration, food hygiene, protection of vulnerable adults, and end of life care. Staff told us that they felt supported, and the staff personnel files we examined evidenced that all staff had received regular one-to-one supervision sessions and an annual appraisal which reviewed their work over the previous year. This indicates that staff are trained and supported in a way that improves outcomes for people, and the process by which staff are recruited and vetted is sufficient.

People are supported by a stable and dedicated care team. Staff we spoke to demonstrated job satisfaction and a commitment to working at the home and made comments such as:

*'I enjoy my job; there's always something different. It's a lovely atmosphere, homely;'*  
*'I think it's a really good home to be in; people have choice which is good,'* and  
*'It's a lovely place to work most staff are absolutely lovely.'*

People benefit from prompt care. During our inspection visit we considered there to be sufficient staff available to assist people with their needs. We were told that the home did not engage agency and that any staffing shortfalls were covered by the home's own staff. This ensured that people were cared for by familiar staff. This was reflected on the staff rotas we examined. We observed people's needs were attended to in a timely manner. Staff told us that there were sufficient numbers of staff to meet the needs of the residents,

and that staffing had recently been changed to ensure the needs of people early in the morning were met.

We conclude that staff have sufficient time to spend with people to ensure their emotional and psychological needs are met as well as their physical and health care needs.

People can be sure that there are robust, transparent systems in place to assess the quality of the service they receive. The responsible individual is present at the home most days, and this enabled them to receive feedback from people living, working and visiting the home, and address any maintenance and health and safety issues. In addition we saw that there were reports which detailed quality monitoring visits undertaken by the responsible individual. An annual review of the quality of care provided had been undertaken at the home. A report had been prepared following the quality review dated December 2016. We saw that generally positive feedback had been received from questionnaires returned by residents, staff and visitors, and that where suggestions had been made, improvements were planned.

This shows that people are provided with opportunities to be consulted about the service, and that the registered provider demonstrates a commitment to quality assurance and constant improvement.

The home's vision is made clear through its Statement of Purpose. This is an important document which should be kept under review. It should provide people with detailed information about the services and facilities offered within the home and should also outline the home's underpinning philosophy and approach to care delivery. We examined the Statement of Purpose and the home's aims and objectives were clear and it contained all the information required under regulation. The document had been kept under review and was updated in May 2017.

The home provides clear information so that people know and understand the care, support and opportunities which are available to them.

The home has effective administrative systems. We saw that policies were available to support practice at the home. We reviewed three of the home's policy documents, namely the Complaints Procedure, Safeguarding Policy and Medication Administration Policy and found that each document had been reviewed and updated and contained the necessary information.

We conclude that appropriate policies and procedures are in place to ensure the safety and wellbeing of the residents.

## **5. Improvements required and recommended following this inspection**

### **5.1 Areas of non compliance from previous inspections**

There were no non compliance notices issued at the last inspection.

### **5.2 Areas of non compliance identified at this inspection**

There were no non compliance notices issued at this inspection.

### **5.3 Recommendations for improvement**

Active Offer: We recommend that the registered provider considers Welsh Government's "More Than Just Words. Follow-on strategic Framework for Welsh Language Services in Health, Social Services and Social Care", and includes a statement on its position in the home's Statement of Purpose.

## 6. How we undertook this inspection

This was a full inspection undertaken as part of our inspection programme. We made an unannounced visit to the home on 22 September 2017 between 10:15 hours and 17:45 hours.

We used the following sources of information to formulate our report:

- Observations of daily routines, care practices, and activities at the home.
- We used the Short Observational Framework for Inspection (SOFI 2). The SOFI tool enables inspectors to observe and record care to help us understand the experience of people who cannot communicate with us.
- Conversations with people living at the home and their visitors.
- Discussion with the responsible individual, the registered manager and three other members of staff.
- Examination of the care documentation relating to three people living at the home.
- Examination of the personnel files of three members of staff, in order to consider the recruitment process in place;
- Visual observation of the building's interior and exterior.
- Consideration of the home's quality assurance systems.
- Review of information regarding staff evaluation of training undertaken.
- Review of three of the home's weekly staff rotas.
- Review of the previous inspection report.
- Review of the home's Statement of Purpose.

Further information about what we do can be found on our website [www.cssiw.org.uk](http://www.cssiw.org.uk)

## About the service

Type of care provided	Adult Care Home – Older
Registered Person(s)	Keith Jones
Registered Manager(s)	Julie Ward
Registered maximum number of places	18
Date of previous CSSIW inspection	27/07/2016
Dates of this Inspection visit(s)	22/09/2017
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	<p>This is a service that does not provide an “Active Offer” of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of the people who use, or who intend to use their service. We recommend that the service considers Welsh Government’s “ More Than Just Words... Follow-on Strategic Framework for Welsh Language Services in Health, Social Services and Social Care.”</p>
Additional Information:	