

John Luke and George D Luke

Arboretum Nursing Home

Inspection report

Forest Lane
Walsall
West Midlands
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Tel: 01922746940

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12 April 2017

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

We carried out an unannounced comprehensive inspection of this service on 21 January 2016. Breaches of legal requirements were found. After the comprehensive inspection the provider told us what they would do to meet legal requirements in relation to the breaches of Regulation 18 CQC (Registration) Regulations 2009, Notification of other incidents and Regulation 16 CQC (Registration) Regulations 2009, Notification of death of a person who uses the service.

We undertook this focused inspection to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Arboretum Nursing Home on our website at www.cqc.org.uk.

This unannounced focused inspection took place on 12 April 2017 and we found the required improvements had been made.

Arboretum Nursing Home provides accommodation, nursing and personal care for up to 54 older people. The home does not currently have a registered manager in place. However, the provider was in the home on a daily basis managing the home. 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.

People told us the home was well-run and the provider and staff approachable and friendly.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

The service was not consistently well-led.

Arrangements for ensuring notifications were sent to CQC had improved. The service did not have a registered manager in post. People and their relatives were complimentary about the provider and staff and felt the home was well-run.

Requires Improvement 

Arboretum Nursing Home

Detailed findings

Background to this inspection

We undertook an unannounced focused inspection of Arboretum Nursing Home on 12 April 2017. This inspection was done to check that improvements to meet legal requirements planned by the provider after our 21 January 2016 inspection had been made. The team inspected the service against one of the five key questions we ask about services: is the service well-led. This is because the service was not meeting some legal requirements.

Prior to our inspection we reviewed the information we held about the service and provider. This included the statutory notifications that the provider had sent us about incidents at the service. A statutory notification is information about important event the provider is required to send to us by law.

The inspection was undertaken by one inspector. During our inspection we spoke with two people, two relatives, three members of staff, the clinical lead manager and the provider. We looked at two people's care plans, daily records, accident and incident records and some quality monitoring records.

Is the service well-led?

Our findings

Services that provide health and social care to people are required by law to notify CQC by law of events such as deaths and injuries that had occurred within the service. At our last inspection in January 2016 we found the provider was not meeting their responsibilities because they had not been informing us of deaths and injuries that had occurred in the home for a period of over 12 months. We discussed this at the time of our inspection and informed the provider of their responsibility to notify CQC of events that occurred within the home that may impact upon people's care and welfare.

Prior to this inspection we reviewed information we held about the service and provider. This included the notifications that the provider had sent us about incidents at the service and of deaths of people who had used the service. We found improvements had been made and the provider had notified CQC of events which they are required to do so by law. This meant the required improvements had been made and the service had met the regulations.

We found arrangements were in place to monitor the quality of service provided. We saw a range of audits were completed by the manager. The manager analysed incidents and accidents for patterns or trends and where required took action to keep people safe. For example, action had been taken to refer people at risk to the falls prevention team. We also saw where changes occurred to the care and support that people required their care records and risk assessments were reviewed and updated to reflect the changes. Other checks were completed such as medicines and environmental checks and information analysed to improve the quality of service people received. Where issues were identified an action plan was put in place to address concerns.

People and relatives told us they felt well-informed as staff ensured they had information available to them to make decisions and choices. Everyone we spoke with said they would speak with the staff or provider if they had any concerns and said they felt confident issues would be addressed straight away. People and their relatives told us they had completed a number of different questionnaires about the quality of the service. We looked at completed questionnaires and found responses had been analysed to see if there were any areas for improvement. We saw people were satisfied with the quality of care they received. There were systems in place to assess, monitor and improve the quality and safety of services provided.

The home did not have a registered manager in post. However the provider was in the home on a daily basis and provided continuity and leadership. There was also a manager who provided day to day support to staff. We discussed the lack of a registered manager within the home with both the provider and manager. They advised us they would commence the process for one of them to become the registered manager of the home.

People told us the service was well- managed. One person said, "The [provider] is here all the time they are friendly." A relative commented, "[Provider] is here he goes around every day checking everyone is okay. He is very approachable the home is very well run. You can ask something and it gets sorted straight away." Another relative said, "I recommend this home to people it is very good I am very happy with the care

[relative] receives the [provider] is about and is very sociable and any issues get sorted straight away. I am kept updated about [person] care and I have no concerns. It is well run home." Everyone we spoke with told us the provider was at the home every day and was always available to speak to.

People were supported by a team of motivated staff who spoke highly of the manager and the provider. One member of staff said, "[Provider] is very approachable and at the home every-day. They know [people] well, their relatives and the staff." Another member of staff told us, "[Provider] and [Manager] are very supportive you can approach them about anything and it will get sorted. I would not hesitate to speak with them if I had any concerns even to whistle-blow." Staff felt confident any concerns they might raise would be listened and responded to appropriately. They were aware of the provider's whistle –blowing policy, including raising concerns to external agencies if required. Whistle-blowing means raising a concern about wrong doing within an organisation. Staff said they received enough support and training to do their jobs. They said both the provider and manager communicated well and listened to and involved them in the service. They said they received individual and team meetings and were able to discuss their performance, training and any matter which might affect people who lived at the home. This demonstrated staff felt supported by the provider and the manager.