

Key inspection report

Care homes for older people

Name:	Arbory Residential Home
Address:	London Road Andover Down Andover Hampshire SP11 6LR

The quality rating for this care home is:	two star good service
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A quality rating is our assessment of how well a care home is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this full review a 'key' inspection.

Lead inspector:	Date:							
Kima Sutherland-Dee	2	3	0	4	2	0	1	0

This is a review of quality of outcomes that people experience in this care home. We believe high quality care should

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

The first part of the review gives the overall quality rating for the care home:

- 3 stars - excellent
- 2 stars - good
- 1 star - adequate
- 0 star - poor

There is also a bar chart that gives a quick way of seeing the quality of care that the home provides under key areas that matter to people.

There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

Outcome area (for example Choice of home)

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

This is what people staying in this care home experience:

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

Copies of the National Minimum Standards – Care Homes for Older People can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

The mission of the Care Quality Commission is to make care better for people by:

- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money.

Reader Information

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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Arbory Residential Home
Address:	London Road Andover Down Andover Hampshire SP11 6LR
Telephone number:	01264363363
Fax number:	01264363363
Email address:	christine@arbory.co.uk
Provider web address:	

Name of registered provider(s):	ABC Shelf Ltd
Name of registered manager (if applicable)	
Mrs Christine Anne Hanwell	
Type of registration:	care home
Number of places registered:	64

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	0	0
mental disorder, excluding learning disability or dementia	0	0
Additional conditions:		
The maximum number of service users to be accommodated is 64.		
The registered person may provide the following category/ies of service only: Care home only - (PC) to service users of the following gender: Either Whose primary care needs on admission to the home are within the following categories: Dementia (DE) Mental disorder, excluding learning disability or dementia (MD).		
Date of last inspection		
Brief description of the care home		
Arbory residential home is a large care home on the outskirts of Andover. The home is split into two with the old house connected to a three storey extension by a covered walk way. The home is in large secure gardens with extensive staff and visitor parking and security entrance systems. The home is registered to offer personal care for up to		

Brief description of the care home

64 male or female Service users who have dementia or mental disorders, excluding learning disabilities. The home was purchased by ABC Shelf Ltd in February 2008 and the new manager was registered in May 2008.

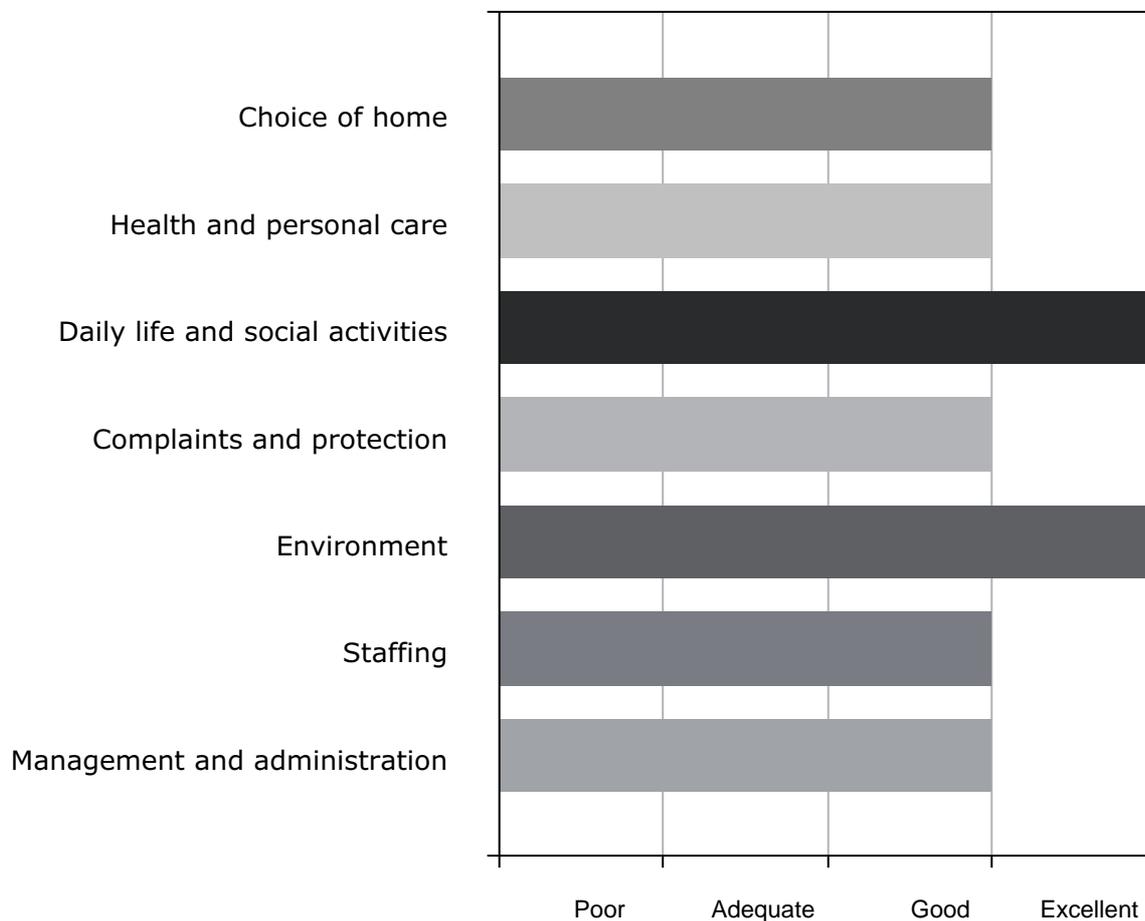
Summary

This is an overview of what we found during the inspection.

The quality rating for this care home is:

two star good service

Our judgement for each outcome:



How we did our inspection:

We prepared for this inspection by reviewing the previous inspection report dated the 31st August 2008. We also looked at the self assessment called the AQAA that the manager had completed as well as any other information we had received about this home.

On the 23rd April 2010 two inspectors spent six hours at the home. We spoke to the manager, the assistant manager and a number of the care staff, we also spoke with a number of residents and relatives, a district nurse and a podiatrist. We looked at a sample of the records and documents, saw the home environment and observed the care.

What the care home does well:

The staff know the residents very well and they demonstrated that they offer care in a thoughtful and kind way. The residents commented on how kind the staff were.

The staff meet the personal and health care needs of the residents and they seek and follow advice from health professionals.

The home environment is an excellent aspect of this home. The home is comfortable and well furnished with many seating and dining areas. The home offers people with dementia a stimulating, interesting and interactive environment where they can find many objects that they may be familiar with, such as old household items. There are small quiet areas that are themed with musical items, a 'baby nursery' and a fish tank and lava lamp for a calm area. The garden has been developed to offer many points of interest including a new vegetable garden that is accessible to all residents.

The management and staff teams work well together and the staff team are well trained in a variety of appropriate subjects.

What has improved since the last inspection?

The care plans have improved and this is an ongoing process to detail the care needs and the care given to each resident.

The manager, the provider and the staff have improved the home environment. This is now an excellent aspect of the care at the home, especially for the majority of the residents who have varying needs associated with dementia.

What they could do better:

The manager and the provider are aware of areas that need further improvement and they have plans to make those improvements.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details on page 4.

The report of this inspection is available from our website www.cqc.org.uk. You can get printed copies from enquiries@cqc.org.uk or by telephoning our order line 0870 240 7535.

Details of our findings

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Outstanding statutory requirements

Requirements and recommendations from this inspection

Choice of home

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the care home that includes how much they will pay and what the home provides for the money.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home provides enough information to prospective residents to make an informed decision and they are welcome to visit the home.

Evidence:

The homes self assessment (AQAA) states that the home supplies up to date and accurate information. It also states that residents and relatives are welcome to visit and have a meal on more than one occasion before they decide to move in. The residents are given a sample contract as well as the statement of purpose and a brochure.

The AQAA states that the relatives are asked to be involved in the assessment of the residents needs. A sample of two of these assessments showed that in one case minimal information had been recorded. This was because the resident had been admitted as an emergency, but a relative had been consulted about their needs. Another assessment had been completed and it contained all the information the staff

Evidence:

needed to start caring for the resident while they developed a full care plan.

The AQAA states that relatives are encouraged to prepare a residents room with personal items before they move in to make them more comfortable. A relative confirmed that they had brought in some personal items to help their family member settle in.

Health and personal care

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People's health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it, in a safe way. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home meets the personal and health care needs of the residents. The residents benefit from staff who treat them with respect and dignity.

The home stores, administers and records medication correctly.

Evidence:

Five of the residents care plans were seen. These record each persons needs and how the staff can best meet those needs. It also records all of the care that the staff have given for each resident every day. Following a recent safeguarding investigation the manager and social services agreed to an action plan for improvements to the records. The manager is in the process of putting this plan into practice. The plan had included training the staff in keeping the care plans accurate and up to date and in enhancing the key worker roles so the staff understood their responsibilities for accurate recording. The care plans included details of peoples health and personal care needs and instructions for the staff in how to meet those needs. The information included some personal preferences and routines such as when people like to get up but the manager agreed that the amount of personal preferences recorded could be improved. This would allow the staff to really understand the individual care needs of each

Evidence:

resident. The staff clearly knew people well and they treated the residents with a great deal of respect, care and attention, but for new staff particularly, the care plans should be used to get to know the likes and dislikes of the residents. This home accommodates residents with varying degrees of dementia who may express their wishes non verbally. The care plans had been reviewed and updated. The plans included any risks for each resident and how these should be minimised. These included the risk of falling, malnutrition, leaving the home unaccompanied and skin condition and pressure sores. One resident had a basic risk assessment for staff assisting with mobility or manual handling. The manager agreed that this needed further development.

The residents and a relative commented on how friendly and kind the staff were. Comments included ' I am very fond of some of the staff' ' The girls are lovely they look after me well' 'I like it here and the staff are always helpful'. There were enough staff to meet the residents needs and although busy the staff team did not seem rushed. The staff were seen sitting chatting to a resident and making sure people were comfortable. The residents appeared well cared for, their hair was neat and they had clean clothes and glasses. The AQAA states that the home has a dedicated hair and beauty room for the benefit of the residents but they are also encouraged to continue with their own arrangements outside the home if they choose. The staff wore different coloured uniforms and name badges to help to identify their roles.

The care plans contained information about the residents health needs. These records included information about visits from or to G.P's and other health professionals. A visiting district nurse said that the staff did meet the residents needs and the care was good. They said the staff seek and follow the nurses advice and there were always staff available to help the residents. The nurse added that the home had a low incidence of pressure sores. A visiting podiatrist said the care at the home was good and the staff assisted the residents to keep their feet in good condition between their visits every two months. She said that the staff record the foot care in the care plans. The manager showed a letter from a consultant dermatologist who had written to praise the manager and the staff for the way they had cared for the residents and managed a recent outbreak of a skin condition.

The staff have been trained to administer medication and this was seen to be carried out correctly. The pharmacy contractor carried out an audit in March 2010 and there were no issues raised. The AQAA states that the all senior staff who administer medication have extensive training. The staff had completed all of the medication records.

Daily life and social activities

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **excellent** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home provides excellent outcomes for the residents. Visitors are welcome in the home and the residents enjoy the meals.

Evidence:

The residents have many opportunities for activity and stimulation in the home and for trips outside the home. The manager and the staff have developed the environment and separated the lounges from the dining rooms. This means that the residents move around the home at different times of the day rather than sitting in one area. The staff said that they encourage residents to maintain their mobility. There are also interesting areas off corridors where the residents were choosing to sit. These are themed and one resident said they really liked sitting looking at the fish tank and the lava lamp. There was an area with musical instruments and reminiscence items were seen throughout the home including household appliances like old Hoovers and irons. One area had been developed as a nursery and several residents were making use of the replica 'babies' by sitting holding them and placing them in a cot. The manager and the staff observed that this was a calming activity for some residents. The home was full of interest from having special touching quilts with buttons and beads attached, to chests of drawers with many items the residents could look at or touch. The walls are decorated with picture boards that have photos of the residents taking

Evidence:

part in previous activities. The site visit was carried out on St Georges day and the staff decorated the home and the majority of the residents choose to wear hats during lunch. One resident said they like and join in any activities that are on offer. The home employs an activities co ordinator. Care staff also said that they are responsible for supporting the programme and for helping individual residents in their chosen activities. Care staff were observed supporting residents in group activities, such as taking talk time, and also engaging with residents individually. One member of staff said that a number of residents choose to be involved in household tasks such as washing up. Each dining room and some lounges have a small kitchenette area where residents can make their own drinks. One relative said that their family member used to enjoy dusting and they had continued that at the home. Social interaction is supported by group activities and group meals in the dining rooms. Group activities include talking sessions, musical events and film shows.

Visitors said they are welcome in the home and they were seen sitting with their relatives in the lounges or outside in the gardens. Families are invited to large home events and parties. The home was busy with residents moving around freely and going for walks in the gardens.

The residents said they liked the meals and that they could choose what to have. The manager explained that choices were offered at each meal. The staff knew the likes and dislikes of each resident and they asked about or offered the preferred portion sizes.

Menu boards displayed the days meals and new boards will start to display photos of the meals soon.

The AQAA states that they celebrate a wide range of cultural festivals and they offer appropriate foods. There are biscuits and fruit available as well as water dispensers for the residents who can help themselves. Those that need assistance are offered regular drinks and help to have their meals.

Complaints and protection

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

If people have concerns with their care, they or people close to them know how to complain. Any concern is looked into and action taken to put things right. The care home safeguards people from abuse and neglect and takes action to follow up any allegations.

People's legal rights are protected, including being able to vote in elections.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The residents or their relatives have several ways they can make a complaint. The residents are protected from abuse through clear policies and staff training.

Evidence:

The AQAA states that the home has a comprehensive complaints procedure. The residents and their relatives have been given a complaints procedure and this is displayed in the home. The residents have regular meetings and they are asked if they have any concerns. Relatives can also attend meetings three times a year. The home also had instant feedback forms near the entrance for relatives. All complaints are recorded.

There have been four safeguarding issues at the home and all but one of these has been concluded. Social services have worked with the home to ensure that the recording of care has improved.

The staff have clear guidance for reporting concerns and they understood their responsibility to pass on any concerns to the manager. The staff have attended training in safeguarding vulnerable adults.

Environment

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People stay in a safe and well-maintained home that is homely, clean, pleasant and hygienic.

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it.

This is what people staying in this care home experience:

Judgement:

People using this service experience **excellent** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

This home is suitable for the current residents. The home provides excellent facilities and it continues to improve for the benefit of the residents.

Evidence:

The home has continued to improve the environment for the benefit of the residents since the last inspection. The separate lounges and dining rooms encourage the residents to move around the home and these areas are comfortably furnished and well decorated. There are small sitting areas around the home which provide a homely and comfortable area for the residents, these contain many reminiscence items such as music equipment and old household appliances. There are more details about the quality of the environment in the section titled 'daily life and social activity'.

The manager and the provider are aware of how the home can be further improved and there are plans to achieve this. There was a slight unpleasant odour in areas of the home. The provider had recognised this in one of the monthly visit reports. This was felt to be due to old flooring and some old furnishings that are slowly being replaced. None of the residents or their relatives mentioned this but this is an area that needs addressing. The home employs cleaning staff and the home appeared clean. The staff had removed a number of chair covers for laundering and this is done regularly.

Evidence:

The garden has been thoughtfully redeveloped. There are many areas of interest from a fish pond to a bird aviary and a hutch and run for the homes rabbit. There is also a large raised vegetable patch which allows access to all the residents including those that need to use a wheelchair. The garden is fully accessible from the lounge and has paths and slopes for ease of use. The residents and their relatives made use of the garden and the seating areas during the day. The manager explained that there are plans to develop a courtyard as a cafe area, where residents can take their relatives. The garden is fully enclosed and gates have keypad entry for the safety of the residents.

The residents bedrooms were well decorated and the residents said they liked their rooms and they were comfortable. The manager encourages relatives to bring in personal items when the residents move in. The rooms were individual and personalised.

The staff have taken part in infection control training and equipment is provided. The cleaning trolleys are designed to support infection control and a member of the housekeeping staff was able to describe the colour-coding and washing arrangements for mops and cloths. Similarly, laundry bags are colour coded and clearly marked to support sorting of soiled items.

Staffing

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have safe and appropriate support as there are enough competent staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The residents are cared for by a safely recruited and well trained staff team.

Evidence:

The staff said they work well as a team and they rarely use agency staff. One member of staff said that there were enough staff to meet all of the residents needs. The staff took time and care to ensure peoples needs were met.

Of the thirty nine care staff, twenty three have achieved a national vocational qualification in care to at least level two. The other staff will begin this training from April 2010. All of the senior staff have completed a certificate in leadership and management. This demonstrates that the manager and the provider are committed to training and developing the staff team.

Four staff files showed that the staff had been part of a safe recruitment practice. All of the information and the required checks for the safety of the residents such as criminal bureau record checks and identification were in the files. The AQAA states that the staff are recruited locally so there is an ongoing connection for the residents with the local community.

The AQAA states that the manager co ordinates the staff training and a variety of diverse courses are available. The staff said they had good access to training and they

Evidence:

had received training appropriate to their roles. Examples of courses have included, dementia care, medication, palliative care and care planning. Some files showed extensive evidence of training attendance, both specialist care training and training in moving and handling, fire safety, infection control and first aid. Senior staff have more specialist training in managing challenging behavior and further dementia courses. The home has a member of staff who is qualified to train staff in manual handling. The recently appointed deputy manager will attend a specialist course in dementia in the summer of 2010. The training files have not been well maintained and it was not always easy to identify which staff had attended which courses. The certificates were available but the filing had not been kept up to date. The manager recognised the need to develop a training plan.

Management and administration

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have confidence in the care home because it is led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately with an open approach that makes them feel valued and respected. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home is managed in the residents best interests.

Evidence:

The registered manager is experienced and they have appointed a deputy manager to directly manage the care staff. The two managers say that they work well together and this was confirmed by a number of the care staff team. The manager attends regular network days with managers of other homes in the area. This is an opportunity to share ideas and receive support.

The manager states that they are open and available to speak with residents or relatives at any time or to reply to emails. Several residents said they were very fond of the manager. The manager's office is in a central area of the home and the door remained open throughout the day.

The residents can contribute their views about the home in a number of ways. They or their relatives can complete surveys and the provider said that 25 surveys had

Evidence:

recently been returned and the vast majority were very positive about the home and the care. There are regular residents and relatives meetings. The home has introduced instant feedback forms that the residents or their relatives can use.

The provider visits the home weekly and once a month they complete a report of their findings. The report for December was kept in the home but the manager and the provider had been in discussion about the need to keep these reports at the home. It is a requirement that they are available for inspection. The provider sent the reports for January and February 2010 straight away. The manager and the provider work closely together and they are aware of how to further improve the home for the benefit of the residents.

The deputy manager supervises the senior staff and they then supervise the care staff. The staff said they were supported and they could always ask if they had any questions. The senior staff have weekly meetings when they discuss all aspects of the care and the management of the care staff.

The AQAA states that a member of staff is responsible for health and safety and that the policies are available. The AQAA also states that all of the homes policies have been reviewed. A sample of the policies were seen for electrical safety and infection control. The staff have completed training in health and safety.

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action

Requirements and recommendations from this inspection:

Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action

Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action

Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No	Refer to Standard	Good Practice Recommendations

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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