

Highbank Care Home Service

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About the service

Highbank Intermediate Care Facility is situated in Eskbank, Dalkeith, and is close to shops and local amenities.

The home is run and managed by Midlothian Council. The home is made up of six units, each with lounge/ dining areas. Highbank currently provides long-term care to three residents and offers rehabilitation services, intermediate care, including assessment and interim stays, and respite stays to other people using the service.

There is an area which has been equipped to provide physiotherapy and rehabilitation programmes.

The service tells us their statement of purpose is as follows: "Highbank is a care home and opened in 1987 and was traditionally a long-term care home. In 2011 Highbank changed and now focuses on short-term care which accommodates 40 residents located in 6 units throughout the home.

The purpose of these beds is to prevent unnecessary hospital admissions and to allow clients to remain at home for longer. This also reduces delayed discharges in hospitals. Through rehab and assessment processes we can ensure that the best possible outcome can be reached for clients whether it be support put in place such as packages of care or equipment to allow a successful discharge home or if the client has now reached the stage of requiring longer term care. The respite service is there to support clients who are still living at home and to assist in the prevention of carer stress."

What people told us

We spoke with many people who use the service and their families who told us that they were happy with the care and support they were receiving at Highbank. A common compliment was about the quality of the meals prepared on site.

Some families said that they would like to be clearer about the plan for their relative and we discuss this further within the report.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	3 - Adequate
How good is our leadership?	4 - Good
How good is our staffing?	3 - Adequate
How good is our setting?	3 - Adequate
How well is our care and support planned?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

3 - Adequate

We have assessed that Highbank is reaching an overall adequate level in response to the question 'How well do we support people's wellbeing?' We found areas of strengths which had a positive impact on people's lives but further improvements known by the management team are required.

People using the service confirmed that they were treated with respect by familiar staff. We observed some compassionate and caring interactions between staff and people they support.

The service, however, continues to be over reliant on agency and locum staff and this does have an impact on the quality of interactions. We heard staff often refer to people using terms of endearment such as 'love' and 'sweetheart' rather than using people's name as they prefer and asking people what they take in their hot drinks, showing that staff do not know people as well as they should.

In residential care homes where people live permanently, we would expect there to be a focus on ensuring people get the most out of life and that their aspirations and dreams are realised. As Highbank's purpose is to provide intermediate care, we would not expect this to be a service provided to all. At the time of this year's inspection there were three long term residents living on one wing of the home also used for intermediate care. Further consideration should be given to the appropriateness of this, particularly where some of the permanent residents dislike noise and change.

In order to provide entertainment, stimulation and activities, the service does have activity coordinator support. The provision of interesting and entertaining activities is important for the permanent residents and those attending Highbank for a respite break. However, at the feedback meeting we discussed the role activities play in the intermediate care environment and the need to consider how activities are more closely aligned to people's needs and personal outcomes. As the service benefits from onsite physio and occupational therapy staff, there would be opportunities for more joint working to develop this approach.

Furthermore, when considering if people get the most out of life while staying at Highbank, we met some people who had been there for a period of months and the delay in returning home was frustrating, particularly where people have recovered or regained skills. In these situations opportunities to enable people return to their local community such as attending local day care in preparation for returning home should be sought. At feedback we discussed plans the management have to link with voluntary agencies such as the Red Cross and to recruit volunteers to provide similar support.

Overnight, we identified that the staff carry out 'breathing checks' at 3am and 6am to make sure people are safe. Some staff reported that they felt uncomfortable potentially disturbing people. One person with dementia was disturbed by the 3am check so much so that they got up, dressed themselves and came to the lounge thinking it was morning. Whilst it is good to note that staff want to ensure that people are safe and secure, consideration should be given to the impact this has on people's sleep and, as such, their wellbeing. Individual arrangements should be agreed, particularly where people are staying at Highbank for intermediate care and re-enablement with a view to return home. At the feedback meeting it was agreed that these blanket arrangements will be reviewed.

Highbank is registered as a residential care home and as such does not provide nursing care. Despite this, the service recognises the need to promote people's health and wellbeing. People were well nourished through the provision of home made meals, which people confirmed they enjoyed. We saw people being given choices and, where these were not suitable, alternatives were available. People also benefit from the provision of regular drinks and fresh water was available to all through a self-service facility. We found that suitable medication systems were in place to ensure that people receive their medications as prescribed. Where possible, people retain contact with their own GP and the use of their own pharmacy to maintain these relationships while people are temporarily at Highbank and people are supported wherever possible to maintain the responsibility for taking their own medicines, promoting independence.

Highbank aims to support people's independence through employing an enablement approach. Whilst some people told us that they are encouraged to do as much as they can for themselves and there were facilities to enable people to make breakfasts/snacks and drinks, we did not see this approach widely promoted.

It was good to hear that in addition to the visiting district nursing arrangement, that a new nurse continence advisor will be commencing as part of the Highbank team, in recognition of the importance of continence promotion and support.

We have retained the grades awarded at the last inspection; however, we do expect these to improve when recent changes and those planned by the management team are implemented and are fully embedded. Areas for improvement are detailed above.

How good is our leadership?

4 - Good

Overall we have assessed that management and leadership is performing at a good level.

The service has evolved over the past few years, changing from a residential care home to an intermediate care unit, providing respite, assessment and rehabilitation.

At the time of the inspection the manager shared the aims and objectives document of the service which is being developed in order to give staff, people using the service and families a clear explanation of the various functions and approaches used at Highbank.

Further work is required to refine the aims and objectives and, once developed, appropriate ways of communicating these to the various stakeholders needs to be considered. It would also be good to see more involvement of people using the service and staff in the development of these key documents. We will examine and evaluate progress in this area at the next inspection.

The manager has a plan drawing together areas for improvement identified through inspection and the service's own evaluations. We also heard about various ways of seeking people's feedback and suggestions for improvement. We saw notices on the information boards asking people to complete a feedback form when they leave the service and we saw a suggestions box in the main entrance/foyer. Unfortunately, the manager stated that there were very few returns or comments. Additional ways of including people using the service and staff in the quality management of the service should be explored, including holding meetings and working groups while people are attending the service and carrying out exit interviews led by volunteers/advocates. The service should also move to carrying out a self evaluation against the Care Inspectorate's new Improvement Framework in order to update the Improvement Plan in the spirit of continuous improvement.

There was good evidence of multi-disciplinary working and the inclusion of the new social worker post should have significant benefits to people, not only in the liaison with families but also supporting people to return home or on to more intensive care if needed.

Staff are well led. There is a good management infrastructure and staff confirmed that they were well supported. Staff employed by the service told us that they receive regular supervision, they are able to attend team meetings and that there are many helpful training opportunities. This enables staff to provide care and support which is in keeping with up to date and safe practices.

We would suggest that more attention is given to developing team meetings to allow more opportunities for staff to reflect on their practice, to discuss guidance and standards and share ideas and that these discussions are recorded to evidence that they are taking place. This is to make sure that staff are being consistent in their approach to working with people and that it reflects good practice.

However, supervision and team meetings are not afforded to agency and locum staff who the service is dependent upon to maintain staffing levels. Additional ways of monitoring and supporting night staff should also be considered.

Areas for improvement

1. The manager should go through this report and identify the various areas for improvement recorded under each of the five key questions and record these on their own Improvement Plan with the action to be taken and the timescales. These improvements should then be implemented and monitored.

We will continue to monitor this and record on this at the next inspection.

This is in line with the Health and Social Care Standard 4: "I have confidence in organisation that supports me."

How good is our staff team?

3 - Adequate

When considering the question "how good is our staff team?" we saw some good practice and met some staff who are eager to provide a good service; however, due to the lack of consistent staff we have awarded an overall grade of adequate this year.

At the last inspection we made a legal requirement that staff recruitment was completed by the end of June. At the time of this inspection we found that the service was still over reliant on the use of agency and locum staff to maintain staffing levels. We inspected staff rotas and could see periods of time where there were more agency staff on duty than permanent staff; this was particularly noticeable at night time. At the feedback meeting we were given assurances that agency staff were regulars and familiar with the service and that there had been progress with staff recruitment and posts were now advertised and new staff should be in post by November. We will monitor this outwith the inspection process.

It is a legal requirement that services are sufficiently staffed by skilled workers in order to meet the needs and personal outcomes of people they support. We spoke with staff who were dissatisfied with the change in terms and conditions and the demanding shift pattern. The management team at the time of the inspection were reviewing the rota and, as such, staffing levels. It is important that this review focuses on the different functions of the service, the aims and objectives and the different needs of people using the service. Consideration should also be given to deploying staff to the different wings rather than allocating staff on a daily basis to different parts of the home to afford greater continuity for people using the service.

We examined staff files and concluded that staff are safely recruited. New staff confirmed that they received an induction and were given the necessary support in order that they were confident in their role to provide support to people using the service.

Whilst some staff expressed some dissatisfaction about their work, others spoke positively about their jobs and what they were trying to do to improve people's lives. Some staff did express some confusion about the purpose of the different areas of the home (which links to the manager's current work on developing clearer aims and objectives).

Staff confirmed that they had access to various courses and training that equipped them to carry out their jobs and support people using the service. At feedback we were told that more training in enablement/promoting independence is to be provided for all staff.

As we have been given assurances at the feedback meeting that staff recruitment was underway, we have not made any further requirements or taken any further action. However, we will continue to monitor this over the next few months and report on this at the next inspection.

How good is our setting?

3 - Adequate

Highbank is located within the local community close to various amenities.

Externally the building has a pleasant appearance with nice planting.

Unfortunately Highbank is not purpose built, previously being a long stay residential care home and, as such, it has various limitations. The service operates across six wings, four on the ground floor and two upstairs. Each wing has a lounge/dining area and bathroom facilities. Very few rooms have en-suite facilities which we would now expect in new builds.

Most people gather during the day and evening in the main foyer area and this is where the group activities take place. This is not ideal as the service receives many and frequent visitors, including families and professionals.

We have at previous inspections commented on the need to upgrade the facilities to improve the environment for people and there was work taking place at the time of this inspection. The service benefits from an onsite handyman. We noted considerable developments over the past year, with improved bathroom facilities, redecoration of the various wings, introduction of home furnishings and wall art lying in rooms, ready to be hung. Bedrooms were also being refreshed, however, due to the high and quick turnover of people, we recognise that it has been difficult to stick to a bedroom refurbishment plan. Some more attention is required to walls in corridors and some door facings to make the environment comfortable and welcoming to people who use the service and their visitors. At feedback the management team confirmed that they are developing a plan of work with building services to ensure that this work is completed.

At the time of this inspection landscaping was also underway in the garden, with a view to enable people using the service to more easily access the outdoor space from the lower wings and common foyer.

At previous inspections we raised concerns about the use of the intercom system and it was good to hear that this is no longer used, with the exception of alerting everyone to the fire equipment test weekly. At this inspection we observed the impact the 'nurse' call system has on people using the service. The system enables people to call for assistance from their bedrooms or bathrooms. However, the buzzer rings throughout the building. We saw people watching TV and chatting with friends, get frustrated and commenting on the 'awful noise'. At feedback we discussed this issue and the management team committed to address this by introducing a staff pager system.

Whilst we saw a breakfast bunker in one wing, more attention should be given to providing facilities and equipment to support people gain and retain independent living skills. The manager confirms that this is being considered currently.

Highbank has no internet facilities for people who use the service. We would expect this in order that people can remain connected to friends and family and the wider community. We heard that some people go on trips arranged by the activity staff. Again we would suggest that the provision of such activities should be linked to people's support plans and the reason for them staying at Highbank.

We want to acknowledge the continued commitment to improvements demonstrated in order that people using the service have a safe and comfortable stay, particularly as there are plans to re-provision the service in a purpose built facility in 2021. We have retained the evaluation of 'adequate' for this inspection but anticipate this will improve when the various building works are completed and people are making use of the facilities available.

How well is our care and support planned?

3 - Adequate

Support plans should be developed from assessments, detailing the care and support people using the service will receive in order to achieve their personal outcomes and aspirations. We have assessed this to be adequate at this inspection in recognition of the work that has started in this area.

At previous inspections we identified that support plans were cumbersome and difficult for staff to use.

At this inspection we saw that there had been a significant improvement in the style of support plans being introduced. We saw that there was initial assessment information and then clear areas of support/what I want to achieve identified with records of progress or monitoring. We also saw the multi-disciplinary team working together revising the paperwork in order to make further improvement. This should ensure that the assessment and support planning reflects people's needs and outcomes.

We want to see more involvement of people and their families in the support planning process and suggested that plans were kept in people's rooms so they had easy access to these.

At previous inspections we made a requirement that people's support plans must be reviewed at least every six months or more frequently in line with the legislation. This requirement has been met for the permanent residents. For people using the service for intermediate care (assessment and enablement), a weekly multi-disciplinary meeting has been introduced. A challenge for the service will be finding ways of involving people and their family carers in these meetings/reviews; however, as it is a legal requirement that people and their representatives are involved in the review of their plans, we will monitor how this is carried out.

At the last inspection we heard that an information booklet was being produced for people using the service and relatives, however again at this inspection some relatives told us that they were unclear about the plan for their relatives. They told us that they had to ask to speak to staff, rather than receiving updates and were unclear about the formal communication arrangements. Other relatives said they were happy with the arrangements and the communication. At the feedback meeting we discussed the need to review the information provided to people and how this links again to the aims and objectives.

As it is important for people using services to have their views heard, we would want to see more involvement of people and their families in the development of information in the spirit of co-production.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

1. In order to ensure people's care and support needs are continuously met as agreed, the service provider must ensure that staff numbers are appropriate for the health, welfare and safety of service users.

This is to ensure the care and support is consistent with the Health and Social Care Standards which state: "My needs are met by the right number of people." (HSCS 3.15), 4.16 "I am supported and cared for by people I know so that I experience consistency and continuity." (HSCS 4.16) and in order to comply with Regulation 15 (staffing) of the Social Care and Social Work Improvement Scotland (Requirements for care services) Regulations 2011.

Timescales: 31st June 2019

This requirement was made on 8 March 2019.

Action taken on previous requirement

At the time of this inspection we were told that posts were advertised and that further work on the rota was being undertaken. We plan to monitor this outwith the inspection process.

Not met

Requirement 2

The service must ensure that the premises are in a good state of repair externally and internally and are decorated and maintained to a standard appropriate for the care service.

This is in order to comply with: The Social care and Social Work Improvement Scotland) (Requirements for Care Services) regulations 2011 (SSI 2011/210), regulation 10 (s2) (b) and (d).

Timescales: An updated action plan with timescales for the start and completion of environmental improvement to be sent to the Care Inspectorate by 1 June 2019.

This requirement was made on 8 March 2019.

Action taken on previous requirement

An action plan is in place and significant improvements were noted. See the report for more details. As this is still work in progress we have identified this to be not met.

Not met

Requirement 3

1. In order to ensure people's care and support needs are continuously met as agreed, the service provider must review their needs with their involvement (or others as felt appropriate and agreed) on a six-monthly basis, or more often as when required or changes in need are identified.

This is to ensure the care and support is consistent with the Health and Social Care Standards which state: "My personal plan is right for me because it sets out how my needs will be met, as well as my wishes and choices." (HSCS 1.15) and in order to comply with Regulation 5 (Personal plans) of the Social Care and Social Work Improvement Scotland (Requirements for care services) Regulations 2011.

Timescale: 1 June 2019

This requirement was made on 8 March 2019.

Action taken on previous requirement

Action has been taken to address this requirement.

Met - within timescales

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	3 - Adequate
1.3 People's health benefits from their care and support	4 - Good

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
2.3 Leaders collaborate to support people	4 - Good
2.3 Staff are led well	4 - Good

How good is our staff team?	3 - Adequate
3.1 Staff have been recruited well	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good
3.3 Staffing levels and mix meet people's needs, with staff working well together	3 - Adequate

How good is our setting?	3 - Adequate
4.1 People experience high quality facilities	3 - Adequate
4.2 The setting promotes and enables people's independence	3 - Adequate
4.3 People can be connected and involved in the wider community	3 - Adequate

How well is our care and support planned?	3 - Adequate
5.1 Assessment and care planning reflects people's planning needs and wishes	3 - Adequate
5.2 Families and carers are involved	3 - Adequate

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