

Newbyres Village Care Home Service

20 Gore Avenue Gorebridge EH23 4TZ

Telephone: 01312 705 656

Type of inspection:

Announced

Completed on:

5 May 2021

Service provided by:

Midlothian Council

Service no:

CS2007167115

Service provider number:

SP2003002602



About the service

Newbyres Care Home is situated in Gorebridge, Midlothian and is close to shops and local amenities.

The home is run and managed by Midlothian Council. The home is made up of five wings named "streets", each with lounge and dining areas. There is also a wing that houses the kitchen and laundry facilities. The five streets are named First, Second, Third, Fourth, Fifth Street and have shared gardens.

Newbyres Care Home provides long-term care and is registered to support 61 people.

A mission statement was in place for the service:

"Health and Social Care working together to develop a professional and flexible workforce who fully understands the core values that make a service unique in delivering the highest standard of care to our residents.

Together, we respect each resident as an individual and feel honoured to work within their home.

We will strive to make their home welcoming, friendly, warm, and safe from harm. Together we will build meaningful relationships and continue to improve and develop the service we provide."

We carried out a follow up inspection of the home using virtual technology. We used the Health and Social Care Standards to review the quality of care for people, these can be accessed here https://www.gov.scot/publications/health-social-care-standards-support-life/

What people told us

We did not have the opportunity to engage with people living in the care home during the inspection.

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?	not assessed
How good is our leadership?	not assessed
How good is our staff team?	not assessed
How good is our setting?	not assessed
How well is our care and support planned?	not assessed

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

How well do we support people's wellbeing?

This key question was not assessed.

How good is our leadership?

This key question was not assessed.

How good is our staff team?

This key question was not assessed.

How good is our setting?

This key question was not assessed.

How well is our care and support planned?

This key question was not assessed.

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

Requirements

Requirement 1

The provider must ensure people receive responsive care and support that meets their assessed needs and preferences.

By the 31 March 2021, the provider must evidence improvement in the assessment, care planning and monitoring of people's health and wellbeing within the service.

In order to achieve this the provider must adhere to the following:

Support planning:

a) People and/or their representatives must be consulted and involved in the risk assessment, subsequent development, implementation, monitoring and reviewing of their support needs and personal plans.

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- b) Personal plans must meet the required standards and recognise best practice models for care and support, including, but not limited to, nutrition, supporting mobility and anticipatory care planning.
- c) Quality assurance systems and processes must be in place to ensure effective and positive outcomes are achieved for people experiencing care.

Staffing:

- d) Staff must have the required skills, knowledge and competence to assess, plan, and monitor people's health and wellbeing and take the appropriate action needed when concerns are identified.
- e) Robust systems and processes must be in place to ensure that staff have access to ongoing support and quidance and any identified learning and development needs are met.

To be completed by: 31 March 2021 This is to ensure care and support is consistent with Health and Social Care Standard 1.12: I am fully involved in assessing my emotional, psychological, social and physical needs at an early stage, regularly and when my needs change. This is in order to comply with: Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 21 December 2020.

Action taken on previous requirement

The service had implemented new support plans for people living in the care home, involving people and their families in this process. Support plans now included detailed information about the person and what was important to them. People could be confident that their support plans were being regularly reviewed and support sought from other professionals when required.

Appropriate health risk assessments had been carried out and support plans included information about how staff should support people to eat and drink well and maintain their independence. Staff had received refresher training in the use of the MUST tool and we saw that this was now being used effectively to identify people who were at risk of weight loss.

People had been supported to develop anticipatory care plans and 'recognising dying' training was being rolled out for staff. Staff were being supported to develop in their roles and additional training had also been planned.

The service had introduced a range of quality assurance audits. Although these had not been fully imbedded into practice, we could see that they were being used effectively to evaluate outcomes for people experiencing care and identify areas for improvement.

Met - outwith timescales

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

In order to ensure good outcomes for people experiencing care, the manager should ensure that people's meals and snacks meet their dietary needs and preferences when developing their outcome care planning.

This is to ensure care and support is consistent with the Health and Social Care Standard 1.37: My meals and snacks meet my cultural and dietary needs, beliefs, and preferences.

This area for improvement was made on 25 January 2021.

Action taken since then

We did not assess this area for improvement.

Previous area for improvement 2

In order to ensure good outcomes for people experiencing care, the manager should develop communication agreements with relatives. This would detail how communication would be established and in what circumstances. Also, to cover levels of expectations balanced with what is realistically achievable for all given restrictions at that time. This should be reviewed as restrictions change.

This is to ensure care and support is consistent with the Health and Social Care Standard 2.18: I am supported to manage my relationships with my family, friends or partner in a way that suits my wellbeing.

This area for improvement was made on 25 January 2021.

Action taken since then

We did not assess this area for improvement.

Previous area for improvement 3

In order to ensure good outcomes for people experiencing care, the manager should ensure that there are effective communication systems in place to involve people and their representatives in decisions about their care and support and keep them up to date with any changes to their health and wellbeing.

This is to ensure care and support is consistent with Health and Social Care Standard 2.17: I am fully involved in developing and reviewing my personal plan, which is always available to me.

This area for improvement was made on 21 December 2020.

Action taken since then

We did not assess this area for improvement.

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Previous area for improvement 4

In order to ensure good outcomes for people experiencing care, the manager should risk assess the impact of the current visiting restrictions for people. Essential visits should be arranged for people who need additional psychological or emotional support.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This area for improvement was made on 21 December 2020.

Action taken since then

We did not assess this area for improvement.

Previous area for improvement 5

In order to improve outcomes for people experiencing care, the manager should ensure that effective systems and processes are in place to investigate and respond to concerns and complaints timeously.

This is to ensure care and support is consistent with Health and Social Care Standard 4.23: I use a service and organisation that are well led and managed.

This area for improvement was made on 21 December 2020.

Action taken since then

We did not assess this area for improvement.

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

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