

Highbank Care Home Service

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Type of inspection:
Unannounced

Completed on:
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Service provided by:
Midlothian Council

Service provider number:
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Service no:
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About the service

Highbank care home provides care to a maximum of 40 people over the age of 60, of which 6 will be respite/short breaks places. The Provider of the service is Midlothian Council. A new home is scheduled to be built within the next two years to offer a more specialised service in a more suitable environment.

The care home is situated in Eskbank, Dalkeith, and is close to shops and local amenities. The home comprises of two floors that offer accommodation. The home is made up of six wings, each with a lounge/dining and kitchenette area. Some bedrooms have en-suite facilities. There are shared toilets and bath/shower rooms in each unit. The laundry and kitchen area are on the ground floor. There are patio and garden areas around the home that people can access easily.

The care home provides intermediate care which includes rehabilitation and assessment. Placements are usually short term before people move on and professionals are involved from the Health and Social Care Partnership to provide support, such as, physiotherapists, and district nurses.

About the inspection

This was an unannounced follow up inspection which took place on 9 Jan 2023 between 9:30 am and 16:30 and 10 Jan between 09:00 and 16:00. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with people using the service and their families/friends.
- we talked with members of staff and the management teams
- observed staff practice and daily life and reviewed a range of documents

Key messages

People experienced compassion, dignity and respect.

The staff knew the people they supported very well and worked as a team to achieve positive outcomes for people.

People were supported by staff to enjoy meaningful activities .

Peoples health needs were monitored well and referrals were made to health professionals when needed.

There were good working relationships between management and staff.

The management team had effective oversight of the service.

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?	4 - Good
How good is our leadership?	5 - Very Good
How well is our care and support planned?	4 - Good

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

How well do we support people's wellbeing?

4 - Good

We found significant strengths in aspects of the care provided and how this supported positive outcomes for people. Therefore, we evaluated this key question as good.

People experienced warmth and kindness from staff who had built up positive relationships with the people they support. Staff encouraged people to be independent, promoted choice and consistently showed in-depth knowledge of each person and as a result had meaningful interactions. This ensured people's wellbeing and sense of worth was enhanced by staff who were knowledgeable and skilled.

There was a culture of respect within Highbank between all members of the team which created a lovely environment. All the staff we spoke with stated they were happy in their roles and how much satisfaction they got from supporting people to have a better quality of life.

People were encouraged to make decisions and choices about how they wanted to spend their time which allowed them to maintain and develop their interests and what matters to them. This was very beneficial as Highbank offers intermediate care and many are awaiting care packages to return home. Independence was promoted at the right level to make the transition easier.

Staff supported activities and worked alongside the activity coordinator. This ensured people had opportunities to enjoy and take part in activities should they wish to do so. People were having fun and social bonds were clearly seen between people living in the home. There was one activity coordinator who was working on plans to do more one to one activity and activities upstairs to include those who choose to stay in their rooms. People benefitted from regular interactions and engagements from staff which provided opportunities to feel included.

There were no restrictions on family visiting, family and friends were invited into the home which allowed further opportunities for people to connect with those that are important to them. Where restrictions were needed, such as outbreaks of infectious disease, this was managed in a way that still allowed service users to have contact and relationships but ensuring that all involved are fully informed of the situation and can make informed decisions around visiting and infection control.

Meal time experience was well organised and unhurried. People sat with friends and there was a very relaxed atmosphere with people chatting and interacting with each other. Staff encouraged and enabled people to eat their meals independently with just the right level of support where needed. This was offered in a respectful manner. There was access to a variety of meals and drinks. Staff promoted good hydration to people who needed gentle prompting throughout the day. People's wellbeing benefitted from an approach that enabled a healthy attitude to food and drink.

Management regularly monitored and audited medication and staff received regular training to ensure safe practice which benefitted people's health.

There were very good relationships with health care professionals and regular multi-disciplinary meetings were taken place. This had a positive impact on health outcomes for people supported in Highbank by people working together proactively.

How good is our leadership?**5 - Very Good**

We found significant strengths in relation to management and leadership that had a significant impact on positive outcomes and experiences for people being supported and their families. Therefore, we evaluated this key question as very good.

People benefitted from good leadership skills because quality assurance and improvement were led well. Management promoted strong teamwork and high standards of practice as well as the understanding of maintaining the standards and leading changes where improvement was necessary. People could be assured the organisation providing their care was well led and managed.

Staff received regular training and supervisions. Staff told us the management team were supportive and approachable, they felt listened to and valued. Team morale was high and staff felt able to offer ideas to help drive improvement and further develop their knowledge and skills. This meant people could have confidence staff were trained, competent and skilled and followed their professional and organisational codes.

The manager had developed a full and comprehensive quality assurance system and demonstrated a clear understanding of what works well and what improvements are needed. This will ensure people benefit from a culture of continuous improvement.

Relatives spoke positively about communication and relationships with the management team and staff. People could be confident that learning from feedback improved outcomes for people.

The manager was responsible for the recruitment of staff, safe recruitment guidance was followed. Systems in place were completed consistently and staff did not commence employment until all necessary pre employment checks were carried out and satisfactory.

How well is our care and support planned?**4 - Good**

We evaluated this key question as good where strengths impacted positively on outcomes for people and outweighed areas for improvement.

Care plans were well written, person centred and contained very informative detailed information about the person. The plans were easy to follow and gave a good background on the person, their life, medical history and who and what was important to them. The plans were regularly updated and reviewed. This demonstrated there was a sustained approach to ensuring support plans held relevant information to deliver the right care and support for that person.

Legal documents were all in place as well as risk assessments and safety plans. This meant there was clear guidance for all staff to minimise risk and ensure people were safe.

The support plans were all in paper formats which made them time consuming to review to ensure every section was up to date.

The personal plans would benefit from further work to ensure they included guidance for staff on supporting someone with stress and distress. This would include effective interventions to support the person and any reasons for their stress and distress. This would lead to consistent approaches for the benefit of the person. This was discussed with the manager who responded immediately with an action plan with timeframes to ensure this was completed. We have therefore not made an area for improvement.

Anticipatory care plans were in place and reviewed and updated regularly by the management team where needed.

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

Staff should follow the 'Open with Care' guidance on visiting to ensure that people make the most of spending time with their friends and loved ones.

This is to ensure care and support is consistent with 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 5 July 2021.

Action taken since then

There are no restrictions on visiting and clients are supported in relationships that suits their wellbeing. During any outbreaks this is managed in a way that still allow clients to have contact and relationships but ensuring that all involved are fully informed of the situation and can make informed decisions around visiting and infection control.

This area for improvement was met.

Previous area for improvement 2

Staff should be aware of the legal framework that supports adults with incapacity to ensure their rights are met. Appropriate documentation should be available for staff to see and use to ensure they have the knowledge and understanding to support people who lack capacity. This includes information as to who is making decisions on the person's behalf.

This is to ensure care and support is consistent with Health and Social Care Standard 1.3: If my independence, choice and control are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively

This area for improvement was made on 5 July 2021.

Action taken since then

All power of attorney and adults with incapacity documentation are in place for service users in the support plans and the assessment information. Plans clearly states whether capacity has been assessed including who did this and date. Senior team all aware that capacity must be determined prior to a move to the service being agreed and Social Work review all capacity paperwork to determine whether a person can be legally moved or not. Appropriate training is provided in this area for all staff.

This area for improvement was met.

Previous area for improvement 3

People experiencing care who are at risk of falling should be cared for in ways that promote their safety and independence. The manager should ensure that appropriate falls prevention guidelines, risk assessments and support plans are in place for people, based on recognised falls prevention frameworks. Staff should be provided with training and support their need to understand this and apply it to their practice.

This is to ensure the care and support is consistent with the Health and Social Care Standards which state: "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).

This area for improvement was made on 10 November 2020.

Action taken since then

Updated paperwork around falls assessments now in place. A person centred risk assessment (with a risk rating) as well as a Falls risk assessment & support plan which gets completed for all new admissions and this is reviewed following any fall or change in needs which might affect mobility. A Tool has also been introduced to assess the use of bedrails to help minimise this risk. Clients and their families are provided with a falls booklet too for information.

This area for improvement was met.

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?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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