

Inspection of Newbyres Village Care Home**Report by Morag Barrow, Director of Health and Social Care Partnership****1 Recommendations**

The Council is recommended to note the content of the report and progress made.

2 Purpose of Report

This report provides an overview of the report following the recent unannounced care inspectorate visit for Newbyres Village Care Home.

9th March 2022**Report Contact:** Grace Cowan
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3 Background

- 3.1 Midlothian Health and Social Care Partnership's Newbyres Care Home was inspected on 11th November 2021 by the Care Inspectorate as a registered care home for people aged over 60. Newbyres Care Home provides long term care for 61 residents. The report was published on 22nd November 2021.

The inspection format was undertaken under the new Care Inspectorate Health and Social Care standards for care homes.

It covered the following theme: -

- How well do we support people's wellbeing?
- How good is our care and support during the COVID-19 pandemic?

- 3.2 Following the recent inspection a report was published that details the areas of its findings and outlines areas for recommendation and/or requirements.

The inspection report grades the areas of inspection from 1 (Unsatisfactory) to 6 (Excellent). This inspection report graded the three areas as follows:

How well do we support peoples wellbeing	3	Adequate
How good is our care and support during the COVID-19 pandemic?	4	Good

People described carers as very kind and caring. Staff were well-meaning in their actions and clearly wanted to take care of people.

The management team and staff had been proactive during the pandemic when reviewing people's care needs and liaising with people's relatives by phone, video call, and when restrictions eased, in person.

The activity co-ordinator had provided one to one and some group activities, however these were limited in availability due to Covid restrictions.

There was one requirement highlighted as part of this inspection pertaining to medication management. Although an improvement plan had been introduced by the manager which had included pharmacy audits, retraining of staff, competency assessments and reflective accounts, some errors were still being experienced.

Areas of improvement noted at time of inspection were:

1. To ensure people are supported well the manager should ensure that staff always treat people with dignity and respect. This practice should also reflect the language and terminology used when in discussion with people, within the staff team and recorded in support related documentation.
2. To support the improvement of peoples' physical and mental wellbeing, the manager should review the way in which activities are organised and planned with people. This should focus on developing more person-centred activity plans with people, considering the quality and amount of physical and social activity made available for people within and outside the home.
3. To ensure peoples' skin care is monitored and managed correctly, the manager should ensure relevant care plans and other health records are kept up to date and fully accessible to all staff.

3.4 The delivery of care and support was reported to be good in relation to Covid-19.

- The care home was clean and tidy, and staff worked hard to maintain this level of cleanliness.
- New furnishings had been purchased for the home following consultation with people.
- Domestic staff were confident in describing the cleaning required and the products they needed to use to reflect the Scottish COVID-19 community health and care settings infection prevention and control addendum.
- There was a good supply of Personal Protective Equipment (PPE) to ensure people and staff were protected against infection.
- Regular routine testing for staff took place to promote people's safety.
- Relatives were supported with the testing process when visiting care home.

Overall, the infection prevention and control measures were of a good standard to keep people safe.

Whilst staff had been increased during the COVID-19 pandemic to allow for a responsive approach to people's changing needs, staffing levels at times were not enough to allow for engagement in meaningful conversation or activities out with delivery of people's direct care and support needs. The need to have a recognised measurement of resident acuity was highlighted as an area of improvement within the inspection report.

In relation to training, gaps were highlighted in relation to falls prevention, caring for smiles, palliative, and skin care. This was impacted by the pandemic. A requirement regarding re-focus on training was included in the Care Inspectorate report.

4 Conclusion

The Care Inspectorate reported in their findings from visiting clients and speaking to family members that people said:

“The staff are very kind and caring”

“I took part in the activities at Halloween”

The service has improved a lot with regards to getting and answer when you phone for updates about my mother”

“As a family we are happy with the support provided to our mum by the care staff”

Other comments from some relatives highlighted the need to improve communication, examples given being unable to get through on the phone to inquire about my mother and as a result have had to go down to the home in person to speak to someone.

5 Report Implications

5.1 Resource

There are no financial and human resource implications associated with this report.

5.2 Risk

The Care Inspectorate inspect all registered services on a regular basis with announced and unannounced inspections. A report is published which informs all stakeholders about the key strengths of the service, areas for improvement and sets out the main points for action.

Following the publication of that report it is accessible to the public via the Care Inspectorate website, and by requesting a hard copy. It is also on display in the Care Home base for staff and visitors to access and review progress.

5.3 Policy

Strategy

There was one requirement from the recent inspection and 5 areas for improvement.

Requirement:

People who need help to take their medication can be confident that they will receive it safely from appropriately skilled staff. They will know that there are clear policies and guidelines in the service on the use, storage and administration of medication.

Improvements:

People are supported well the manager should ensure that staff always treat people with dignity and respect. This practice should also reflect the language and terminology used when in discussion with people, within the staff team and recorded in support related documentation.

Support the improvement of peoples physical and mental wellbeing, the manager should review the way in which activities are organised and planned with people. This should focus on developing more person-centred activity plans with people, taking into account the quality and amount of physical and social activity made available for people, within and outside the home.

Ensure peoples skin care is monitored and managed correctly, the manager should ensure relevant care plans and other health records are kept up to date and fully accessible to all staff.

Staffing levels and the skill mix of care teams are responsive to the changing needs of people, the manager should take account of the dependency levels of people.

Ensure that people, have confidence that those who care for them are trained, competent and skilled to meet their care needs, the manager should ensure that training/ re-fresher training includes, but is not limited to the following: falls prevention, caring for smiles, palliative care, skin management.

Newbyres Village Care Home has responded to the inspection with a comprehensive action plan, with clear timescales and outputs to deliver to the plan.

Support to achieve the action plan is being provided by the Midlothian HSCP lead pharmacist and care home support team. Oversight assurance for the action plan is in place via Midlothian HSCP Clinical and Care Governance Group.

Consultation

Copies of the Inspection report have been made available to Elected Members, and staff members, and notified to families/carers and other interested parties.

Equalities

There are no apparent equalities issues.

Sustainability

The HSCP is reviewing complexity of residents requiring care home placement, and will further refine and develop the care model at Newbyres Care home to reflect this.

6 Technology issues

There are no Technology issues arising from this report.