

**Newbyres Village Care Home: Care Inspectorate Report** 

Report by Grace Cowan: Head of Older People and Primary Care

**Report for Information** 

#### 1 Recommendations

The Council is asked to:

- (i) Note the content of the report and positive progress made.
- (ii) Forward onto Performance, Review and Scrutiny Committee

# 2 Purpose of Report/Executive Summary

This report provides an overview of the resent Care Inspectorate report for Newbyres Village Care Home from 5<sup>th</sup> May 2023, and the subsequent unannounced follow up visit on 4<sup>th</sup> August 2023

Date 7<sup>th</sup> August 2023

**Report Contact:** 

Name Grace Cowan, Head of Primary Care and Older Peoples Services
Tel No:

grace.cowan@midlothian.gov.uk

# 3 Background/Main Body of Report

3.1 Midlothian HSCP Newbyres Care Home was inspected between 24<sup>th</sup> to 26<sup>th</sup> April 2023 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 5<sup>th</sup> May 2023.

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

It covered the following themes:

- How well do we support people's wellbeing?
- How good is our leadership?
- How good is our staff team?
- How good is our setting?
- How well is our care and support planned?
- **3.2** Following the April 2023 inspection, a report was published that detailed the areas of its findings, outlining 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 good is our setting?                   | 4 | Good |
|--|---|------|
| How well do we support people's wellbeing? | 2 | Weak |
| How good is our leadership?                | 2 | Weak |
| How good is our staff team?                | 2 | Weak |
| How well is our care and support planned?  | 2 | Weak |

3.3 The environment at Newbyres Provided a warm, comfortable, welcoming environment, which was relaxed, clean and had a homely atmosphere.

Across the other 4 quality indicators for inspection, the inspectors identified improvements which required evidence of action by 14<sup>th</sup> July 2023. Under those areas the following were identified.

- Care documentation and records required to be detailed, accurate and reflective of care provision.
- Care plans are reviewed regularly and are accurate and consistent to the identified needs assessed.
- Training needs analysis and programme of updates to be undertaken.
- Improved knowledge of healthcare assessment tools across all care staff.

- Quality assurance processes to be reviewed and improvements evidenced.
- Management arrangements to be reviewed and effective.
   leadership and management oversight to be demonstrated.
- Always demonstrate adequate staffing levels to be provided in relation to acuity of residents and physical layout of building.
- 3.4 A comprehensive action plan was completed and submitted to care inspectorate, detailing evidence to demonstrate adequate improvements in areas highlighted. A new Midlothian HSCP Social Work Assurance Group (SWAG) has been established to have oversight of the plan and progress is reported fortnightly, seeking assurance that relevant progress was being made.
- 3.5 A new interim management structure was agreed and implemented with immediate effect. The previous Registered Manager resigned, and an interim Manager is now in post, whilst recruitment for permanent manager is undertaken. An additional Assistant Unit Manager has been added to the establishment.
- 3.6 Following the unannounced follow up inspection on 31st July 2023, a report was published with a reassessment in line with Requirements made in April 2023. The 10-week action plan provided evidence of significant positive impacts on service delivery.

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

- 3.7 The Care Inspectorate reported in their findings that all Requirements made in April 2023 were achieved within the 10-week timescale given.
- 4 Report Implications (Resource, Digital and Risk)

#### 4.1 Resource

Due to the complexity of the residents within the Care Home, there is a significant financial risk being held by the HSCP. People are living longer, with more complex health and care issues. Independent care homes are not taking these people, or seeking significant additional funding to support them. The challenges in workforce, and the need to keep residents safe, has also meant high agency costs.

## 4.2 Digital

There are no technology issues arising from this report.

### 4.3 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 at Home base for staff and visitors to access and review progress.

# 4.4 Ensuring Equalities (if required a separate IIA must be completed)

There are no apparent equalities issues.

## 4.4 Additional Report Implications (See Appendix A)

See Appendix A

#### **Appendices**

**Appendix A –** Additional Report Implications

**Appendix B –** Care Inspectorate Report Newbyres Village Care home - 5<sup>th</sup> May 2023

**Appendix C -** Care Inspectorate Report Newbyres Village Care home - 4<sup>th</sup> August 2023

#### **APPENDIX A - Report Implications**

#### A.1 Key Priorities within the Single Midlothian Plan

Midlothian will be healthier. Midlothian will be safer.

## A.2 Key Drivers for Change

| Key drivers addressed in this report:   |
|---|
| <ul> <li>Holistic Working</li> <li>Hub and Spoke</li> <li>Modern</li> <li>Sustainable</li> <li>Transformational</li> <li>Preventative</li> <li>Asset-based</li> <li>Continuous Improvement</li> <li>One size fits one</li> <li>None of the above</li> </ul> |
| Key Delivery Streams  |
| Key delivery streams addressed in this report:  |
| <ul> <li>☐ One Council Working with you, for you</li> <li>☐ Preventative and Sustainable</li> <li>☐ Efficient and Modern</li> <li>☐ Innovative and Ambitious</li> <li>☒ None of the above</li> </ul>  |

### A.4 Delivering Best Value

**A.3** 

Midlothian HSCP will continue to focus on best value within the available financial resource made to us, balancing this with safe care of residents.

### A.5 Involving Communities and Other Stakeholders

Copies of the Inspection report have been made available to Elected Members, staff members, and families/carers at family meetings. Residents, families, and staff have been fully briefed and engaged throughout the 10-week period.

### A.6 Impact on Performance and Outcomes

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

# A.7 Adopting a Preventative Approach

Support to achieve the action plan is being provided by Midlothian HSCP care home support team. Oversight assurance for the action plan is in place via Midlothian HSCP Social Work Assurance Group

# A.8 Supporting Sustainable Development

Financial and workforce challenges will require a focus going forward. The impact of recent reduced budget allocation to HSCP, will require a system wide bed capacity review to ascertain demand and financial affordability in Midlothian moving forward.