

## Newbyres Village Care Home Service

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Gorebridge  
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Telephone: 0131 270 5656/7

**Type of inspection:**

Unannounced

**Completed on:**

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**Service provided by:**

Midlothian Council

**Service provider number:**

SP2003002602

**Service no:**

CS2007167115

## About the service

This service has been registered since May 2008.

Newbyres Village is a care home in Gorebridge, Midlothian. It is registered to provide accommodation for up to 60 older people and one bedroom is set aside to offer short breaks (respite).

The home is all on one level in five separate residential wings named "streets". There is also a wing that houses the kitchen and laundry. The home has been planned in a "village" layout with five streets, named First, Second, Third, Fourth and Fifth Street.

Each street can accommodate up to 12 residents and has a sitting/dining room, a small sitting room, small kitchen area and bathrooms and toilets. Each resident has a bedroom with en suite shower and toilet and a patio door to the gardens. The service has maximised the use of any space available and has created additional homely environments for residents including a 1960's style lounge, a sensory room and most recently a small shop. The home is within walking distance of local services such as shops, churches, the library and bus stops.

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."

## What people told us

All of the residents we spoke with praised the quality of their care and the staff team. They described the staff as very professional and spent time getting to know them well. They told us how much they enjoyed their homely environment and had a good quality of life in their home and the wider community through the activities they were involved in and how much they liked where they stayed.

Relatives also told us of how happy they were with the quality of care provided to their loved ones. Some did feel that the staffing levels should be reviewed to ensure there was a presence from staff at all times in the lounge areas. We have commented on this further within this inspection report.

Overall, people were positive about the management of the service. We found the manager to be open and responsive, managing the home and staff in a calm manner. The manager, along with the assistant manager had a good general overview of people's care and support needs and this is important in relation to the manager having confidence that people are achieving positive outcomes.

## 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?	5 - Very Good
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How good is our leadership?	not assessed
How good is our staffing?	4 - Good
How good is our setting?	not assessed
How well is our care and support planned?	5 - Very Good

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

## How well do we support people's wellbeing?

**5 - Very Good**

Supported people and their relatives told us that they felt the staff had good values and had been recruited well to the service to provide a positive culture within the home. This creates a warm and friendly environment for people where dignity and respect are shown. This was very much the case during our observations during the course of our inspection.

It was clear to us that good working relationships have been established and the staff knew the care and support needs of people well, due to the comprehensive personal plans and guidelines in place. Staff consistency is important to people, especially those with dementia and the service was performing well to try and achieve this as much as possible.

There was a range of activities for people to have the opportunity to become involved in and was open to relatives and friends too. This supports people to maintain positive relationships. A weekly programme was in place and people could choose what they wanted to do. Although large group activities were held daily, smaller groups and individual activities were also available. The activities team worked very well with people, exploring their interests and tailoring any activities to their individual wishes.

The model and delivery of the service allows for very responsive care to be delivered to people. In addition to the district nurses based on site, there was very good input from other health professionals including regular General Practitioner visits.

Speaking with relatives, we learnt of many good examples of how staff were quick to identify any deterioration in health and worked promptly to put appropriate measures in place and ensure good communication was maintained.

Person centred practices was embedded within the day-to-day delivery of the service and included activity planning, food tasting for menu planning and the recruitment of staff.

There were also very good quality assurance systems in place which included observations of practice and checking that health-related documentation was completed well and kept up to date. This is important as it allowed for the manager to monitor the performance of the service in meeting people's wellbeing, identify any issues and address them in a timely manner.

When we looked at the medication records, we did identify some gaps with staff not always recording when they had administered them to people. This was not to say that they did not, and steps have been introduced to avoid staff being distracted by others whilst performing their duties. However, records must be completed, and the manager was addressing this with staff in line with their relevant policies. This also applied to staff supporting people to maintain good oral care.

Overall, we assessed the service as performing at a very good level to meet the wellbeing of people and their desired outcomes with using the service.

## How good is our leadership?

This key question was not assessed.

## How good is our staff team?

**4 - Good**

Staff performed well together, and morale was positive. They felt supported by their colleagues and had confidence in the management of the service. Some staff did tell us that they would like a greater management presence in the streets of the home and we fed this back to the manager.

Relatives told us that they would value a management presence at weekends, and we learnt that the service was recruiting an additional assistant manager to address this. It is important as relatives often visited people over the weekend and having a manager at these times will further enhance the communication between the service and families.

We carried out observations of practice and on occasion, there were no staff visually seen in the lounge areas of the home due to them meeting the personal care needs of individuals. Some of the relatives we spoke with also voiced their concern about the lack of staff at times.

The health and care needs of people varied; however, many were at risk of falling and some can present challenging behaviour. Therefore, there is a degree of enhanced risk to people when staff were not always available.

Although the service had correctly assessed the required staffing levels based on people's needs using a recognised dependency tool, the assessment is only based on the primary care for people and not the additional duties including administering medication, keeping records up to date and mealtime assistance. The provider should therefore review their staffing levels to ensure they are correct to fully meet the needs of people and deployed appropriately. (Please see area for improvement 1).

## Areas for improvement

1. The provider should ensure that resident's needs are fully met by having the right number of people to care for them. This includes the assessment of staffing to undertake duties in addition to direct care. For example; administering medication and updating support plans.

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).

## How good is our setting?

This key question was not assessed.

## How well is our care and support planned?

**5 - Very Good**

Personal plans should give clear direction about how to meet the care and support needs of people as well as details of their personal interests and preferences. The care related documentation we sampled was found to be of a high standard. It was evident that supported people, their relatives and health professionals were actively involved in the assessment of needs and developing a personal plan. The care planning reflected the culture of promoting independence and choice as much as possible.

Although personal plans were kept up to date and reflected the care being delivered, there was a lack of formal reviews being held with supported people, their relatives and others as appropriate. It is important as reflected in the Health and Social Care Standards that people are fully involved in developing and reviewing their personal plan and reflecting on how well the service is meeting their individual wishes and outcomes. Please see area for improvement 2).

### Areas for improvement

1. The provider should review people's care and support needs with them on a six-monthly basis, or as and when required or changes occur. This ensures people receive the correct level of care and the right time.

This is to ensure the care and support is consistent with the Health and Social Care Standards which state: "I am fully involved in developing and reviewing my personal plan in a way which is always available to me." (HSCS 2.17).

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good

1.3 People's health benefits from their care and support	5 - Very Good
How good is our staff team?	4 - Good
3.3 Staffing levels and mix meet people's needs, with staff working well together	4 - Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and care planning reflects people's planning needs and wishes	5 - Very Good

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