

**Inspection of Midlothian Council Highbank Intermediate Care Service**

Report by Morag Barrow, Head of Primary Care and Older People's Services

**1 Purpose of Report**

This report provides an overview of the recent Care Inspection report on Highbank Intermediate Care facility inspection. It also provides a summary of the action plan for the service improvements.

**2 Background**

2.1 Midlothian Health and Social Care Intermediate Care Service was inspected in March 2019 by the Care Inspectorate, as a registered Care Home for people aged over 65. The report was published on 23 April 2019, and is in the process of being distributed to all Elected Members of the Cabinet for their information. The inspection covered 5 key areas of the Scotland's Health and Social Care Standards attributed to care home services. These include:

- How well do we support people's wellbeing?
- How good is our leadership?
- How good is our staffing?
- How good is our setting?
- How well is our care and support planned?

Highbank Care home provides an Intermediate Care facility to support residents of Midlothian receiving care and support to prevent a hospital admission, or support a planned discharge. Whilst the model of care is well received, and impacts significantly on performance around admission prevention, and delays to discharge, the premises is not fit for purpose. It should be noted that the premises was originally a Residential Care Home, and not designed with rehabilitation/reablement approach to all care. As a result, the Care Inspectorate Inspection has scored down to grade 3 on environment, and the Care Inspectorate have advised this will remain the case until a new facility is in place. Since the last inspection in April 2018, bathrooms have been upgraded and are to a good standard. Other parts of the home have been redecorated to provide a more homely environment for people, and this work continues.

The ongoing Grade 3 on environment demonstrates the necessity for the re-provisioning of Highbank Intermediate care facility and this is currently underway with an approximate completion date of between 18 months and 2 years.

Highbank Care home was originally built as a residential home over 30 years ago. As time has progressed, the home had had a significant change of usage responding to around 600 admissions and discharges each year to prevent avoidable hospital admissions and facilitate earlier discharge with a rehabilitation focus with the aim of supporting service users back home to live as independently as possible. This is a valuable asset to Midlothian.

Following the inspection, a report was published that details findings and outlines any areas for recommendation and/or requirements for improvement. An action plan, with a specified timescale was developed to address identified areas for improvement. This action plan has been implemented to track and monitor progress, and identify that timescales are being met.

The inspection report grades the areas of inspection from 1 (Unsatisfactory), to 6 (Excellent). This inspection report graded the 5 areas below:

How well do we support people's wellbeing?	<b>3 - Adequate</b>
How good is our leadership?	<b>4 - Good</b>
How good is our staffing?	<b>3 - Adequate</b>
How good is our setting?	<b>3 - Adequate</b>
How well is our care and support planned?	<b>2 - Weak</b>

### **3 Conclusion**

The Care Inspectorate outlined at the beginning of the inspection report feedback from current residents which include:

"I like being here as it keeps me safe."

"The staff are kind and caring."

"The staff look very busy a lot of the time. I do not think there is enough of them however."

"I am a little bored during the day as there is a lack of activities taking place to keep me occupied."

"

"I feel my dad is being looked after well. He always presents himself as clean and tidy."

"Some areas of the building would benefit from some decoration, for example my bedroom."

The majority of people were happy with staff who supported them, showing them dignity and respect at all times. Communication between relatives and the service was good and they were regularly updated of any changes in people's health needs.

It was highlighted that people knew who to approach if they wished to raise a concern or complaint and records of complaints showed these were addressed well.

Positively, the Inspector highlighted "overall, people were positive about the management of the service. We found the manager was very open and responsive, managing the home and staff in a calm manner. The manager, along with the assistant managers 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".

### **4 Report Implications**

#### **4.1 Resource**

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

#### **4.2 Risk**

The Care Inspectorate inspects 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 Highbank for staff and visitors to access and review progress.

Highbank intermediate care facility is not fit for purpose and planning is well underway for the new building (a 40 bed unit on the current Dundas site in Bonnyrigg). This will support local residents to receive intermediate care close to home.

#### 4.3 Requirements:

There are three areas for improvement in the inspection report and three requirements.

The requirements are:

1. In order to ensure peoples care and support needs are continuously met as agreed, the service provider must ensure that staff numbers are appropriate for the health, welfare and safety of service users

##### **Action Plan:**

A report has been submitted to Adult Social Care DMT requesting a review of staffing hours and rota hours. A new proposed rota regarding staff shifts and cover is being explored with a view to increasing staffing levels and reducing agency usage. This will promote consistency of care for client and staff wellbeing. The service has been fortunate to secure regular agency workers the majority of the time to provide continuity and ensure a safe staffing ratio.

The benefits of the proposed night staff and rota review are providing a more sustainable and favourable rota for staff and residents, promoting care and support within the reablement model of care, staff consistency, increased availability of staff on the floor (therefore a reduction in agency staff use).

2. The service must ensure that the premises are in a good state of repair externally and internally and are decorated and maintained to a standard appropriate for the care service.

##### **Action Plan:**

The hours of the MLC Handyman in Highbank have been increased. He will continue to ensure that the needs of residents are met in terms of decoration and refreshing rooms. In addition, he is ensuring that areas for decoration are completed and actioned. Highbank have had new pictures within lounge areas, and new residents are encouraged to bring personal items from home (however acknowledging that this is a short term stay facility). As highlighted in the inspection report, work is well underway in a variety of areas relating to the new build Highbank, and architects have proposed designs which are being considered. As previously stated, the facility is unlikely to be graded higher due to the constraints of a building that is unfit for purpose. Hence the necessity for a new build, which has been prioritised within the MLC Capital plan.

3. In order to ensure peoples', care and support needs are continuously met as agreed, the service provider must review their needs with their involvement (or others as felt appropriate and agreed) on a six-monthly basis, or more often as when required or changes in need are identified.

##### **Action Plan:**

The 3 long term residents have been reviewed since inspection, and planning for these reviews was underway at the time of the inspection by social workers. A regular plan is in place to ensure that reviews take place formally by social workers. The staff team in Highbank are very responsive to residents or families requesting a review and will action this with the multidisciplinary team when necessary.

In relation to residents who are residing temporarily within an intermediate care bed, a full time occupational therapist is now based at Highbank. Along with the staff team (who have received training to provide care within the reablement model), goals and outcomes are reviewed on a daily basis in order to support adults in achieving their goals and desired destination (e.g. a return home or progress with a specific task).

#### 4.4 The areas of improvement request:

1. The provider should ensure that people are supported and not left alone for periods of time with minimal or no engagement from staff.

##### **Action Plan**

The team understands that this was one witnessed occasion, however there is now an activities coordinator in post who is taking the lead on - the development of meaningful and appropriate activities (with Occupational Therapy support), ensuring that adults are encouraged to participate (if they wish to), ensuring that there are events for adults and their families to attend (for example, a recent mother's day afternoon tea). The activities coordinator is also ensuring that the activities are well advertised (for example within main forum areas, dining rooms, in the lift) so residents and families are aware of what is happening. The coordinator is now responsible for the residents social support plan and will update this regularly to reflect activities and interventions. At the time of the inspection a recruitment process was underway to fill the recently vacated activities coordinator post, and the successful applicant was due to start the following week.

2. The provider should ensure staff receive regular formal support and supervision, including observations of practice and reflective practice discussions as in accordance to their policies procedures

##### **Action Plan:**

As part of personal improvement plans, the management team are ensuring that staff receives protected, regular and planned supervision sessions. These will also be recorded within the staff file. It has been acknowledged that Highbank staff have been under considerable pressure as the flow of residents from hospital and community admissions has increased (circa 400 admissions per year). Admission and discharge processes are being explored in order to make the management team more efficient and ensure that protected time is being provided to staff for support, supervision and observations.

3. The provider should ensure that appropriate communication tools are in place for staff which does not impinge on the comfort and wellbeing of people.

##### **Action Plan:**

This relates to the tannoy system within Highbank. This is used for fire drill purposes or to request emergency assistance if staff have an emergency with a resident. Feedback has been taken on board, and staff will no longer use the tannoy system. Other processes are in place now.

There is now a full time Occupational Therapist within Highbank Intermediate Care facility, ensuring that all goals and outcomes are clearly recorded and that all risk assessments are always up to date. Residents are also receiving timely assessments and rehabilitation goal setting which is key to implementing the core principles of intermediate care, these being:

- Help people avoid going into hospital unnecessarily,
- Help people to be as independent as possible after a stay in hospital,
- Prevent people from having to move into a care home until they really need to.

(Maximising Recovery, Promoting Independence: An Intermediate Care Framework for Scotland, July 2012)

The service had advised the Inspectorate of the paperwork required (relating to residents in long term care) was not fit for purpose prior to the inspections. The service had offered

to develop a new suite of documentation and ask that the Inspectorate review these to support implementation. This was agreed and underway at time of inspection.

These support plans are being developed to replace the current support plans which were described as “rather lengthy and in many cases would be a challenge for staff to work with people to keep these up to date or in any great detail. The service provider has recognised this too and through our working relationship can support the service to develop in this area, direct them to good resources to assist to ensure support plans agreed with people are fit for purpose, meaningful and people's outcomes can be measured whilst using the service”.

The team are working within the timescales highlighted by 30 day Action Model. This is an area of great challenge as the support plans in use during this current inspection period were requested by previous inspectors. The management team are looking at short term resolution to ensuring care planning is clear, consistent and meaningful, alongside a longer term plan of exploring/implementing an electronic care planning software, if financially viable. This software in other inspection reports for other services has been held in high regard by the Care Inspectorate.

The date for these requirements to be met is 30 June 2019. The team are confident that all requirements will be met by this date.

The report regarding the rota and staffing review will be considered by Adult Social Care DMT in April 2019 and will follow due process in terms of consultation timescales.

## **5 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.

## **6 Equalities**

There are no apparent equalities issues.

## **7 Sustainability**

The Midlothian Older People strategy 2016-2019 focuses on improving access to services and exploring opportunities to keep people safe and well in their own home and community. This underpins the vision and contribution of Highbank Intermediate Care facility.

## **8 Technology issues**

There are no Technology issues arising from this report.

## **9 Recommendations**

The Cabinet is asked to:

- Note the content of the report and progress made and forward to PRS for information.
- Note that many Care Home standards are not fit for purpose for a fast flowing Intermediate care unit.
- Note that the service already had plans underway to address issues relating to care documentation
- Note that improvements in environment are limited by the facility no longer being fit for purpose, and that MLC have prioritised a re-provision within the Capital plan.

**Report Contact:**

**Claire Chapman**

[Claire.chapman@midlothian.gov.uk](mailto:Claire.chapman@midlothian.gov.uk)

**April 2019**