

## Newbyres Village Care Home Service

20 Gore Avenue  
Gorebridge  
EH23 4TZ

Telephone: 0131 270 5656

**Type of inspection:**  
Unannounced

**Completed on:**  
21 January 2021

**Service provided by:**  
Midlothian Council

**Service provider number:**  
SP2003002602

**Service no:**  
CS2007167115

## About the service

Newbyres Care Home is situated in Gorebridge, Midlothian and is close to shops and local amenities.

The home is run and managed by Midlothian Council. The home is made up of five wings named "streets", each with lounge and dining areas. There is also a wing that houses the kitchen and laundry facilities. The five streets are named First, Second, Third, Fourth, Fifth Street and have shared gardens.

Newbyres Care Home provides long-term care and is registered to support 61 people.

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."

### How we undertook this inspection

This inspection was undertaken with an initial unannounced onsite visit, followed by virtual scrutiny using technology to engage with people and staff. We also spoke with 18 relatives on the phone.

We used virtual technology to ensure our contact with people remained safe and followed appropriate guidelines.

## What people told us

We spoke with nine of the 59 people experiencing care at the time of our inspection.

People told us that they were very happy with the quality of care provided to them and described the staff as kind and caring.

We also heard from several relatives who complimented the quality of care to people.

Comments from people included the following:

"It is apparent that the staff really do care about the residents and go the extra mile when they can."

"I can't praise the staff highly enough; they do great work in the home."

"It seems to me the staff really show an interest in my father, learn about his interests and treat him as an individual which is really satisfying and gives me great confidence in the service during these challenging times."

"I honestly can't praise them highly enough."

"The care staff have been marvellous during this pandemic."

"No concerns. Really appreciate the work of the carers."

"I know all the carers by name, and they know me."

"I know my wife is in good hands."

"Communication and care have been excellent during this whole COVID-19 scare and have every confidence that everyone is doing all they can and more. Although there are times when we are unable to see our relative the staff have phoned and kept us up to date on their health and wellbeing. "

"I do not believe she would be alive today if it wasn't for the care in the home."

Some relatives we spoke with told us that they felt communication needed to be improved. Examples of this included any changes in the health and care needs of people, what activities people have been involved in and difficulties with technology when trying to see people through virtual technology.

We have commented on this more within this inspection report.

## 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 good is our care and support during the COVID-19 pandemic?	4 - Good
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Further details on the particular areas inspected are provided at the end of this report.

## How good is our care and support during the COVID-19 pandemic?

4 - Good

### 7.1 People's health and well-being are supported and safeguarded during the COVID-19 pandemic

Overall, we evaluated the service to be performing at a good level in meeting people's health and wellbeing needs during the COVID-19 pandemic.

Staff demonstrated the principles of the Health and Social Care Standards in their day-to-day practice. We observed compassionate and respectful engagement between staff and supported people.

The staff supported people to maintain contact with their friends and family as much as possible. This included window visits and using technology to participate in video calls. Essential visits were being accommodated for people who needed them.

The activity staff had a schedule of different activities for people to participate in should they choose to. This included small group activities (maintaining social distancing) or on a one-to-one basis. At times activities were limited due to other demands on staff. Staff were keen to expand activities, however, was conscious that any planning must meet current guidance which can be restrictive at times. Staff would benefit from engaging more with people to identify past interests and hobbies. This would help ensure activities interested people.

Personal plans were reviewed regularly with monthly summaries, reflecting what was important to people. If people became unwell staff knew what to do. Close working relationships with health professionals meant referrals were quickly done if needed.

People's views and preferences were not always sought when planning and delivering care and support. When views were included, they were not reflected in staff practice. Sometimes care and support were delivered around routines and tasks rather than individuals needs and wishes. The manager acknowledged the need to engage more with people to develop meaningful anticipatory care planning, focusing on the key outcomes people would like to achieve and to reflect more on their choices and wishes. (Please see requirement from upheld complaint).

Staff were familiar with COVID-19 procedures, reflecting on current national guidance and best practice. Regular staff briefings were provided, updating them on any changes. Clearer recording of the briefings and team meetings would help remind staff of up-to-date guidance and make sure their practice keeps people safe.

People had regular access to drinks and snacks and were supported if needed to enjoy these. Some improvements could be made in relation to people's preferences and enhanced information for staff to be aware of to meet their nutritional and dietary needs. (Please see area for improvement 1).

Communication could be improved, especially in terms of informing relatives of any changes in their loved one's appearance or what they have been doing on a day-to-day basis. Due to the current restrictions, relatives often welcome additional measures to feel reassured. Developing communication agreements with people; setting out when, how and why communication should be maintained would help improve this, including expectations balanced with what would be achievable. (Please see area for improvement 2).

## **7.2 Infection control practices support a safe environment for people experiencing care and staff**

There was sufficient supply of PPE and staff were wearing PPE correctly, helping to keep people safe.

The home was clean, and staff worked hard to keep it that way. Staff carrying out housekeeping and cleaning were familiar with required environmental and equipment decontamination processes specific to the COVID-19 pandemic. The need to review the hours domestic staff worked would improve infection prevention and control. After 3pm, carers had responsibility for cleaning. Monitoring the high levels of cleanliness when also assisting to people's health and care needs was something the manager agreed to review.

There was equipment available for people to use with support if required to maintain good hand hygiene, with hand gel stations throughout the home. The management had identified that the staff changing areas were not sufficient for the number of staff working in the home and they were making alterations to maximise space.

Staff were able to recognise and respond to people with suspected or confirmed cases of COVID-19 including following local reporting procedures and contacting local Health Protection Teams. This helped to prevent the spread of infection.

To protect the health and wellbeing of people and to keep them safe, in line with national guidance, the provider stopped all but essential visits to the service. However, in line with visiting guidance window visits had commenced in the garden.

### 7.3 Staffing arrangements are responsive to the changing needs of people experiencing care

Our focus in this inspection area was to establish if staff had the right competence, knowledge, and skills to support people in relation to COVID-19.

Staffing levels had increased since our last inspection and were reviewed on a regular basis depending on the health and wellbeing needs of people. The manager was dependent to a degree on agency staff; however, arrangements had been secured to ensure the agency staff do not work in other care services during the pandemic.

The manager was pro-active in ensuring staff were up to date with relevant training to meet people's care and support needs. Some gaps in key training were being addressed. This included re-fresher training, oral care and use of some specialist health equipment. All this will help staff to improve the care they offer people. We will follow this up at our next inspection. (Area for improvement covered within the requirement detailed below).

We highlighted at our last inspection the need for a culture shift, supported by firm foundations and clarity around roles and responsibilities of staff. The service has undergone a change in management structure with greater accountability incorporated. Staff told us they felt supported and had greater confidence in the management team should they have to raise any issues. As a result, the staff performed better as a team and therefore ongoing improved outcomes for people using the service were being achieved. People spoke about the atmosphere:

"The care staff have really stepped up in terms of meeting my mother's needs".

"Things are turning for the better."

There was a staffing contingency plan to help manage staff absences, and unplanned shortages. Weekly testing of supported people and staff continues.

We had confidence that the management of the service will continue to drive improvement and development through appropriate action plans.

#### Areas for improvement

1. In order to ensure good outcomes for people experiencing care, the manager should ensure that people's meals and snacks meet their dietary needs and preferences when developing their outcome care planning.

This is to ensure care and support is consistent with the Health and Social Care Standard 1.37: My meals and snacks meet my cultural and dietary needs, beliefs, and preferences.

2. In order to ensure good outcomes for people experiencing care, the manager should develop communication agreements with relatives. This would detail how communication would be established and in what circumstances. Also, to cover levels of expectations balanced with what is realistically achievable for all given restrictions at that time. This should be reviewed as restrictions change.

This is to ensure care and support is consistent with the 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.

## What the service has done to meet any requirements we made at or since the last inspection

### Requirements

#### Requirement 1

One requirement is outstanding following a recent complaint received, investigated, and upheld by the Care Inspectorate. This is noted below.

Requirement 1 – (outstanding from recent upheld complaint)

The provider must ensure people receive responsive care and support that meets their assessed needs and preferences.

By the 31 December 2020, the provider must submit a plan to the Care Inspectorate for approval outlining how the following conditions within this requirement will be met.

By the 31 March 2021, the provider must evidence improvement in the assessment, care planning and monitoring of people's health and wellbeing within the service.

In order to achieve this the provider must adhere to the following:

Support planning:

- People and/or their representatives must be consulted and involved in the risk 11 of 13 assessment, subsequent development, implementation, monitoring and reviewing of their support needs and personal plans.
- Personal plans must meet the required standards and recognise best practice models for care and support, including, but not limited to, nutrition, supporting mobility and anticipatory care planning.
- Quality assurance systems and processes must be in place to ensure effective and positive outcomes are achieved for people experiencing care. Staffing:
- Staff must have the required skills, knowledge and competence to assess, plan, and monitor people's health and wellbeing and take the appropriate action needed when concerns are identified.
- Robust systems and processes must be in place to ensure that staff have access to ongoing support and guidance and any identified learning and development needs are met.

To be completed by: 31 March 2021

This is to ensure care and support is consistent with Health and Social Care Standard 1.12: I am fully involved in assessing my emotional, psychological, social and physical needs at an early stage, regularly and when my needs change.

This is in order to comply with: Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

**This requirement was made on 9 September 2021.**

**Action taken on previous requirement**

The service has partially met this requirement. An action plan has been submitted to the Care Inspectorate detailing how the service will meet this area for improvement. Work has also begun to develop anticipatory care planning for people.

We have considered the actions taken to date to address this area of improvement when evaluating the overall performance of the service for this inspection.

**Not met**

## 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**

The provider should ensure appropriate opportunities are in place for staff to feel supported in their roles and able to influence further improvement and development within the service, including reflecting on their own 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 5 December 2019.**

**Action taken since then**

Following a change in management structure, a more positive working culture has been developed. This has enabled staff to feel supported more and to have clarity over the roles and responsibilities they play to meeting people's care and support needs.

**Previous area for improvement 2**

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).

**This area for improvement was made on 5 December 2019.**

**Action taken since then**

Staffing levels have increased during the course of the pandemic and are reviewed on a regular basis to ensure it fully meets the care and support needs of people.

## Previous area for improvement 3

The provider should ensure appropriate falls prevention guidelines, risk assessments and support plans are in place for people, based on recognised falls prevention frameworks. This is to ensure the care and support is consistent with the Health and Social Care Standards which state: "I experience high quality care and support based on relevant evidence, guidance and best practice. (HSCS 4.11)

**This area for improvement was made on 5 December 2019.**

### Action taken since then

Various risk assessments were in place for people, detailing how to keep them safe from falls as much as possible, assisted with various technology. The service is aware however that they need to enhance the training available for staff. We will follow this up at our next inspection.

## Complaints

Please see Care Inspectorate website ([www.careinspectorate.com](http://www.careinspectorate.com)) for details of complaints about the service which have been upheld.



## Detailed evaluations

How good is our care and support during the COVID-19 pandemic?	4 - Good
7.1 People's health and well being are supported and safeguarded during the COVID-19 pandemic	4 - Good
7.2 Infection control practices support a safe environment for people experiencing care and staff	4 - Good
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	4 - Good

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