



Update on Newbyres Care Village

Report by Nick Clater, Head of Adult Services, Midlothian Health and Social Care Partnership

Report for Noting

1 Recommendations

PRS is requested to

1. Note the ongoing progress being made in relation to Care Inspectorate inspections;
2. Note the current workforce arrangements and bed configuration in Newbyres and accompanying rationale

2 Purpose of Report/Executive Summary

This report advises of

1. The ongoing improvement work being undertaken in Newbyres.
2. The rationale for the current bed configuration.

Date: 28/02/24

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3 Background

3.1 Introduction

Newbyres Village care home is situated in Gorebridge.

The care home is managed by Midlothian Health and Social Care Partnership and is configured into five wings named "streets", each with lounge and dining areas. There is also a wing that houses the kitchen and laundry facilities. Each wing has a shared garden.

Newbyres Village care home provides long-term care and is registered to support 61 people.

3.2 History of Recent Care Inspectorate Inspections

Newbyres was last inspected by the Care Inspectorate in May 2023 with a follow up to this being undertaken in August 2023.

The grades in May 2023 were as follows:

- 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 good is our setting? 4 (Good)
- How well is care and support planned? 2 (Weak)

These grades were not as positive as the previous inspection from September 2022, which had a mix of Adequate and Good grades.

The Care Inspectorate consequently placed 5 Requirements and 1 recommendation on the service and indicated that they would return in approximately 3 months to evaluate progress. This resulted in the follow-up visit in August 2023 where they evaluated the service against the Requirements and Recommendation.

At that visit, the Care Inspectorate noted that progress had been made in all 5 Requirements and the 1 Recommendation, and that time was now required for these improvements to be embedded within the service and for these to be sustained to improve people's outcomes and experiences.

The grades in August 2023 were as follows:

- 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? Not Assessed
- How well is care and support planned? 3 (Adequate)

3.3 The Role of the Social Work Assurance Group (SWAG)

Whilst noting a degree of progress, it was agreed that enhanced governance and oversight of Newbyres would be beneficial and, following further discussions with the Care Inspectorate and within the HSCP, it was agreed that this governance and oversight would be provided by the newly established Social Work Assurance Group (SWAG), chaired by the Chief Social Work Officer and attended by the Head of Adult Services.

The Service Manager responsible for Newbyres was tasked with attending SWAG every fortnight to report on progress against the agreed action plan that had also been discussed with the Care Inspectorate.

Issues identified at SWAG as key to sustaining improvements at Newbyres were as follows:

1. The need for stability and then permanency in the Newbyres management team;
2. The need to reduce sickness absence amongst the staff group;
3. The need to develop a recruitment and retention strategy that would lead to a more sustainable staffing model;
4. The need to reduce the use of agency staff;
5. The need to ensure training was relevant and up to date;
6. The need to provide more support to staff in relation to wellbeing and trauma.

To assist progress in all of these areas, SWAG agreed on 12 September 2023 to the following:

- Place a moratorium on admissions until sustained improvements in the above areas could be consistently demonstrated;
- Temporarily close one “street” and therefore reduce bed base to 4 “streets” (50 beds) and keep this under review at SWAG. This was to ensure safety of residents.

Both measures were taken to ensure resident safety was maintained, medication and care errors reduced, and there was a reduction in temporary staffing.

Both measures were discussed with the Care Inspectorate and meetings were held with both staff and relatives of residents to inform them of this and explain the rationale.

SWAG placed Newbyres as a standing agenda item so updates could be reported at every fortnightly meeting.

3.4 Update on Progress

Since the HSCP decision to pause admissions was put into effect, the following measures have been taken:

1. A new Unit Manager has been appointed on an acting up basis with “support” placed around them including buddying with the Manager at Highbank Intermediate Care Facility, Service Manager presence in Newbyres Monday to Friday, and additional training. Plans are being made to make a permanent appointment.
2. There is a plan in place to provide training to all staff on a rolling basis, including the rolling out of “stress and distress” training for people with dementia.
3. Staff have been offered wellbeing and trauma inputs.
4. The unit manager and the management team at Newbyres are working with Midlothian Council HR team to reduce sickness absence through a mix of robust application of procedures, and early identification of issues that may result in individual staff members going being absent (linked to the wellbeing and trauma work highlighted above).
5. A new process has been introduced to utilise agency staff which provides more grip and control. Whilst agency use remains higher than is ideal, there is progress being made and agency spend is reducing.
6. Management is engaging with staff and residents’ families to establish a better communication culture.
7. Management is engaging with the Care Inspectorate on a more proactive and less reactive basis.
8. Work to reduce medication errors has resulted in a 50 per cent decrease since September 2023.
9. Work is continuing to recruit to vacancies and there are plans to do a wider social work and social care recruitment campaign for Midlothian.
10. A 12-week project has been initiated to update the ethos and admission criteria for Newbyres as well as an updated workforce model. This is due to report in April 2024.

It is the view of SWAG that the progress being made is positive. The Care Inspectorate have also indicated that they are seeing some steady progress. Nevertheless, absence rates, particularly for night staff, remain high and there remain gaps in permanent staffing despite attempts to recruit. Moreover, the planned programme of work described in no.10 above is due for completion in April, and it is anticipated that this will provide some clarity on the ethos of Newbyres, the admission criteria and the beginnings of a revised staffing model. Finally, there is a wider HSCP bed-based review commissioned by the HSCP that is pending. It is therefore anticipated that the outcome of this work will help inform SWAG of future decisions regarding ensuring the safety of residents is maintained and that the care provided is optimal.

4 Report Implications (Resource, Digital and Risk)

4.1 Resource

There are no direct resource requirements arising from the current arrangements in Newbyres although the ongoing use of agency is noted and there is a need for Newbyres to operate within a more sustainable financial model.

4.2 Digital

There are no digital implications related to this paper.

4.3 Risk

There is a reputational risk to Midlothian Health and Social Care Partnership should identified improvements not be progressed and maintained as per Care Inspectorate requirements.

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

All relevant IIAs sit within service.

4.4 Additional Report Implications

There are no additional report implications at present.

Appendices

None.

APPENDIX A – Report Implications

A.1 Key Priorities within the Single Midlothian Plan

A.2 Key Drivers for Change

Key drivers addressed in this report:

- Holistic Working
- Hub and Spoke
- Modern
- Sustainable
- Transformational
- Preventative
- Asset-based
- Continuous Improvement
- One size fits one
- None of the above

A.3 Key Delivery Streams

Key delivery streams addressed in this report:

- One Council Working with you, for you
- Preventative and Sustainable
- Efficient and Modern
- Innovative and Ambitious
- None of the above

A.4 Delivering Best Value

The report does not directly impact on Delivering Best Value

A.5 Involving Communities and Other Stakeholders

The Care Inspectorate involve stakeholders when they undertake their inspections.

Any improvements that require relevant consultation with service users, family members and carers will be undertaken by the relevant service.

A.6 Impact on Performance and Outcomes

The service continues to engage with the Care Inspectorate. Any recommendations and areas for improvement will, once addressed further improve the performance and the outcomes of people using Newbyres.

A.7 Adopting a Preventative Approach

Not applicable

A.8 Supporting Sustainable Development

Not applicable