

## Newbyres Village Care Home Service

20 Gore Avenue  
Gorebridge  
EH23 4TZ

Telephone: 01312 705 656

**Type of inspection:**  
Unannounced

**Completed on:**  
27 February 2024

**Service provided by:**  
Midlothian Council

**Service provider number:**  
SP2003002602

**Service no:**  
CS2007167115

## About the service

Newbyres Village 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. Each wing has a shared garden.

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

## About the inspection

This requirement was made following a visit to the service in relation to a complaint investigation which took place on 23 October 2023. The provider submitted an action plan which detailed how the requirement would be met to ensure positive outcomes for people experiencing care.

## Key messages

By the 19 January 2024 the provider must ensure that people experiencing care in the service are supported to maintain good personal and continence care. To do this, the provider must, at a minimum ensure that :

- a) Each person experiencing care or their representative is involved in an assessment of their support with personal and continence care.
- b) Each person receiving the service has a personal plan that details the support that they require to maintain their personal and continence care needs.
- c) Staff consistently document on the daily care record when personal and continence care support has been provided.
- d) Reviews of the effectiveness of this support are recorded at regular intervals or in response to any problems or changes noted. These reviews must include seeking guidance from other professionals as appropriate.

To be completed by: 19 January 2024

By the 19 January 2024, the provider must ensure that people who experience stress and distress receive the right support that is person centred and improves their quality of life. To do this the provider must, at a minimum ensure that:

- a) ensure staff can demonstrate in their practice the effective support to people experiencing stress and distress;
- b) risk assessments should be recorded in a way that facilitates choice and risk enablement and is monitored appropriately;
- c) any recommended stress and distress interventions are implemented, monitored and reviewed frequently;
- d) personal plans contain information that reflects people's experience of stress and distress and takes into account all aspects of the person's care and support needs, including their choices and wishes;

To be completed by: 19 January 2024

By the 19 January 2024, the provider must ensure medication is given as prescribed to support people's health and wellbeing. To do this the provider must as a minimum:

- a) Ensure people administering medication do so in accordance with agreed protocols and best practice guidance. This includes demonstrating their responsibility to ensure that that medication administered is taken by people or if declined discarded of safely with appropriate records kept.
- b) Ensure detailed medication protocols are in place for as required medications. This must have sufficient detail of the right time and the correct way for these to be given. Records will include if they have achieved the desired effect.
- c) have an effective system of audit that monitors medication administration.

To be completed by: 19 January 2024

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

### Requirements

#### Requirement 1

By the 19 January 2024 the provider must ensure that people experiencing care in the service are supported to maintain good personal and continence care. To do this, the provider must, at a minimum ensure that :

- a) Each person experiencing care or their representative is involved in an assessment of their support with personal and continence care.
- b) Each person receiving the service has a personal plan that details the support that they require to maintain their personal and continence care needs.
- c) Staff consistently document on the daily care record when personal and continence care support has been provided.
- d) Reviews of the effectiveness of this support are recorded at regular intervals or in response to any problems or changes noted. These reviews must include seeking guidance from other professionals as appropriate.

**This requirement was made on 23 October 2023.**

#### Action taken on previous requirement

This requirement was made following a visit to the service in relation to a complaint investigation which took place on 23 October 2023. The provider submitted an action plan to detail how the requirement would be met to ensure positive outcomes for people experiencing care.

There was evidence that people experiencing care had been assessed and reviewed regularly with their personal and continence care. This was included in people's personal plans with details of the support they require, including if personal or continence care is refused.

Continence care records and risk assessments show support delivered to people once personal and continence care has been delivered. Bowel charts and continence records are up to date with evidence of service seeking external support from district nurses with regards to catheter care.

#### Met - within timescales

#### Requirement 2

By the 19 January 2024, the provider must ensure that people who experience stress and distress receive the right support that is person centred and improves their quality of life. To do this the provider must, at a minimum ensure that:

- a) ensure staff can demonstrate in their practice the effective support to people experiencing stress and

distress;

b) risk assessments should be recorded in a way that facilitates choice and risk enablement and is monitored appropriately;

c) any recommended stress and distress interventions are implemented, monitored and reviewed frequently;

d) personal plans contain information that reflects people's experience of stress and distress and takes into account all aspects of the person's care and support needs, including their choices and wishes;

To be completed by: 19 January 2024

**This requirement was made on 23 October 2023.**

## Action taken on previous requirement

Staff across the service had received training on stress and distress interventions and altered behaviours. The training has increased their understanding of people's needs. Key information is communication which is implemented and monitored by all staff.

Personal plans show staff recognising early signs via ABC chart, observations, responses and escalations if required to help deliver appropriate support to people experiencing stress and distress.

**Not met**

## Requirement 3

By the 19 of January 2024, the provider must ensure medication is given as prescribed to support people's health and wellbeing. To do this the provider must as a minimum:

a) Ensure people administering medication do so in accordance with agreed protocols and best practice guidance. This includes demonstrating their responsibility to ensure that that medication administered is taken by people or if declined discarded of safely with appropriate records kept.

b) Ensure detailed medication protocols are in place for as required medications. This must have sufficient detail of the right time and the correct way for these to be given. Records will include if they have achieved the desired effect.

c) have an effective system of audit that monitors medication administration.

**This requirement was made on 23 October 2023.**

## Action taken on previous requirement

The service has an up to date medication and policy and protocol.

Medication audits undertaken by the manager ensure safe medication practices are being adhered to in accordance with good practice guidance and policy with regard to medication status, supplies and as required medication.

We observed Medication Administration Records (MAR). The systems in place provide quality assurance processes to ensure people are supported safely with medication in line with their care plan guidance.

**Met - within timescales**

## 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).

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