

Newlands Residential Home Care Home Service

Thistle Street
Dunfermline
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Type of inspection:
Unannounced

Completed on:
8 April 2024

Service provided by:
Newlands Care Limited

Service provider number:
SP2013012007

Service no:
CS2013314910

About the service

Newlands Residential Home is a well established care home situated in a residential area of central Dunfermline, close to local amenities. The owners are Newlands Care Limited. The Victorian property is a two-storey construction and is registered to offer accommodation to a maximum of 22 older people.

Accommodation is available in 22 single bedrooms, not all of which are ensuite. These are located across both floors which are serviced by an internal passenger lift and a stair lift. There are a variety of communal areas offering choice to the people living there. The home has a good sized attractive, secure garden. During our inspection there were 21 people living there.

About the inspection

This was an unannounced inspection which took place on 8 April 2024. The inspection was carried out by two inspectors from the Care Inspectorate. This was a follow up inspection, following up on requirements that were made at an inspection which took place on 12 October 2023. Please refer to the "what has the service done to meet previous requirements" section of this report for details on the findings of this follow up inspection.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- spoke with four people using the service and three of their representatives
- spoke with six staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- Improvement was noted to care planning and as required medication protocols.
- Staff were accessing regular supervisions and observations of practice measured standards of practice.
- Training was being accessed by staff.
- Quality assurance systems were in place and the services recognised where further improvement was needed.

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

Requirements

Requirement 1

By 22 January 2024, the provider must ensure that the health, welfare, and safety needs of people receiving care are met in relation to care planning and risk assessments. This should include but not be limited to:

- a) accurately reflect the assessed current health and care needs of people receiving care, with particular attention being given to stress and distress and those people who receive as required medication (prn medication);
- b) identify the support required to meet the needs of the person receiving care, and the steps which should be implemented to address these needs, and mitigate any risks identified; and
- c) for prn protocols to be in place to ensure staff are administering as required medication in a consistent manner.

This is in order to comply with Regulation 4(1)(a) (Welfare of Users), Regulation 5(1) (Personal Plans), of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15) .

This requirement was made on 12 October 2023.

Action taken on previous requirement

We found care plans that were detailed in places, and person-centred. Stress and distress care plans were in place for those who required them. The service had made significant progress in the implementation of as required medication protocols (PRN protocols) and we found that these were comprehensive. We discussed with the service how they could enhance stress and distress care plans to give support staff clear, step by step guidance on how to best manage periods of distress, prior to use of any chemical restraint.

The service evidenced systems that were in place to review plans to ensure these were reflective of peoples needs. This included use of assessment tools to monitor and manage risks around weight and falls. Implementation of quality assurance systems to monitor standards of care planning were in progress. Feedback was given to the service around using this process to monitor use of best practice guidance and language. We were confident in the services commitment and awareness of where further improvement was needed.

Met - within timescales

Requirement 2

By 22 January 2024, the provider must ensure that staffing is well managed to ensure that the health, safety and wellbeing needs of service users are met and they experience positive outcomes. This must include, but is not limited to:

- a) staff should receive regular supervision and appraisals to ensure their learning and development needs are assessed, reviewed, and addressed;
- b) staff practice should be formally observed on a regular basis, and any practice issues addressed; and
- c) training should be person centred, reflective of the needs of the people living there.

This is in order to comply with Regulation 4(1)(a) (Welfare of Service Users), and Regulation 15(b) (i) (Staffing) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: '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 requirement was made on 12 October 2023.

Action taken on previous requirement

Staff told us they felt well supported, by a dedicated and hands on management team. Documents we examined evidenced improvements in the regularity of formal supervisions to review care staffs learning and development needs. We saw regular use of formal observations to monitor standards of practice. This helps to ensure that people are being supported by a staff team that are appropriately skilled.

Use of available e-learning training courses, by care staff, had significantly improved. The service recognised the need to access other training that was specific to people's individual needs and ensure that all care staff access these. This supports care that is well informed, promoting positive outcomes.

Met - within timescales

Requirement 3

By 22 January 2024, the provider must ensure they understand their roles and responsibilities in making required notifications to relevant bodies. This must include:

- a) ensuring appropriate and timely referrals and notifications are made to relevant agencies and individuals. This must include, but not be limited to, adult protection referrals, health and social care partnership, police, and care inspectorate; and
- b) a clear system to ensure notifications are submitted within timescales, when the registered manager is not present and or during out of hours.

This is in order to comply with regulations 4(1)(a) (Welfare of Service Users) and 15(b)(i) (Staffing) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is in order to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20)

This requirement was made on 12 October 2023.

Action taken on previous requirement

The service was aware of their responsibility to notify relevant bodies of accidents and incidents which occurred. Examination of records showed that this obligation was being fulfilled in a timely manner. A system was in place to ensure that notifications continued to be made at times when the registered manager was not present in the service. The service could consider sharing information about the notification obligations with the senior care team. This would reduce the risk of potential errors and omissions and develop staff practice.

Met - within timescales**Requirement 4**

By 22 January 2024, the provider must ensure that there are robust quality assurance systems in place to ensure that the health, safety and wellbeing needs of service users are met and they experience positive outcomes. This must include, but is not limited to:

- a) implementing accurate and up-to date audits for monitoring and checking the quality of service are in place and ensuring that any areas for improvement identified as a result of an audit are addressed without unnecessary delay; and
- b) ensuring a continuous improvement plan evidences that the care and support provided meets the assessed needs of service users and that they experience positive outcomes on an ongoing basis.

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

This is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This requirement was made on 12 October 2023.

Action taken on previous requirement

The service had a number of formal quality assurance processes in place. These covered medication management, infection prevention and control and observations of staff practice. This provided reassurance that key areas of practice were being monitored. There was room for further development in this area, especially in relating quality assurance to improvement planning. This would ensure that the service could more clearly track change and improvement. It was clear, however, that improvement planning was directly related to people's needs and wishes.

Met - within timescales

Requirement 5

By 22 January 2024, the provider must ensure that an environmental audit is carried out to ensure that service users' health, safety and wellbeing needs are met. This must include but is not limited to:

- a) identify any improvements to the physical fabric of the internal and external environment;
- b) identify priorities and timescales for identified work to be undertaken; and
- c) develop the service improvement plan to reflect the above and ensure that people's views, suggestions and choices are gathered on a regular basis and that this information is used to improve people's outcomes and experiences.

This is in order to comply with Regulation 4(1)(a) (Welfare of Service Users), and Regulation 10 (2) (b) (Fitness of Premises) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19).

This requirement was made on 12 October 2023.

Action taken on previous requirement

The service had completed a comprehensive environmental audit and work towards achieving change and improvement had already begun. Where possible, timescales had been set for works to be completed. When this was not possible, we suggested that the service consider short term projects towards the same goal. This would ensure the service continued to develop in a positive way. People's needs and outcomes were clearly at the centre of the proposed and completed changes. People's views and opinions were being gathered in order that they felt involved and included in changes within the home.

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.

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