

Newhouse Care Home Service

57-59 Galston Road
Hurlford
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Telephone: 01563 540 621

Type of inspection:
Unannounced

Completed on:
19 August 2024

Service provided by:
Parkcare Homes No.2 Ltd

Service provider number:
SP2003000147

Service no:
CS2003000773

About the service

Newhouse is registered to provide a care home service to a maximum of 22 adults with learning and physical disabilities. The provider is Parkcare Homes Limited, part of the Priory Group. At the time of inspection there were 21 people living at Newhouse.

Newhouse is situated in a semi-rural location on the outskirts of Hurlford, East Ayrshire within reach of public transport links and local amenities. The home is a detached villa with additional purpose-built extensions and is set within extensive grounds; it is split into two units, Willow and Rowan. Accommodation is provided over two floors and all bedrooms are single occupancy, one of the bedrooms has an en suite. The service has two living rooms, shared bathrooms, separate dining areas, conservatory and a spacious outdoor area.

About the inspection

This was an unannounced inspection which took place on 14, 15 and 16 August 2024. The inspection was carried out by one inspector from the Care Inspectorate.

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 nine people using the service and three of their family
- spoke with ten staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals

Key messages

People had access to a range of activities.

We saw kind and caring interactions between people supported and staff from all roles within the service.

The service had robust quality assurance processes in place.

Works were due to start on an extension for a new laundry facility in the service.

Personal plans were person centred.

People supported were involved in all aspects of their care.

As part of this inspection, we assessed the service's self-evaluation of key areas.

We found that the service was not yet undertaking self-evaluation. We discussed the benefits of self-evaluation and how this approach should be adopted to support improvement in the service.

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

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| How well do we support people's wellbeing? | 5 - Very Good |
| How good is our leadership? | 5 - Very Good |
| How good is our staff team? | 5 - Very Good |
| How good is our setting? | 4 - Good |
| How well is our care and support planned? | 5 - Very Good |

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Over the course of the inspection we saw kind, caring and compassionate interactions between staff and those they were supporting. It was clear that staff at Newhouse genuinely cared for the people who lived there.

There was a wide range of activities taking place both within the service and out in the community.

People living at Newhouse told us they loved their home. We spoke with relatives who were very positive about their loved ones care and support. One person told us they were, 'forever thankful for Newhouse'.

We sampled peoples personal plans and were able to see clear detailed recordings of peoples nutritional intake and specific health related recordings where required. There were detailed protocols to inform and guide staff on how to support people with specific health conditions. People were able to access health professionals when they needed them. Appointments, records and changes were all detailed within peoples personal plans. This meant people could be assured their health needs would be met.

People were encouraged to make healthy nutritional choices. Food was prepared to individuals dietary requirements.

During the inspection we reviewed medication management processes and found these to be safe and effective. Medication administration recording charts were signed for appropriately. Each person had an individual medication profile. This detailed personalised information such as how they liked to be supported to take their medication and what level of support was required. They also contained information to inform staff of what each medication the person was prescribed was for and any potential side effects. There were protocols in place to inform and guide staff on when any 'as required' medication should be given and any follow up actions required.

How good is our leadership?**5 - Very Good**

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Since the last inspection the service had moved their quality assurance processes to an online system.

The management team had a robust quality assurance system in place. We were able to see a range of audits that were in use to monitor the quality of the service. Where actions were identified, action plans were created and signed off once completed. This provided clear oversight of improvements that had been identified.

There were a range of trackers in place which provided oversight of staff supervision, staff professional registration, staff training and direct observation of staff practice. We found all staff had received their supervisions in line with organisational policy and training levels were high. This meant that we could be confident staff were well trained and were given the opportunity to reflect on their own practice and development.

There was a service development plan in place which detailed action points, who was responsible and set timescales. This was discussed at monthly governance meetings and it was clear to track the improvement journey of the service.

Accidents and incidents were well managed and documented. We were notified appropriately and were able to see when adult support and protection issues had been raised.

Feedback was gathered from staff, people supported and relatives. Feedback received informed actions within the service development and improvement plan. Resident and relative meetings took place which ensured people were able to contribute, keep up to date and have their say about what they wanted from their service.

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Since the last inspection there had been a number of staffing changes, however at the time of inspection the service had a complete staff team.

We sampled some rotas and found the service to be well staffed. There was a dependency tool in use which informed staffing numbers depending on peoples assessed need.

People were supported by people who knew them well. Staff members across all departments of the service were passionate about their role and the residents at Newhouse. They involved people where possible, an example of this was someone being able to help paint their bedroom as they had wished to redecorate it. Staff promoted peoples independence.

Staff were kept up to date through electronic communication and shift handovers. We were able to see that staff were well delegated throughout the service. This meant that people received support then they needed it.

How good is our setting?**4 - Good**

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People at Newhouse had their own individual bedrooms and access to multiple communal bathrooms. There were both baths and showers available which provided choice to people. There was multiple seating areas including a conservatory and separate dining areas where people could choose where to have their meals.

There was a large spacious garden area that people could access as they wished. This was regularly in use throughout the course of the inspection.

Newhouse was clean and well maintained. There was a repairs book in place for staff to record any issues which the facilities and maintenance team would quickly resolve.

There was a refurbishment plan in place which included communal areas as well as individual bedrooms. At the time of inspection the lounge area had been recently decorated. Some of the communal bathrooms had been refurbished with others on the plan to also be done.

Health and safety and fire checks were completed appropriately. This ensured a safe environment for those who lived at Newhouse.

We did find the laundry area within the service could be improved on. An area for improvement was made at a previous inspection for this and can be found under the 'Outstanding areas for improvement' section of this report. During the inspection we were able to see plans in place for an extension to the building for a new laundry area. Building works were due to start. We will review this at the next inspection.

How well is our care and support planned?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Since the last inspection the service had continued to build and develop the peoples personal plans on their electronic system.

We sampled a range of personal plans and found these to be person centred. They provided clear information to staff about how to support someone the way that was right for them. Each personal plan had a detailed biography which gave valuable information about the person and their life.

The service had oversight of peoples reviews. These were carried out with the person. Careplans on the nourish system have continued to be built on since the last inspection. There were clear person centred support plans in place which informed staff how to support someone the way they wished to be supported. There was lots of detail in peoples biographies about their lives and when they moved to Newhouse. There was evidence of peoples reviews taking place - which Caroline had oversight of. Families told me they were involved an people were involved in their own reviews where they wished to. There was also evidence of peoples support plans and risk assessments being reviewed and where there had been changes these were updated. There were daily notes submitted through out the day and where activities were taking place the persons level of involvement was recorded to be able to monitor if this I something that they enjoyed (particularly for those with non verbal communication. I was able to see a range of photo in peoples plans of different things they had been taking part in.

There were monthly meetings with people and their keyworkers as I mentioned earlier which really captured peoples wishes and what they wanted to work towards.

People had outcomes stars which detailed what peoples goals were and how staff could support them to achieve these goals.

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

To make sure people are kept safe, the provider should ensure that there is appropriate space, facilities and procedures for the infection prevention and control of dirty laundry and the management of clean linen to prevent cross infection. This should include having distinct clean and dirty areas for managing laundry.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My environment is secure and safe' (HSCS 5.17).

This area for improvement was made on 22 August 2022.

Action taken since then

At this inspection we were able to see the plans for an extension to the building to provide new laundry facilities. The works for this extension were due to start.

This area for improvement will continue and will be reviewed at the next inspection.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

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| How well do we support people's wellbeing? | 5 - Very Good |
| 1.3 People's health and wellbeing benefits from their care and support | 5 - Very Good |
| How good is our leadership? | 5 - Very Good |
| 2.2 Quality assurance and improvement is led well | 5 - Very Good |
| How good is our staff team? | 5 - Very Good |
| 3.3 Staffing arrangements are right and staff work well together | 5 - Very Good |
| How good is our setting? | 4 - Good |
| 4.1 People experience high quality facilities | 4 - Good |
| How well is our care and support planned? | 5 - Very Good |
| 5.1 Assessment and personal planning reflects people's outcomes and wishes | 5 - Very Good |

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