

Newlands Residential Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
30 August 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 but communal facilities are sufficient, accessible and well presented. Bedrooms and facilities are located across both floors which are serviced by an internal passenger lift and a stair lift. There are a variety of well presented communal areas offering choice to the people living there. The home has a good sized attractive secure garden which has been developed to maximise people's enjoyment and independence.

During our inspection there were 21 people living in Newlands, including a newly welcomed resident and one person waiting for suitable arrangements to live independently in the community.

About the inspection

This was an unannounced inspection which took place on 29 August 2024 and between 09:00 and 20:00. 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 four people using the service and five of their family and friends
- four people also provided their views via our questionnaire
- spoke with nine staff and management
- two staff also provided their views via our questionnaire
- observed practice and daily life
- reviewed documents.

Key messages

- People experienced very good care and support.
- People were treated with kindness, by staff that knew them well.
- Families felt valued and told us the staff and management were approachable and welcoming.
- People had access to a range of meaningful activities that they enjoyed.
- As part of this inspection, we assessed the service's self-evaluation of key areas. We found that the service had made positive progress in completing their self-evaluation. The service should continue to develop this approach to support improvement.

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 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?	4 - 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 evaluated this key question as very good, as the significant strengths outweighed any areas for improvement.

During our inspection there were 21 people living in Newlands, including a newly welcomed resident and one person waiting for suitable arrangements to live independently in the community. The care and support they experienced reflected a model of enablement where the focus was clearly on ensuring people maintained and recovered their independence as much as possible.

The care home was welcoming and homely. Staff clearly knew people well and we observed consistent kind and humorous interactions between staff and people living there. We were confident that people were being treated with dignity and respect. Staff were held in high regard. Comments from relatives included, "Staff know her really well and manage all her little ways" and people told us that they felt very well looked after. One person commented, "from the start I've felt right at home and people are friendly".

There were detailed records on people's dietary requirements and preferences. We were confident that people's nutritional needs were being met. We observed the dining experience and we saw people enjoying homecooked meals. People were offered choice at every opportunity and staff support was provided, as necessary. The cook discussed the menu with service users and had very good knowledge of their likes and dislikes. Staff routinely checked to make sure people had enjoyed their lunch. People told us the food was, "fantastic". One person described how they had wanted to gain weight following illness and that this had been easily achieved.

Care plans sampled were detailed and person centred, reflecting people's needs and how they liked their care and support delivered. There were various risk assessments in place to monitor key aspects of someone's care such as, weight or food and fluid intake. Records reflected people's current needs and reviews were up to date. We saw evidence of timely referrals being made to other agencies in relation to people's health needs. There were plans in place relating to their wishes should their health deteriorate.

Medication was managed well and we felt confident that people were receiving the right medication at the right time.

People told us they felt listened to and that staff knew them well. Relatives said they felt involved and that communication was, "excellent". One person commented, "My wife is involved in my care and support decisions too and we talk together about what I need".

There was evidence of people being assisted to remain in touch with families, friends and their local community. We were assured that people were being supported to have a meaningful day which was a benefit to the person as a whole. Wellbeing was an obvious goal of every aspect of care and support and people were supported to have active lives. A weekly timetable was in people's bedrooms, informing people and families of the planned daily group activities. Both families and people living there valued these opportunities. One relative described a, "buoyancy" about the atmosphere and in relation to how successful activities were in connecting with the whole home.

Staff also recognised the importance of one to one activities tailored to meet the individuals abilities and interests. This approach could easily support positive outcomes for people. Another relative described an atmosphere of fun and enjoyment saying staff had, "successfully supported people to get involved with activities" which created "a real sense of community".

The home was clean, fresh and homely. There were high standards of cleaning and infection and prevention control in place. Staff received training and guidance updates regularly, with management conducting regular spot checks relating to practice. As a result, we could be confident that the risk of infection was being reduced.

We observed people being supported by staff who knew them well and treated them with respect. People told us they were happy living there. All the families we spoke to reported high satisfaction with the care that was being provided and many described the home as, "one of the better ones".

How good is our leadership?

5 - Very Good

People who rely on registered care services should have confidence in those who provide and deliver their care and support.

We evaluated this key question overall as very good. We found significant strengths in the service delivery and support provided, which supported positive outcomes for people. There were very few areas for development and a clear commitment to improvement. It was clear that improvement planning and service development were directly related to people's needs and wishes. This was evident in the improvements seen in the garden, the repurposing of the conservatory and from feedback from people. One person commented, "There was a survey came round recently and it was brilliant because it covered something I needed so the issue was solved right away".

Relatives reported having confidence in staff and management. We found good leadership that was committed to maintaining people's abilities and identity. Management and staff clearly demonstrated the principles behind the Health and Social Care Standards. Quality assurance systems were in place and reflected self evaluation and improvement planning. All of which supported high quality care and support and contributed to improvements.

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. There were systems in place for recording and analysis of accidents and incidents, including appropriate actions taken to mitigate risk. This provided reassurance that key areas of practice were being monitored to keep people safe.

Staff told us they felt confident giving feedback and voicing their opinion. They felt comfortable communicating with management. They benefitted from support and guidance in regard to their training and development. Everyone we spoke to, residents, family and staff, consistently reported that management were approachable, listened to what they said and could be relied upon to take action if needed. This meant they supported good relationships and reduced the risk of complaints or misunderstandings.

How good is our staff team?

5 - Very Good

People should have confidence in the staff who care for them. We found significant strengths in all aspects of staffing and these supported positive outcomes for people, therefore we evaluated this key question as very good.

We found staff did not start work until all the necessary pre-employment checks were completed. New staff shadowed colleagues for a number of shifts, allowing them time to get to know each person and their care needs. Staff told us this was really useful and they could ask for more shadow shifts if they felt they required this. Staff told us they valued their job and it was a good place to work and the management team were described as approachable and supportive.

Staff told us that the management team were supportive and responsive of any concerns or issues raised. Staff received supervision and were supported to attend a mixture of online and in person training which they valued. This helped to ensure that people are being supported by a staff team that were appropriately skilled. The management team carried out regular direct observations of staff practice which informed any areas for development. Staff told us they felt confident because they were trained and supported by management to fulfil their role and responsibilities.

Staff told us that staffing had improved as a result of the provider's efforts to recruit and we observed good staffing in terms of numbers and skill mix. We sampled the duty rosters and looked at the way the manager assessed service user dependency. Staffing levels and deployment took into consideration the layout of the home and the demands of the day to day routine as well as the assessed care and support needs of those living in the home. This meant there was enough staff with the right skills to attend to people as evidenced by their prompt response to requests for assistance which we witnessed throughout our visit.

Relatives told us staff were, "very friendly" describing them as "fantastic" which meant they felt they were, "well looked after". One relative described a, "nurturing" approach which meant their loved one could, "enjoy his later years". Comments from residents included, "you're always treated with respect" and "I love being able to chat with staff and I feel that staff here take time to talk to me and take an interest in me and the things I like".

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.

We found Newlands was homely and welcoming. There was a choice of communal areas for people to spend their time in. This included, smaller quieter areas. People had personalised their bedrooms with evidence of people enjoying spending time in them. Although we found that facilities were limited by the age and design of the building, this did not impact on people's level of satisfaction with the environment. They commented on how good it was to be able to personalise the bedrooms and the high standard of housekeeping.

We found the overall environment was of a good standard of upkeep which helped to ensure people were safe and enjoyed a pleasant home environment.

The service had completed a comprehensive environmental audit and work carried out to date had resulted in improvements in provision of space for meaningful activity both inside and out in the garden. People's needs and outcomes were clearly at the centre of completed and ongoing changes. People's views and opinions were being gathered in order that they felt involved and included in developments. Comments included, "The building does not take away from the quality of care, it is very well maintained it feels like home".

There were regular audits and checks carried out relating to the environment and upkeep of care equipment. The home was clean, fresh and homely. There were high standards of cleaning and infection and prevention control in place. Staff received training and guidance updates regularly, with the senior team conducting regular spot checks relating to practice. We could be confident that the risk of infection was being reduced. Equipment was maintained well, with safety checks being carried out at planned intervals. This helped to ensure people were safe and enjoyed a pleasant home environment.

How well is our care and support planned?

4 - Good

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

Assessment and personal planning should reflect people's needs and wishes. We found that care plans held a good level of detail with which to guide care. Plans were clearly individualised and had involved people and their families in their development. All plans sampled included a section describing the person in detail which meant staff could familiarise themselves with people's past lives, hobbies and interests. This provided an important background to care.

Overall, risk assessments to assess resident's care needs were carried out regularly and then used to inform the care plan. The service had regular reviews with residents and their relatives. Those we sampled showed that people were encouraged to give their views and people told us that they were listened to by staff and management. We found care records contained sufficient detail to guide staff in delivering day to day care. There were clearly efforts to ensure records were completed consistently and that person-centred care was being delivered. This meant records could guide staff in delivering and recording care and support that met people's wishes and assessed needs.

Care records sampled showed that key professionals from the multi-disciplinary team were involved in people's care. Referrals were made promptly and care was adapted on the advice which was received. Support plans covered all aspects of care and it was clear that recognised assessment tools were used throughout. This gave assurance that personal plans were based on clear information gathered during regular assessment. Relatives provided examples where effective treatment had been provided as a result of staff listening to them and ensuring prompt action was taken. We verified records were kept up to date in response to healthcare professional involvement and which could then support responsive care and support. Relatives spoke of wellbeing and, "pastoral care" which again could be seen within records and reflected a comprehensive approach to maintaining care records in place to guide and support staff practice.

The service had introduced electronic record keeping and although improvements were identified as ongoing and as a result of learning from experience, we were satisfied that record keeping could support good communication and support the owner's aims and objectives.

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

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?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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