

# Belhaven House Care Home Service

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Troon  
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**Type of inspection:**  
Unannounced

**Completed on:**  
16 April 2024

**Service provided by:**  
Mansfield Care Limited

**Service provider number:**  
SP2005007720

**Service no:**  
CS2011303194

## About the service

Belhaven House is registered to provide a care home service to 32 older people, some of whom may have dementia and two named adults under the age of 65. Respite care can also be provided within the service. The service provider is Mansfield Care Limited.

At the time of the inspection there were 27 people living at the service.

Belhaven House is situated in Troon, South Ayrshire. The service is close to the town centre and local amenities.

The home is a converted villa with extension. Accommodation is over two floors, most bedrooms are on the ground floor to the rear of the building. All bedrooms have either en-suite toilet, or en-suite toilet and shower facilities.

There are communal lounges and dining rooms at the front of the house on the ground floor. A communal lounge on the first floor and a garden room which is a small lounge with direct access to the garden. The garden area is well maintained and secure.

## About the inspection

This was an unannounced inspection which took place on 9 and 10 April 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 ten people using the service and three family members
- spoke with staff and management
- observed practice and daily life
- reviewed documents

**Key messages**

We saw warm and caring relationships between residents and the staff team.

People had access to a range of meaningful and social opportunities.

A new manager had introduced positive changes to the care home.

People benefited from being supported by skilled staff teams who worked well together.

Belhaven House was welcoming and homely with good standards of cleanliness.

**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?	4 - Good
How good is our staff team?	4 - 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 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.

We saw warm and compassionate care. Engagement between staff and the people they supported was friendly and kind. The choices and preferences of people living in the home were supported very well by staff who were familiar with individuals' needs.

Staff understood the importance of involving people in meaningful activity to enhance their wellbeing and support good mental health. There was a good range of meaningful activities for people to take part in. People told us they enjoyed taking part in the activities available and having the company of other people.

Mealtimes were well managed and sociable. Staff supported people to enjoy their meal without any rushing. They were aware of people's food and drink preferences and their specific dietary needs. This helped support people's health needs through maintaining good nutrition and hydration. People commented positively about the quality of food served and the range of menu choices.

The senior care staff were knowledgeable about who to call on for support and advice regarding people's health needs. External healthcare professionals were called promptly for advice and support when needed. We saw records detailing the outcomes of these visits. Advice and changes to treatment were reflected into plans of care to ensure people's healthcare needs were supported. Medication was being managed safely and effectively to support people's health needs.

Family members commented that they felt reassured that their relatives were receiving good support with health needs. Families told us that they were kept up to date with any changes in their relative's health.

Personal plans were up to date which helped to guide staff about the agreed care for the person and ensured a consistent approach. Risk assessments were up to date and reflected into plans of care. This helped to safeguard people from harm. There was a good overview of the management of clinical issues and how risks were being minimised. There were systems in place to ensure that clinical issues were regularly discussed, and plans of care updated. This ensured good outcomes for people's healthcare.

## How good is our leadership?

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 we spoke with commented that the management team were approachable and listened to concerns. People we spoke with knew how to raise a concern and who they could speak with. We saw that complaints were managed in line with policy & procedure. This assured that concerns were being responded to and the lessons learned were used to improve people's outcomes.

People's views about the service were being gathered through resident and relative meetings. The comments and suggestions from people should be used to inform the service development plans and the outcomes communicated to stakeholders. This would enhance partnership working and develop a culture of continuous improvement in the service.

**See area for improvement 1.**

The service was using quality audits to assess and monitor aspects of service provision. The outcome of the quality audits was informing service development, but in a limited way. The provider was introducing a new quality assurance system which is designed to assess a wider range of service provision to inform service development. A new format of service improvement plan will be introduced which will support the management team to drive service development and improve outcome for people living in the home. We will assess the impact the new system has on improving outcomes for people at the next inspection.

**Areas for improvement**

1. To further develop the culture of continuous improvement, the provider should ensure that comments and suggestions gathered from stakeholders are used to inform the service development plan. A system should be put in place to communicate the results of actions taken and the impact on outcomes for people.

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

'I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership' (HSCS 4.7).

'I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve' (HSCS 4.8).

**How good is our staff team?****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 we spoke with commented positively about the skills and kindness of staff. People told us:

"Nothing is too much trouble - the staff are great"

"The staff are friendly and very supportive"

"Staff are friendly and kind, they work really hard."

We saw motivated and cheerful staff who were working hard to ensure the best care for the people they support. There was good teamwork across the different teams working in the home which supported good outcomes for people.

There were effective communication systems in place to ensure that staff were kept up to date with any change in people's health or wellbeing. This ensured people were supported by staff who were knowledgeable about care needs and could provide responsive support.

To further support people and develop staff roles a keyworker system should be developed in the home. This would support individuals and their families and provide stronger communication pathways.

**See area for improvement 1.**

Staff told us that they felt supported in their roles. To ensure that this support was formalised the supervision process should be restarted. This would offer staff opportunities to discuss their learning and development needs and reflect on their practice.

**See area for improvement 2.**

The service uses a dependency tool to inform staffing levels. This helps to ensure that there are sufficient staff day to day to meet peoples care needs. We saw that people's needs were being supported well and that staff were responsive and attentive. The care teams were deployed and directed well by competent team leaders. This ensured that people were receiving the care they needed to support them effectively.

## Areas for improvement

1. To improve connections and communication between people, their families and staff the provider should develop a keyworker system in the home. Staff assigned as keyworkers should have clear guidance regarding their role and responsibilities.

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

'I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential.' (HSCS 1.61).

'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).

2. People using the service should have confidence that staff supporting them are competent and confident in their role. The service should ensure that:

- staff receive regular support and supervision.
- staff have an annual appraisal.
- observations of staff practice are carried out.

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

"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).

## 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 told us that the Belhaven House had homely atmosphere. They said the home was comfortable and a nice place to live and visit.

People were able to move freely around the home, which promoted their independence. There was a range of areas in the home for people to use, including some quieter sitting rooms.

People had a choice of dining rooms to eat their meals.

Bedrooms were nicely decorated and personalised. Families were encouraged to bring in items from home to create a space that people would be familiar with.

The home had accessible, well maintained outdoor areas. People told us how much they enjoyed getting out into the garden in the nice weather.

There were good standards of cleanliness throughout the home. The housekeeping team were aware of their role and responsibilities to ensure that cleanliness of the home was maintained. There were effective systems in place to ensure that good standards of cleanliness were maintained. People we spoke with commented positively on the cleanliness of the home.

The maintenance records were up to date to show that checks of the equipment and safety of the home were completed. The maintenance worker had a good understanding of their role in ensuring that the home was safe, and people were protected from harm.

## How well is our care and support planned?

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 should have a personal plan which details their current care and support needs. This ensures that staff are effectively directed to support the individual taking a consistent and agreed approach.

Personal plans we sampled included detailed information about individuals' healthcare needs and guidance for staff about how best to support these needs.

We saw that there was good information within personal plans about the individual, their choices, and preferences. This could be further developed to include information about peoples preferred routines and what was important to them. This would provide valuable information to guide staff to ensure that people were supported in an agreed and consistent way and that their wishes were respected.

### See area for improvement 1.

People and their representatives were involved in regular care reviews. This gives people opportunity to formally discuss their care and support and make decisions about their future care.

### Areas for improvement

1. To ensure personal plans are person centred and fully reflect the interest and choices of the individuals, the provider should include details about what is important to the person and their preferred daily routines.

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

'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS 1.23).

## 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 improve connections and communication between people, their families and staff the provider should develop a keyworker system in the home. Staff assigned as keyworkers should have clear guidance regarding their role and responsibilities.

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

'I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential.' (HSCS 1.61).

'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 area for improvement was made on 1 June 2023.**

#### Action taken since then

This area for improvement has not been implemented and will continue. Details of this can be found under Key Question 3 of this report.

#### Previous area for improvement 2

The provider should ensure that personal plans are developed to contain information which will guide staff to effectively and consistently support peoples care needs.

This should include but is not limited to:

- risk assessments outcomes are used to inform care plans
- details of special equipment in place to support people's health needs.
- personal plans are developed in consultation with the individual and their representative to reflect a responsive, person-centred approach, taking account of individuals choices, preferences and abilities
- anticipatory care plans detail people's decisions and wishes for their end-of-life care.

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

'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 area for improvement was made on 1 June 2023.**

#### Action taken since then

We saw that the outcomes of risk assessments were being used to inform care plans.

There was information available in care plans about equipment in place to support people's health needs.



The personal plans we sampled reflected a responsive, person-centred approach, with individuals' choices, preferences and abilities reflected into the plans.

Anticipatory care plans reflected peoples decisions and wishes for their end-of-life care.

This ensured that up to date information was available to guide staff about keeping people safe and respecting their choices.

**This area for improvement has been implemented.**

### Previous area for improvement 3

To enhance the culture of continuous service improvement the provider should implement a plan to support the service to achieve a consistent approach to assessing and monitoring service provision.

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

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19)

**This area for improvement was made on 1 June 2023.**

#### Action taken since then

There was evidence that the providers quality assurance system was being used to assess and monitor the quality of service provision. The outcome of equality audits were informing action plans to drive service improvement.

**This area for improvement has been implemented.**

### Previous area for improvement 4

People using the service should have confidence that staff supporting them are competent and confident in their role. The service should ensure that:

- staff receive regular support and supervision.
- staff have an annual appraisal.
- observations of staff practice are carried out.

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

"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 area for improvement was made on 1 June 2023.**

#### Action taken since then

This area for improvement has not been implemented and will continue. Details of this can be found under Key Question 3 of this report.

## 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).

## 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?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - 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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