

St. Johns Care Home Service

11 High Cross Avenue
Melrose
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Telephone: 01896 478700

Type of inspection:
Unannounced

Completed on:
11 November 2025

Service provided by:
Mansfield Care Limited

Service provider number:
SP2005007720

Service no:
CS2009195955

About the service

St. Johns is a care home registered to provide a care service to a maximum of 17 older people. Two of these placements can be used for emergency respite care. The provider is Mansfield Care Limited. The service is situated in Melrose, within easy reach of local amenities including shops, cafes and transport. The home has two parts: the original building, which is on two floors and a ground floor extension to the back of the building which looks out onto well-established gardens. The main house has a dining room, small lounge and main lounge. First floor bedrooms are accessed via the stairs or a stair lift. The home has had a refurbishment since the last inspection, this included a fully refurbished lounge, downstairs spa bathroom and the dining area has been fully redecorated.

During the inspection there were 12 people residing at St Johns Care Home.

About the inspection

This was an unannounced inspection of the service which took place on 4 November 2025. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection information was reviewed 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 people using the service as well as feedback from relatives. We also spoke with management and staff, observed practice and daily life as well as reviewed a wide range of documents.

Key messages

- Staff demonstrated genuine warmth and caring attitudes when supporting
- There were good working relationships between management and staff
- Mealtimes experience gave access to a variety of meals and drinks and choice promoted
- Refurbishments have had a positive impact on those residing in the home
- Improvements had been made regarding activities.

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?	4 - Good
How good is our leadership?	4 - Good
How good is our setting?	5 - Very 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?

4 - Good

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

The inspection highlighted a good culture of compassion and encouragement among staff members. Positive and respectful relationships between staff and those receiving care were consistently evident throughout the visit. Interactions were warm and engaging. Staff were knowledgeable about those in their care and how to meet their needs. Staff encouraged people to be independent and promoted choice.

The staff team were well established and worked well together. There was respectful communication within the team which created a warm atmosphere because of good working relationships.

People had access to external professional support such as GPs, opticians, SALT, podiatry etc when this was needed. Appropriate referrals were made in a timely fashion. People benefitted from a range of assessment of health and care needs which informed support plans and risk assessments. Key processes such as the monitoring of people's weight, falls and risk assessments were in place.

The inspection identified that medication management systems within the service were consistently effective. Procedures for prescribing, administering, and monitoring medications were well-established though some improvements needed were identified. The manager addressed this during the inspection.

Regular audits and oversight from management were in place, contributing to a culture of accountability and continuous improvement. The overall approach reflected a good standard of care delivery, promoting resident safety and wellbeing

A new activity coordinator had recently been appointed and was having a positive impact on the wellbeing of those residing in the home and enhanced the planning and delivery of meaningful activities, with ongoing support from the manager to further develop and embed a varied programme. During the inspection, a range of activities were observed, including arts and crafts sessions, individual one-to-one engagements, and a spiritual service led by a local minister, followed by refreshments. The weekly schedule also included regular visits from early learning school children, which foster intergenerational connection and joy among residents.

Additional planned activities include coffee mornings at the local church and participation in the "Cycle Without Age" initiative, a charitable programme that enables residents to enjoy outdoor excursions and engage with their wider community. Pet therapy is also offered weekly, providing comfort and emotional enrichment.

These activities reflect a commitment to holistic care and demonstrate how the home is actively promoting social inclusion, emotional wellbeing, and community engagement.

There were no restrictions on family visiting, family and friends were invited into the home which allowed further opportunities for people to connect with those who are important to them.

People benefitted from a positive dining experience. The dining area was thoughtfully arranged, with a homely feel enhancing the ambience. Those residing in the home were offered a choice of meals which were freshly prepared, looked appetising and presented well.

Staff offered condiments as needed. Portion sizes were generous, with additional options if required. Seating arrangements respected people's preferences, with options for both social and private dining. Staff were attentive and respectful, promoting independence and dignity throughout the mealtime.

Fluid and nutritional needs were met in a calm and unhurried environment. Staffing levels appeared sufficient and staff interactions were warm and compassionate, contributing to an enjoyable dining experience.

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.

Systems were in place to assess and monitor the quality of the service and environment. Good communication between staff and management took place in a daily flash meeting. These meetings ensured all staff were up to date with any changes regarding people's health, all planned activities and meetings. Audits were carried out by the management team.

Regular meetings taken place with staff and plans are in place for residents' meetings to restart with the activity coordinator as well as a newsletter to be introduced. Feedback from the meetings was used to improve the service and the outcomes for those the staff support.

Supervision processes are in place; however, there is scope for improvement to ensure they are consistently meaningful and effective. Current supervision sessions would benefit from a more structured approach that includes a comprehensive review of individual work performance, discussion of employee wellbeing, identification of challenges, and collaborative goal setting.

To enhance the quality and impact of supervision, it is recommended that sessions also incorporate opportunities for professional development, reflective practice, and support for career progression. Embedding these elements will help ensure that staff feel valued, supported, and equipped to deliver high-quality care. Strengthening the supervision framework in this way will contribute to improved staff engagement, accountability, and continuous improvement across the service. The manager was agreeable with this and improvements are under way.

A comprehensive range of training opportunities is available, delivered through both face-to-face sessions and online platforms. Current offerings include Adult Protection and Support, Dementia Awareness, Infection Control, Manual Handling, and Palliative Care, among others.

Training compliance currently stands at 75.8%, which reflects a decrease compared to the previous year. It is noted that this figure includes staff who are no longer employed at St John's; the Home Manager is in the process of updating records to ensure accuracy. Senior Management has set a target of 95% compliance, emphasizing the importance of timely updates and staff engagement.

Plans are underway to expand face-to-face training. The Home Manager, in collaboration with Senior Management, is coordinating the rollout of further role specific sessions. These initiatives aim to enhance staff competencies and ensure alignment with best practices in care delivery.

Based on the review of assessments, dependency tools, and direct observations conducted during the inspection, staffing levels appeared sufficient to meet the needs and support the desired outcomes of residents within the home.

People benefitted from safe recruitment and induction which reflected positive outcomes for people experiencing care.

How good is our setting?

5 - Very Good

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

Since the previous inspection, significant enhancements have been made to the home's communal areas, contributing positively to the overall environment and resident experience.

The lounge area has undergone a full refurbishment, now presenting as a warm, welcoming, and homely space. The installation of a high-spec media wall and café bar, along with new furnishings and curtains, has created a comfortable and aesthetically pleasing setting that promotes social interaction and relaxation.

In addition, a new spa-style bathroom has been installed on the ground floor, offering residents an enhanced bathing experience in a modern, therapeutic environment. The dining area has also been fully redecorated, further improving the ambiance and supporting a more enjoyable mealtime experience.

These upgrades reflect a commitment to continuous improvement and have demonstrably enhanced the quality of life and outcomes for those residing in the home.

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.

The support plans reviewed were person-centred and informative. Each plan provided a comprehensive overview of the individual, including their background, life history, medical information, and personal preferences. All sections of the care plans were appropriately aligned with relevant Health and Social Care Standards (HSCS), reflecting good practice. However, improvements are required in the completion and quality of skin care assessments to ensure all sections of the support plan are stating the same information.

Support planning in relation to end-of-life care would benefit from enhanced documentation and greater evidence of family involvement. Key areas requiring improvement include the absence of information on spiritual preferences, designated family contacts, Power of Attorney (POA) status, and the agreed ceiling of care. Additionally, the individual's end-of-life wishes could be more thoroughly explored, including arrangements for the management of personal belongings following death.

However, notable improvements have been made since the previous inspection, demonstrating a commitment to continuous development.

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 support people's wellbeing, the provider should ensure that people are supported with activities that are meaningful to them. This should include, but is not limited to, ensuring people's needs are fully assessed to determine their preferences and people have the opportunity to attend activities in their local community. This is to ensure care and support is consistent with Health and Social Care Standard 1.25: I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors.

This area for improvement was made by the complaints team on 28/03/2025.

This area for improvement was made on 28 March 2025.

Action taken since then

A new Activity Coordinator has recently been appointed and is already having a positive impact on the wellbeing of residents. Their presence has enhanced the planning and delivery of meaningful activities, with ongoing support from the Home Manager to further develop and embed a varied programme. This area for improvement has been met.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very 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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