Peebles Nursing Home
Care Home Service

Tweed Green
Peebles
EH45 8AR

Telephone: 01721 728 180

Type of inspection:
Unannounced

Completed on:
27 May 2026

Service provided by:
Mansfield Care Limited

Service provider number:
SP2005007720

Service no:
CS2010271379

About the service

Peebles Nursing Home provides a care home service to 30 older adults. The service is provided by Mansfield Care Limited. The service is situated in the town of Peebles within the Scottish Borders. At the time of inspection 25 people were living in the home.

The rooms are accommodated over two floors. On the ground floor, there is a large split sitting room and a separate dining room. The home benefits from a small seating/garden area to the front and a small encloses rear garden. The home is situated in the heart of Peebles, giving access to shops and community facilities.

About the inspection

This was an unannounced inspection which took place between 26 May 2026 and 27 May 2026. The inspection was carried out by two inspectors 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:

- We spoke with and gathered feedback via an electronic questionnaire from nine people using the service, and two relatives
- We talked with and gathered feedback from five members of staff and the management team.
- Observed staff practice and daily life.
- Reviewed a range of documents.

Key messages

- People experience warm, person-centred care that supports their wellbeing.
- Leadership has improved, but quality assurance processes needed to be more robust and consistently applied.
- Staffing arrangements are stable, safe and support good teamwork.
- Personal planning is improving but requires further development to ensure clarity, relevance, and future-focused care.

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?	3 - Adequate
How good is our staff team?	4 - Good
How well is our care and support planned?	3 - Adequate

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 overall where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

During our visit, we observed positive and caring interactions between staff and the people they supported. Staff demonstrated a strong understanding of each person's individual care needs and took their time to ensure support was provided at a pace that suited the person. Staff were consistently respectful and kind, and we saw people enjoying warm, friendly moments together.

People told us they felt well supported. One resident said, "I feel well looked after". Another commented "the staff are kind and caring." These comments reflect what we saw during our observations.

There were plenty of activities taking place throughout the day, giving people a range of options to choose from based on their interests. Residents spoke positively about this, with one person telling us, "I feel I have plenty to do, there's always something going on." The service had a yearly activities planner in place, and weekly schedules were clearly displayed on notice boards so people could see what was available. Activities schedules were also shared with relatives to help them stay informed and involved.

Communal areas were arranged in a way that encouraged people to spend time together, which helped them build positive relationships and friendships. This was especially noticeable during mealtimes and in the lounge, where people chatted and engaged with one another comfortably.

Relatives told us they felt welcomed when visiting. There were no restrictions on visiting times or how long they could stay, this helped families maintain close and meaningful connections with their loved ones.

People's health and wellbeing benefitted from safe and effective medication practices. Medication administration was well managed, and people were supported to take the right medication at the right time. This gave assurances that medication was given as prescribed and intended. Care staff who supported people with their medication had their competencies reviewed, which provided confidence that medication was administered by well-trained and capable staff. A previous area for improvement in relation to medication administration has now been met.

The service used an online platform, which provided a reliable system for staff to record and monitor people's health needs and treatment. Key areas of care such as food and fluid intake, skin integrity checks and oral care were recorded and monitored effectively. We discussed with the manager the need for more focused auditing of repositioning records. This would allow for more consistent oversight and ensure staff were clearly evidencing when people had been repositioned, helping reduce the risk of discomfort or skin breakdown.

How good is our leadership? 3 - Adequate

We made an evaluation of adequate for this key question. There were some strengths contributing to positive outcomes for people, however these only just outweighed weaknesses.

The provider had a range of quality assurances processes in place to monitor key aspects of the service. Despite changes within the management team since the last inspection, many core audits and observations

checks continued to be carried out. While actions were documented, the overall processes would benefit from clearer target dates and more consistent follow-up to ensure that essential tasks are completed and improvements sustained.

Audits relating to personal plans had been undertaken less frequently. The new manager had begun working with the senior team to re-establish these processes. The provider should ensure that personal plans are audited consistently and thoroughly to maintain clear management oversight of the quality, accuracy and relevance of the information held.

The manager had good oversight of accidents and incidents and took appropriate action to help ensure people remained safe. However, some events had not been notified to the Care Inspectorate in line with statutory guidance. We discussed this with the manager, who acknowledged the requirement to submit all notifications timeously.

A self-evaluation of the service had been completed. This was generally positive and highlighted a number of recent improvements and areas of progress, demonstrating the management team's commitment to assessing the quality of care and support. Although the self-evaluation did not fully reflect some of the significant challenges the service had experienced, it provided a clear picture of current performance and expected standards.

A service improvement plan had been developed, incorporating areas for development identified by external partners such as the pharmacy and the Care Inspectorate. The plan could be strengthened further by including issues raised directly by people using the service, their relatives, and visiting health and social work professionals. Establishing clear review points throughout the year would also support a more robust and dynamic improvement planning process.

Overall, we found improvements in leadership since the last inspection. Moving forward, it is important for the provider to focus on sustaining progress by embedding new developments to ensure long-term, continuous improvement.

How good is our staff team? 4 - Good

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

People could be confident that new staff had been recruited safely, and the recruitment process reflected the principles of Safe Recruitment, Through Better Recruitment guidance. Staff had completed a range of mandatory learning relevant to the needs of the people living in the home. This supported staff to work effectively with people who experienced care and helped promote positive outcomes and good quality support.

Staffing levels within the service remained stable and continued to meet the needs of people living there. Rotas were consistently aligned with the level of support required, and shifts were observed to be staffed appropriately. Nursing cover was structured in a way that ensured safe and continuous support throughout the day and night.

Staff supervision and observations of practice had been reinstated, and the manager had made good progress in re-establishing consistent oversight and support for staff. Records showed that team meetings, had taken place, with further dates planned to maintain regular opportunities for reflection and discussion.

We discussed with the manager the benefit of linking observations of practice to supervision sessions to provide clear and constructive feedback to staff in relation to their performance and development. We will follow up on progress in this area at the next inspection. A previous area for improvement relating to staff supervision, observation of practice and team meetings has now been met.

How well is our care and support planned? 3 - Adequate

We made an evaluation of adequate for this key question. There were some strengths contributing to positive outcomes for people, however these only just outweighed weaknesses.

There was a range of up-to-date assessments in place to identify people's current needs and the support required. Where there were significant risks such as falls, weight loss or changes in health conditions, appropriate measures were implemented to help ensure people remained safe and well. People and their relatives were involved in regular care reviews and had the opportunity to comment on and shape their care and support.

People could be assured their care, and support was based on current assessments, underpinning safe and effective practice.

Individualised personal plans had been recently reviewed and updated. Plans included essential information about people's likes, dislikes and personal preferences. Key tasks were outlined, providing staff with guidance on how to meet people's day to day care and support needs.

However, we found personal plans did not include details of people's wishes in relation to future care planning (sometimes referred to as anticipatory care planning). The manager was aware of this and had planned to spend time with people and their relatives to discuss and document their preferences for future care and support.

Additionally, the structure and content of plans made it difficult for them to be used effectively. Although they had been recently updated, much of the older content was left in place and it was not clear if it was still relevant. This meant some personal plans were hard for staff to quickly identify current guidance. Consequently, staff could miss important updates or interpret information differently, which could lead to inconsistent support for individuals.

There is an area for improvement currently in place relating to personal plans. Although some elements of improvement have been made, the provider should continue to develop plans and ensure all information is accurate and relevant. The area for improvement will be carried forward, and we will follow up on progress in this area at the next inspection.

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 ensure that medication is managed in a manner that protects the health and wellbeing of service users. The manager should:

- Ensure that medicines are administered as instructed by the prescriber;
- Demonstrate that staff follow policy and best practice about medication administration records and documentation;
- Ensure that staff receive training and refresher training appropriate to the work they perform;
- Ensure that managers are involved in the audit of medication records.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state:
"I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS4.11).

This area for improvement was made on 27 November 2025.

Action taken since then
See details under key question one of the report.

This area for improvement has been met.

Previous area for improvement 2

To ensure people experience high quality care, the provider should ensure they provide:

- opportunities for staff to reflect on their practice through discussions at team meetings and through regular supervision with their manager.
- Observations of staff practice are carried out and recorded. This would include, ensuring training is put into practice, and that staff practice reflects the health and social care standards.
- Where practice is identified as needing improvement there is support through training and one to one meeting.

This is in order to comply with the Health and Social Care Standards (HSCS) which states:
'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 27 November 2025.

Action taken since then
See details under key question three of the report.

This area for improvement has been met.

Previous area for improvement 3

To ensure personal plans accurately reflect the care provided. The manager should ensure:

- When personal plans are reviewed, subsequent sections of the care plans should be updated accordingly to reflect all assessed care needs, including changes identified.
- The plans are fully audited to ensure all the information held within them can be cross referenced as being accurate.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state:
'I experience high quality care and support based on relevant evidence, guidance and best practice.'(HSCS 1.19)
'I experience high quality care and support because people have the necessary information and resources.' (HSCS 4.27).

This area for improvement was made on 27 November 2025.

Action taken since then
See details under key question five of the report.

This area for improvement has not been met

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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate

How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

How well is our care and support planned?	3 - Adequate
5.1 Assessment and personal planning reflects people's outcomes and wishes	3 - Adequate

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.