

# Suncourt Nursing Home Care Home Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
2 August 2024

**Service provided by:**  
Suncourt Ltd

**Service provider number:**  
SP2003002273

**Service no:**  
CS2003010279

## About the service

Suncourt Nursing Home is registered to provide a care service to a maximum of 44 older people. The provider is Suncourt Ltd.

The home overlooks Royal Troon golf course with wonderful coastal views and is close to shops and other amenities. The service comprises of an original building with a two-storey extension, including a lift and disabled access. There are 18 single bedrooms with ensuite toilet and shower facilities and 16 single bedrooms with ensuite toilet and hand washing facilities.

## About the inspection

This was an unannounced inspection which took place on 30 and 31, July 2 August. 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 eight people using the service and eight of their relatives
- Spoke with 14 staff and management
- Observed practice and daily life
- Reviewed documents

## Key messages

- The management and staff team at Suncourt provide a very warm and friendly welcome to everyone visiting the home.
- The care home requires some attention to ensure it is well presented, free from odours and creates a pleasant environment with good standards of cleanliness.
- The provider continues to be responsive to advice and demonstrates a willingness to implement developments to improve and enhance the service.
- There continues to be challenges with staffing and recruitment, resulting in reliance on agency cover, which is variable in quality, thus affecting the overall continuity of care provided.
- There is a team of staff who have considerable experience and knowledge of the residents individual care and support needs.
- 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?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	3 - Adequate
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?

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 living in a care home should expect to have their care and support needs provided for with compassion, dignity, and respect for their rights. We saw that staff interacted with people in a kind, warm and compassionate manner when providing support to them.

People living in the care home and some of their relatives we spoke to who were visiting their loved ones during these inspection visits were happy with the standard of care and support provided. They told us they felt involved and any changes or developments were communicated accordingly. We also spoke to some relatives who's experience was not as positive.

We met with an activity coordinator and attended residents/relatives meeting with them to talk about what activities they enjoy doing and would like to do, as well as planning ahead for events and outings. This was a very positive meeting and everyone engaged and spoke well of the staff and the opportunities that were available. Some residents and staff had recently been invited behind the scenes of the Scottish Open Golf tournament that was held at Royal Troon golf course which is adjacent to the care home.

We saw that healthcare professionals were contacted when required for advice and support when people became unwell. Any advice or changes to treatment regimes were communicated to staff and recorded in the individual's care plan. Medication administration procedures and documentation were being managed appropriately this helped to support individual's health and well being needs.

We spent time observing mealtime experience for people and saw that staff worked together to ensure that mealtimes were consistently well managed and an enjoyable experience for people. Kitchen and catering staff knew individual's dietary needs and preferences.

People who required assistance with their nutritional needs were supported by staff with dignity and respect. This helped to maintain good nutrition and hydration needs. We heard positive comments that the food choices were good and that they could get an alternative if they did not like what was on the menu, although some were not as complimentary.

## 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.

It is important that services have effective quality assurance systems in place to assess and monitor the quality of the care and support provided. This helps drive service improvements which results in better outcomes for people living in the home.

Since the previous inspection there has been several changes to the management of the care home. We received positive feedback about the current management. People living in the care home, their relatives and staff we spoke were complimentary of the new manager.

The manager was open and welcoming and provided good role model to all the staff team and demonstrated good leadership skills and support when it was needed. The provider needs to ensure that the stability and continuity of the management of the service is maintained.

The service had an array of quality assurance procedures in place to ensure that the senior management had a good overview of the issues and concerns within the service. This also helps to identify areas of improvement within the service and provide information on how individual needs are being appropriately met.

We saw that people's views and opinions about the quality of the care and support provided were gathered through a number of ways. Review of the care and support plan, residents and relatives meeting and activity group meetings. All contributed to the information and suggestions people offered. This helped to inform the service development plans and the outcomes communicated to stakeholders.

The operations director and managers within the provider services worked together to continue to develop and streamline the quality assurance procedures to ensure they are fit for purpose and tailored to the needs of the service and help to inform service developments. (See Area for Improvement)

### Areas for improvement

1. The provider needs to ensure the quality assurance procedures result in improvements to the service. These audits need to be effective in identifying issues or concerns. This should include analysis of dependency levels and staffing to inform changes and developments to further improve and enhance the service provided.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19)

### How good is our staff team?

### 3 - Adequate

We graded this key question as adequate were strengths only just outweighed areas for improvement.

We saw examples of genuine, warm connections, which resulted in positive responses from people being supported. There were 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 their care and support needs and could provide responsive support.

We noted that at times maintaining appropriate staffing levels continues to be a challenge for the care home in trying to maintain high standards of care and ensure the environment is also of a good standard. (See Area for Improvement 1)

We reviewed the service's recruitment procedures. Administration staff ensured that all necessary procedures and documentation was in place prior to anyone working with vulnerable adults in the care home. All documentation we sampled was completed appropriately. We heard of the on going challenges with recruiting and being able to retain good quality staff.

Staff we spoke to, told us that they felt supported by the new management. There was a regular programme of training, supervisions and appraisals in place. This provided staff with the opportunity to discuss any issues or concerns including their learning and development needs. This also helped staff to take stock and reflect on their practice which helps to promote positive outcomes for people supported. There has been changes to the staff team within the care home since their last inspection and the management need to ensure all staff work well together and build a good team dynamic. (See Area of Improvement 2)

There were various communication systems in place to ensure that staff were kept up to date with any change in people's health or wellbeing. This helped to ensure that people in the care home were supported by staff who knew their individual need and were kept up to date with any changes or developments.

The service provider had a comprehensive training programme in place to ensure that all staff working with people in the care home had the skills and knowledge to provide to the right kind of care and support. Training was a variety of on-line courses and face to face including accessing external professionals for advice and guidance when required. We heard that the staff were welcoming and participate well in any training being provided.

## Areas for improvement

1. The provider needs to ensure there are appropriate levels of staffing to meet the needs of the people living in the care home and also to ensure there are suitable numbers of domestic and ancillary staff to maintain the cleanliness of the environment and ensure that all necessary health and safety requirements are addressed. This should ensure that the continuing assessment, planning and evaluation of staffing is transparent, evidence-based and focussed on achieving good outcomes for people.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'My needs are met by the right number of people' (HSCS 3.15).

2. There has been changes to the staff team within the care home since the last inspection. The service management should continue to develop and implement the staff training and supervision programme to ensure that all staff complete mandatory training requirements and update and refresh when necessary relevant to their roles and responsibilities. This needs to continue in a consistent manner and we will review the progress of this at future inspections.

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

We saw that people living in the care home were able to move freely around the home, which helped to promote their independence. There was a range of areas in the home for people to use, including a quieter sitting room.

We saw that carpets in the corridors and some communal areas were looking worn. Consideration should be given to their replacement. The home has communal shower and adapted bathrooms. Some bedrooms have en-suite showers, whilst others have en-suite toilets.

We looked at the records of the health and safety checks on the environment of the home and the equipment people were using. We reviewed the maintenance and servicing records. These were up to date and showed that regular checks of the equipment and safety of the home were completed. The maintenance team had a good understanding of their role in ensuring that the care home environment was safe, and people were protected from harm.

We have made an area of improvement for the environment and the provider needs to continue to ensure this is maintained and refurbished when required. (See Area for Improvement 1)

### Areas for improvement

1. The provider should ensure that people experience a high quality environment that promotes their choices and meets their needs. This could include a deep cleaning of the care home environment and ensure there are enough domestic staff to keep the home clean, tidy well presented and free from offensive odours.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices' (HSCS 5.21).

'I can use an appropriate mix of private and communal areas, including accessible outdoor space, because the premises have been designed or adapted for high quality care and support'(HSCS 5.1).

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings, and equipment' (HSCS 5.22).

### 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's individual care and support plans should reflect their wishes and choices, as this helps to provide guidance to care staff about how people wish to be supported and respects their decisions. The care home has an electronic care plan system in place. We viewed and sampled several individual care files on this system spent time on this system. We noted that the care and support plans contained considerable information about individual's care and support needs, preferences and choices.

The information in the care and support plans also showed appropriate use of health needs assessments that helps to identify any risks or potential hazards. We saw that there was good communication and interaction with external professionals if and when required and any actions were appropriately followed through. This helped to ensure people's health needs were clearly identified and appropriate care and support provided meet those identified needs.

People and their relatives were involved in the care and support planning process and their knowledge and experiences were valuable in the development of appropriate and effective care planning procedures.

Any Legal documentation was in place within the care plans to support and ensure individual rights were respected. This helped to keep people safe and ensured that decision-making was inclusive and transparent.

The service needs to continue to develop and maintain the consistency of the content of the care plans. Whilst we noted some were good others could do with further improvement. (See Area for Improvement 1)

## Areas for improvement

1. The provider needs to ensure that the content of the care and support plans are consistent and developed in consultation with the individual and their representative to reflect a responsive, person-centred approach, taking account of individuals choices, preferences and abilities.

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



## 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

During this inspection, although we observed some good examples of activities on offer, the home only has one person covering this. The provider is in the process of recruiting another person to help further develop and implement this important element of the care and support provided. We will therefore continue to review the progress of this at future inspections.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: '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.' (HSCS 1.25)

**This area for improvement was made on 15 May 2023.**

#### Action taken since then

We met with the activity coordinator and attended a meeting for residents and their relatives to discuss the activities programme and provide an opportunity to have choices and interests explored. We saw that the home had employed more activity staff and that care staff were also encouraged and participated in the various activities and events organised within the home and the wider community.

This area of improvement has been met.

#### Previous area for improvement 2

The provider and management of the service should continue to develop and implement the quality assurance systems to ensure they are effective in assessing and evaluating the quality and standards of care and support provided and any areas of improvement identified are addressed through appropriate action plans.

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 27 July 2021

**This area for improvement was made on 15 May 2023.**

#### Action taken since then

The provider through their senior management support structures continues to develop and implement a quality assurance system that is fit for purpose and helps to reflect the standard of service provided and identify areas for development. We heard that this care home and managers from the providers other care homes were working well together to provide support to each other and also having a meeting arranged to discuss the on going development of the service quality assurance procedures.

We will continue to repeat this as an area of improvement but recognise the good progress being made and the challenges that have impacted on the timescales for achievement.

## Previous area for improvement 3

The provider and service management should continue to develop and implement the staff training and supervision programme to ensure that all staff complete mandatory training requirements and update and refresh when necessary relevant to their roles and responsibilities. During this inspection we heard good feedback from new staff about how they were supported in their induction to the service by the management and staff team. This needs to continue in a consistent manner and we will review the progress of this at future inspections.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: "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 15 May 2023.**

### Action taken since then

The service has had a number of staff changes and continues to face challenges in recruiting and sustaining a consistent team of care staff within the home. There have been a number of new starts as well. The management team within the home have only been in post a few months and working well together however, this will take time to build up the staff team and go through all the supervisions required. This area of improvement will continue.

## Previous area for improvement 4

The provider should ensure that the content of the care and support plans are consistent and developed in consultation with the individual and their representative to reflect a responsive, person-centred approach, taking account of individuals choices, preferences and abilities.

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

'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 15 May 2023.**

### Action taken since then

Whilst we noted some development of the care plans that we viewed electronically there was still the issue of all this information being accessible and available to all the care staff team. Some staff such as agency, did not have access to the care plan system to relied on other staff to input information into. This area if improvement will be repeated.

## Complaints

Please see Care Inspectorate website ([www.careinspectorate.com](http://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 staff team?	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate
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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