

Carrick House Nursing Home Care Home Service

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Type of inspection:
Unannounced

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Service provided by:
Carrick Care Ltd

Service provider number:
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Service no:
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About the service

Carrick House Nursing Home is situated in the town of Ayr, South Ayrshire.

The service is registered to provide a care service to a maximum of 26 older people who have physical needs and/or dementia.

The service comprises of an older adapted building with a single storey extension to the rear. There are 24 bedrooms, two of which are doubles and will only be occupied by a single person, married couples, partners, relatives, previously acquainted friends or those who want to share a bedroom. Of these 24 bedrooms, 10 are en-suite. There are shared bathroom and toilet facilities for those with no en-suite. The main house has a lift and disabled access. People using the service have access to a well maintained secure garden area.

About the inspection

This was an unannounced inspection which took place on 19, 20 and 23 February 2025. 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 six people using the service and four of their family
- spoke with nine staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals

Key messages

- The service's infection prevention and control practices were excellent, leading to outstandingly high outcomes for people.
- Staff interactions with residents were kind and compassionate, fostering positive relationships and supporting mental health and wellbeing.
- Families felt well informed and included in healthcare decisions, enhancing residents' rights and ensuring significant decisions were supported by those who knew them best.
- The service managed medication robustly, ensuring safe and effective treatment of health conditions through reliable recording and regular audits.
- Carrick House Nursing Home demonstrated a strong commitment to person-centred care, with staffing arrangements tailored to meet individual needs and preferences.
- Robust recruitment processes and effective training management ensured that staff were qualified, trustworthy, and well-equipped to provide high-quality 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?	5 - Very Good
How good is our staff team?	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.

Performance in the area of infection prevention and control was excellent, with performance in this area leading to outstandingly high outcomes for people.

We found that the service provided a friendly, warm and homely atmosphere for people. Interactions between staff and people living at Carrick House were kind and compassionate. Staff knew each resident very well and built positive relationships with them and their families. This supported people's mental health and gave them a sense of wellbeing, inclusion and belonging.

We received very positive feedback from people about the service, including from families, social workers and health professionals. One resident told us "Moving in here was one of the best decisions I ever made. I really can't praise the care and the staff highly enough". This reflected most people's views about the quality of care and support and the positive relationships between staff, residents and families.

Families told us that they felt well informed and included in regular reviews and significant decisions about people's healthcare. One relative said, "We are always involved and very well informed. It really is an exceptionally good home, and we have total confidence in the manager and staff". This helped to support people's rights and ensured that significant decision-making was supported by people who knew the individual resident best. The service met a previous area for improvement for effective self-evaluation and improvement planning (**see section 'What the service has done to meet any areas for improvement we made at or since the last inspection'**)

Staff worked well and proactively with external health professionals. This helped to ensure that people had access to the right healthcare assessments and treatment when they needed it.

The service managed people's medication robustly. The recording of administering regular and 'as required' medication was correct and reliable. This was supported by regular medication audits, which were carried out by senior staff. The service met a previous area for improvement for the management of 'as required' medication (**see section 'What the service has done to meet any areas for improvement we made at or since the last inspection'**). As a result, people benefitted from safe medication management that supported the effective treatment of their health conditions.

Mealtimes were well managed and provided people with a calm and unhurried atmosphere that helped to meet their nutritional needs. However, we found that some aspects of the mealtime service could be further improved, such as reducing the number of times staff had to walk between the dining areas and the kitchen to transport individual meals. We discussed this with the manager, and it was positive to hear that the service had started to look at improvement ideas, such as hot trolleys for the dining areas.

The service demonstrated a particular strength in managing infection prevention and control (IPC) practices. This included several examples of good practice that were leading in the care home sector.

There was a very high awareness of the link between maintaining a clean, safe, and highly personalised environment and people's sense of wellbeing, dignity, and identity.

Examples of good practice included washing each resident's laundry, including their individual bedlinen, separately. This not only reduced the risk of cross-infection but also promoted people's sense of individuality and their feeling of being at home.

The service had developed very effective quality assurance processes to promote staff awareness and accountability. An innovative example was the use of IPC incident report sheets. This raised staff awareness, encouraged them to spot poor practice, take immediate action to correct it, and ensured that the staff involved learned from the incident. This was supported by regular observations of practice and walkabouts by the highly visible manager. As a result, we observed very robust IPC practices across a range of processes, such as cleaning, using personal protective equipment (PPE), and waste disposal.

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.

Carrick House Nursing Home demonstrated a very strong commitment to person-centred care. Staffing arrangements were tailored to meet the individual needs and outcomes of the people they supported. This approach ensured that each person received personalized care that aligned with their specific requirements and preferences. We discussed with the manager how the assessment, planning and regular evaluation of staffing could be brought further in line with recently published national guidance. This would ensure that the evidence base for staffing decisions and professional judgement decisions to amend staffing plans, would be better captured (**see area for improvement 1**).

The recruitment processes in place were robust and prioritised safety. All necessary checks and procedures were followed to ensure that only qualified and trustworthy and suitably skilled individuals were hired. This commitment to safe recruitment practices helped maintain a high standard of care and trust within the service.

Training completion was managed effectively, ensuring that all staff members received the necessary training to perform their roles competently. Staff at Carrick House expressed satisfaction with the training opportunities provided, noting that the training helped them acquire up-to-date skills relevant to their roles. This focus on continuous learning and development contributed to the overall quality of care provided.

Staff at Carrick House felt supported and valued. The service's emphasis on staff wellbeing not only enhanced staff morale but also positively impacted the quality of care provided to individuals.

Areas for improvement

1. To support that the assessment, planning and regular evaluation of staffing is evidence-based, transparent and focussed on people's outcomes, the provider should improve how the decision making process is documented.

This should include, but is not limited to, capturing what measurements and information contributed to the evaluation of staffing and the rationale for professional judgement decisions.

This is to ensure the assessment, planning and evaluation of staffing is consistent with the Care Inspectorate guidance document 'Staffing Method Framework' for adult care homes (2024) and the Scottish Government document 'Health and Care (Staffing) (Scotland) Act 2019: Statutory Guidance' (2024).

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

'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27).

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

In order to protect people from risk of harm, people should receive treatment that is safe and effective. The service should ensure they have robust processes in place that review as required medication, such as required protocols.

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

"Any treatment or intervention that I experience is safe and effective." (HSCS 1.24).

This area for improvement was made on 18 May 2022.

Action taken since then

We reviewed medication practice and documentation and found that practice was robust and safe. 'As required' medication protocols had been put in place and were completed appropriately. This ensured that staff who administered medication had the right information at hand when they needed it, which helped to keep people safe and ensured that their treatment was effective.

This area for improvement was met.

Previous area for improvement 2

The manager should offer activities that are organised and evaluated, to improve physical and mental wellbeing for people. This would enshrine the right of people to take part in activities that are of interest and meaningful to them.

This ensures 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 18 May 2022.

Action taken since then

We saw that people had access to range of different activities. This included outside activities such as outings. However, activity care plans had been changed to an electronic format and we found that they needed more focus on personal outcomes and more detailed evaluations. We will therefore assess this area for improvement again at the next inspection.

This area for improvement was not met.

Previous area for improvement 3

In order to give people confidence that the service is looking to continually improve, the manager should have an up-to-date improvement plan that enables the service to evaluate its quality and performance based on evidence.

This ensures care and support is consistent with the Health and Social Care Standards, which state: "I use a service that is well led and managed." (HSCS 4.23).

This area for improvement was made on 18 May 2022.

Action taken since then

The manager had an up-to-date action plan in place, which showed that the manager had good awareness of the services strengths and weaknesses. The action plan included appropriate actions to drive the ongoing development of this service.

This area for improvement was 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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	6 - Excellent
How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good

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