

Forth View Care Centre Care Home Service

6 Sea Road
Methil
Leven
KY8 3DE

Telephone: 01592 716 500

Type of inspection:
Unannounced

Completed on:
27 March 2025

Service provided by:
Balhousie Care Limited

Service provider number:
SP2010011109

Service no:
CS2011302958

About the service

Forth View Care Centre is a purpose-built care home registered to care for up to 45 older people. A maximum of 10 adults with physical and sensory impairment can be supported in Loch Head Unit.

The home is part of the Balhousie Care Group. The service is located in Methil and can be easily reached using local transport networks from nearby Leven and Kirkcaldy.

Accommodation is provided over two floors. The rooms consist of single ensuite bedrooms with wet room showers. Each floor has a number of seating areas and dining areas to allow residents to make choices about where to spend their time. Small kitchen areas in the lounges are accessible to residents, relatives and visitors to the service.

The garden to the rear of the building is secure and accessible from the dining room on the ground floor. On the day of the inspection 40 people were residing in the home.

About the inspection

This was an unannounced inspection which took place on 27 March 2025 to follow up on the outstanding requirement from the previous inspection. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about the service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with six staff and management
- spoke with five people living in the service
- observed staff practice
- reviewed quality assurance systems
- reviewed support plans.

Key messages

- The service had worked hard to meet the outstanding requirement relating to meaningful activity and improving outcomes for people.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 30 November 2024, the provider must safeguard and promote people's physical, emotional and psychological health by ensuring people spend their time in ways that are meaningful for them. In order to achieve this, the provider must:

- a) ensure people's wishes, interests and previous life history are discussed and documented
- b) use this information to identify and provide opportunities for people to spend their time in ways that are meaningful and purposeful to them
- c) keep accurate and evaluative records of the impact and outcomes of the support provided
- d) provide appropriate training, guidance and support for all staff, ensuring they understand the importance of meaningful and purposeful engagement and
- e) ensure staffing levels are sufficient to provide appropriate, person-centred support for people.

This is in order to comply with Regulation 3, Regulation 4(1)(a) and 4(1)(b) of The Social Care and Social Work Improvement Scotland (Requirement for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: '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 requirement was made on 28 October 2024.

Action taken on previous requirement

This requirement was made as a result of an inspection we carried out on 28 October 2024. It was made because people were not supported to spend their time in ways that were meaningful and purposeful for them. This put people at risk of social, emotional and psychological harm. Appropriate social engagement is vital in maintaining people's health, welfare and safety. However, people did not receive the support they required for a number of reasons including inaccurate assessment of people's needs and staff shortages. There was also a lack of person-centred information about what was meaningful and purposeful for people.

We carried out a follow up inspection on 12 December 2024 and we saw improved consultation and records which supported people to be involved in activities which were meaningful to them. This meant activities could be planned and delivered in a way which respected each person's interests and preferences.

We heard recruitment for one full-time activity post was ongoing. This meant there was only one full-time activity coordinator currently working in the home. Whilst it was the expectation that care staff would support activities, we heard that staff did not always find there was time to do this. This meant people's experiences could be compromised, particularly when the activity coordinator was not available or for people who did not enjoy group events.

The tool used to decide staffing levels did not include information about people's support needs in relation to meaningful activity. We suggested to the interim manager that the dependency tool should be supported by a clear narrative of how additional intelligence has been considered when deciding staffing levels. This could include information such as environmental issues, activities, key team vacancies and intelligence from significant event analysis such as incident and accidents.

It is important that staff are clear about key responsibilities during each shift. Although a staff allocations sheet was in use within the home, it was limited to which area of the home staff would be working in. We suggested the allocation of staff be more directed to areas such as activities to support improved experiences for people.

We felt focused learning on the importance of meaningful activity should be prioritised within the team training plan. This would support improved outcomes for people, with all staff being aware of the importance of people having consistent and regular opportunities for activity meaningful to them.

Whilst we recognised the progress made and commitment to further improve in this area, opportunities for people to take part in group or individual activities were reduced because of the barriers described above.

This requirement was not met and we agreed an extension until 14 March 2024.

During this inspection we were pleased to see the required improvements had been made and outcomes for people were better. A second activity coordinator had been employed and activities were offered 7 days per week. Monthly meetings were held to gain people's views on the activities on offer and devise the monthly activity planners. Activity coordinators' records relating to people's likes, dislikes and abilities had improved, which meant staff could be better informed of people's interests and hobbies and engage accordingly. Staff told us they had time to spend with people in the absence of the activity coordinators and engage meaningfully; people using the service we spoke with verified this. Some personal plans required improvement to reflect changes in what activities people found meaningful to them. This was discussed with management who gave their assurance this would be addressed.

Several clubs had been started, for example a gardening club, ladies club and gentleman's club. Bus passes were being sought for people so they could maintain links with the community and enjoy outings more easily. A committee had also been formed to plan fund raising events; monies raised were spent on items chosen by people residing in the home.

Met - within timescales

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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Dundee
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