

Spiers Care Home Care Home Service

6 Janesfield Place
Beith
KA15 2BS

Telephone: 01505 503 324

Type of inspection:
Unannounced

Completed on:
17 July 2025

Service provided by:
SCCL Operations Limited

Service provider number:
SP2014012299

Service no:
CS2014326143

About the service

Spiers Care Home is registered to provide a care home service to a maximum of 45 older people inclusive of two places for named individuals under the age of 65 years. The provider is SCCL Operations Limited - Anavo.

Situated in a residential area near Beith town centre, the purpose-built care home has good access to local amenities and transport links.

Located on the ground floor of the two-storey building, accommodation comprises of single bedrooms with en-suite facilities, 11 of which include wet floor showers. Each of the three units has a dedicated lounge/ dining area as well as adapted baths for people who may have reduced mobility. Residents have access to an enclosed courtyard and garden area.

The upper floor is used for staff purposes only.

About the inspection

This was an unannounced inspection which took place on 15, 16 and 17 July 2025. The inspection was carried out by two inspectors from the Care Inspectorate who were accompanied by an inspection volunteer. 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 15 people using the service and seven of their family members, and reviewed seven completed questionnaires
- spoke with 29 staff and management
- observed practice and daily life
- reviewed documents
- received feedback from four external professionals familiar with the service.

Key messages

- Residents experienced compassionate, responsive support from skilled and caring staff who were familiar to them and this promoted their health and wellbeing.
- Improved quality assurance processes, combined with a clear understanding of areas for development, fostered a culture of continuous improvement underpinned by effective leadership.
- Across all departments, professional, knowledgeable, and motivated staff delivered positive outcomes for residents.
- Good personal planning informed support tailored to people's individual needs.
- Residents benefit from good facilities and continued investment in the premises.

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 leadership?	4 - Good
How good is our staff team?	5 - Very Good
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?

5 - Very Good

We found major strengths that had a positive impact on people's experiences and outcomes. We evaluated this key question as very good.

Residents, families, and visiting professionals shared positive feedback about how staff responded effectively to healthcare needs. They highlighted the positive impact of good staff practices on individuals' health and wellbeing, as well as the strong, supportive relationships that had developed. During the inspection, we observed staff engaging with residents in a kind, responsive and genuinely caring manner. Comments from those we spoke with included:

'They take very good care of me - I'm a lot better now than I was before I moved here.'

'Staff know mum really well and know when she is out of sorts - they've acted quickly in the past which prevented her health from deteriorating further.'

'I find staff professional, knowledgeable, and responsive and if there is anything they are unsure of they will seek information from relevant individuals in relation to someone's care/support/health.'

'I am of the opinion that residents I am involved with are supported well and cared for in accordance of their needs. Staff email you with updates and if there are any queries from families they go over and above to try and meet their needs.'

Residents' health and wellbeing needs were assessed by skilled and knowledgeable staff. Information gathered during admission and through ongoing assessment enabled staff to develop a strong understanding of each individual. This proactive approach allowed early identification of health concerns, which were appropriately escalated to senior staff or external healthcare professionals. Staff vigilance, combined with good working relationships with community healthcare teams, ensured that residents received safe and effective treatment and interventions.

Staff had completed the expected risk assessments, which informed the development of care plans tailored to residents' identified health and wellbeing needs. This enabled staff to deliver personalised support. We found good preventative health care alongside positive healthcare outcomes, such as falls prevention, stabilised weight loss and improved mental health.

Robust clinical monitoring and meetings allowed staff to monitor individual risks effectively, promoting health and wellbeing through a collaborative team approach. Clear communication was supported by detailed shift handovers and informative daily 'huddle' meetings, ensuring key information was shared and acted upon promptly. This helped clarify future actions and fostered a shared sense of purpose.

Encouraging residents to remain active and offering daily opportunities for both indoor and outdoor recreational activities contributed significantly to their wellbeing and quality of life. Activities staff demonstrated high levels of motivation and a strong appreciation for the value of meaningful engagement and regular community connections. As a result, residents benefitted from a diverse range of creative, enjoyable, and health-promoting activities, with the positive impact evident during our visit.

Medication was well managed, contributing to residents' safety and wellbeing. During the inspection, we observed staff supporting individuals experiencing anxiety or distress with patience and compassion. It was encouraging to see that staff had successfully minimised the use of 'as required' medication for stress and distress, which can carry unwanted side effects. Good protocols were in place for the use and review of these medicines and records could be further improved by including more information in anti-psychotic reviews. Plans were in place to provide further staff training on accurately recording medication balances received and carried forward, to strengthen auditing processes.

Residents should be able to enjoy meals in a calm and unhurried environment. Apart from on one occasion, which was responded to by the management team, we observed staff managing mealtimes attentively, offering discreet and responsive support. Choices were offered, with alternatives provided to maximise food and fluid intake. Residents said food was 'lovely', 'tasty' and that the soups were 'excellent.' Catering staff demonstrated a clear understanding of residents' nutritional needs and preferences, including any special diets. Menus offered good variety, and food, drinks, and snacks were readily available throughout the day and overnight, if required. Where concerns such as weight loss had been identified, staff had responded proactively, and we saw evidence of close monitoring and effective support.

Infection prevention and control (IPC) measures had become well established and we observed high standards of hygiene and cleanliness throughout the care home. Staff were trained in IPC and demonstrated this in their practice. This helped to protect people from the risk of infection.

How good is our leadership?

4 – Good

We found important strengths that had a positive impact on people's experiences and outcomes with some areas for development that would further strengthen the approach to quality assurance. We evaluated this key question as good.

People experiencing care and their families need to feel confident that services are well led. We found that a culture of openness and partnership working had been established, fostering an ethos of mutual trust and respect. Those we spoke with told us they would feel comfortable raising concerns as staff listened and responded professionally. There was a strong sense of confidence in the new management team, with positive feedback about the service. Comments included:

'My overall impression is that the home is resident-centred.'

'Spiers care home provide a very good service to their residents and their families and have a good relationship with other professionals.'

'The new manager is very nice - you see her out and about - she has meetings for residents.'

'There have been notable improvements and we are involved in discussing the way forward - they do value our input.'

Effective quality assurance processes are essential for monitoring, maintaining, and improving performance to achieve positive outcomes for people. A structured framework was in place to guide these processes, with dynamic and closely monitored action plans developed to support and track planned improvements. The new management team had worked hard to establish robust, meaningful ways of monitoring and improving the service. Plans were in place to involve more staff in the future which is good practice in

terms of highlighting the expected standards of performance and supporting staff development. We look forward to seeing the impact of the 'project outstanding' initiative aimed at delivering best practice in an impactful way.

It is important that people experiencing care and their families are well informed about the standards they should expect and are meaningfully involved in shaping the service. This promotes a sense of empowerment and value. We were pleased to find a culture that actively welcomed involvement.

Staff meetings supported good communication and collaboration across departments. Meetings with residents and relatives also took place, providing opportunities for people to share their views and influence the service. Responding to this feedback helped ensure people felt heard and that their input was taken seriously.

There was a clear commitment to continuous improvement, with supportive senior managers having good oversight of service operations and performance. The visible, hands-on management style of the new management team was appreciated by staff. These approaches promoted effective staff practice and safeguarded those receiving care. Good monitoring and management of adverse incidents and events also demonstrated an improvement culture with a focus on reflection and learning.

The management team demonstrated good awareness of strengths and areas where the service could improve. It was positive to see that self-evaluation against the Health and Social Care Standards (HSCS) and the quality framework for inspection had commenced. This should be developed in collaboration with residents, families and staff with reflection on the embedding of ongoing improvement planning on people's experiences and outcomes. The findings should continue to inform the wider development plan, ensuring that people's needs, wishes and aspirations are acknowledged as primary drivers for change.

How good is our staff team?

5 - Very Good

We found major strengths that had a positive impact on people's experiences and outcomes. We evaluated this key question as very good.

People experiencing care should benefit from appropriate staffing arrangements and strong teamwork. Across all departments, we found staff to be professional, knowledgeable, and motivated to deliver high standards of care and support. Feedback from residents, families, and visiting professionals was positive, highlighting the cohesive nature of the staff team. This contributed to stable, consistent care delivered by skilled staff who knew residents well. Some comments were:

'We're like a family in here - I couldn't have hoped for a better place for mum to live.'

'I really struggled at first but my confidence in staff just grew and grew - that's 100% down to (manager) and her team. They persevered and persevered and (husband) came to love the staff and started to trust them.'

'Staff are in and out of rooms - always attending residents. Nothing negative to say. Staff take care of me too.'

'Staff are phenomenal - welcoming with a smile on their face. Can't praise them enough. I'm lucky - 100% comfortable and don't have to worry.'

The management team had implemented a responsive assessment process to ensure the right number, skill mix, and deployment of staff to meet residents' needs. A continuous assessment approach, using the staffing method framework, supported effective workforce and workload planning. Regular and responsive assessments of residents' health and wellbeing needs informed the approach. This helped achieve positive outcomes for residents while also supporting staff wellbeing. Sharing this process regularly with residents, families, and staff through meetings, newsletters, or similar channels would help build understanding and transparency around staffing decisions.

Staff worked respectfully and collaboratively, responding to residents' needs and adapting to their preferred routines. This approach ensured that individual choices and preferences were recognised and upheld.

Staff demonstrated the skills, knowledge, and competence required to provide consistent, responsive support. Staff practice had been monitored in a supportive way by senior colleagues and compliance with training was good. This meant that residents and their families could have confidence in the staff team. External professionals commented:

'Staff are knowledgeable and professional and willing to learn.'

'All the staff within Spiers care home are very welcoming and pleasant to converse with, and nothing is a bother to them.'

The warm atmosphere we observed reflected the positive relationships between staff and residents including meaningful interactions beyond routine care tasks. This showed that staff were not task-focused, but instead prioritised making residents feel acknowledged and valued.

Managers showed genuine concern for staff wellbeing. Staff told us they felt appreciated, supported, and valued by both the management team and their colleagues. Feedback from agency staff who were not so familiar with the service was also positive, noting the friendly and welcoming environment. An agency carer told us, 'Staff are really nice and friendly and helpful - not all homes are like this.'

How good is our setting?

4 - Good

We found important strengths that had a positive impact on people's experiences and outcomes with some areas for development that would continue to improve the home environment. We evaluated this key question as good.

People using care services should benefit from high-quality facilities that meet their individual needs. We saw that Spiers care home offered a warm, comfortable, and homely environment. Investment in the premises since the last inspection had enhanced the quality of the environment and this was appreciated by residents, relatives and staff. Work was ongoing to continue to add more homely touches and points of interest such as bookcases and local artwork. There was good internal lighting, plenty of natural light and a pleasant atmosphere with low noise levels, helping to reduce the risk of anxiety or distress for vulnerable residents. Comments included:

'It's a nice home - it feels comfortable and mum loves her own room.'

'It's always really clean - these lassies work hard to keep it fresh and looking good.'

'The handyman is a good friend to everyone and any defects are sorted quickly. It is well kept which is reassuring as (relative) isn't able to see to his own surroundings so I'm happy he's safe.'

'The upgrades to the lounges have made a big difference - so much nicer.'

All bedrooms were single occupancy with en-suite facilities; 11 with wet floor showers. This promoted residents' privacy and dignity. Staff had worked with residents and their families to personalise bedrooms, helping individuals feel a sense of ownership over their private space. The three separate units supported small group living, and we observed residents spending time comfortably in their rooms and the lounge/diners, enabling both social interactions and privacy, depending on individual preference. The open corridors and lack of barriers meant that residents were able to move freely around the units as they wished.

The environment had been designed to meet people's physical needs with good accessibility into, and throughout the premises and the garden. This allowed residents to move around the home with ease, with support from staff where needed. Any equipment needed to meet people's needs had been provided and well maintained so that staff could support residents' safely.

A well organised and skilled housekeeping team worked diligently to maintain a clean, tidy and fresh environment, helping to reduce the risk of cross-infection and ensuring the home remained pleasant for both residents and visitors. Staff took pride in their work, telling us they felt able to maintain improved standards as a result of the investment in the lounge/dining areas which were now easier to keep clean. People we spoke with praised the housekeeping staff and told us the home was 'always really clean' and 'spotless.'

Regular monitoring and maintenance of the premises and equipment are essential to ensure safety. Robust maintenance arrangements and an experienced and vigilant staff team meant that the setting offered security and safety from avoidable risks or harm. This included equipment used to meet the needs of residents. It was positive to see bedrooms being nicely redecorated with new furniture as they became vacant to continue to invest in the home environment. We received feedback that repairs were attended to promptly and that maintenance staff were approachable, friendly and helpful.

It was touching to find that staff had used their own initiative to add personal touches to residents' rooms, whether that was purchasing themed items informed by individual preferences or framing pictures that reflected on people's past history and special memories. This demonstrated good values and a thoughtful approach that residents and families appreciated, commenting, 'The staff really go over and above - they do the nicest things to make it feel like home.'

We discussed the continued development of a dementia-friendly environment in accordance with good practice, such as the 'King's Fund Environmental Assessment Tool'. This aims to promote people's orientation, independence and engagement with their surroundings.

With the focus having been on improving the quality of the internal home environment, the management team were aware of the need to develop the courtyard and garden areas to make this valuable space more functional and interesting, with a view to promoting relaxation, engagement and occupational outdoor activities. We look forward to seeing the impact of this on people's experiences at the next inspection.

How well is our care and support planned?

4 - Good

We found important strengths that had a positive impact on people's experiences and outcomes, with some areas for development that would further strengthen personal plans. We evaluated this key question as good.

People using care services should benefit from dynamic, innovative and aspirational care and support planning which consistently informs all aspects of the care and support they experience. The personal plans we reviewed provided valuable insights into residents' needs and preferences, highlighting staff's commitment to acknowledging each individual's life history and supporting the routines and relationships that mattered most to them.

Records showed that staff knew individual residents well. People benefitted from care and support planning that was tailored to their assessed needs. Risk assessments and care plans were regularly reviewed and updated, with records showing the involvement of the relevant professionals in response to individual requirements. This ensured that care remained responsive to residents' evolving needs. We highlighted the importance of updating all relevant sections of personal plans following any changes, as some inconsistencies were noted. We acknowledged that staff were being supported to become familiar with the electronic care planning system. Additionally, further development in the consistent use of respectful, dementia-friendly language would enhance the quality of these records.

It was encouraging to see that, alongside identifying support needs, staff had embraced a strengths-based approach in most of the personal plans we reviewed emphasising individuals' abilities and promoting independence. Steps should now be taken to ensure this approach is consistently applied across all personal plans.

We found evidence that residents and their families had been consulted during the development and updating of personal plans, supporting meaningful involvement in shaping care and support. However, this level of engagement was not consistently reflected in the six-monthly review meetings we examined. We emphasised the importance of maintaining collaborative working with people experiencing care and their families in respect of these reviews.

Overall, we found that care plans and six monthly reviews had been evaluated in an outcome focussed way that reflected the impact of planned care on people's experiences. To improve those that could have been more considered, staff should be supported to consistently reflect the outcomes and experiences people wish to achieve when setting and reviewing goals rather than solely focussing on tasks. The minutes of previous reviews should also be revisited to reflect on achievements and ongoing plans.

Managers were supporting staff to more fully reflect the impact of identified needs on daily life, for example, living with dementia, sight loss, life limiting conditions and so on. This was to consider what this meant for each individual and the steps that could be taken to minimise the impact on people's experiences.

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

The service should ensure that people living in the care home have access to opportunities to engage in meaningful activities. This should recognise that these opportunities are provided at weekends as well.

This is to ensure that care and support is consistent with the 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 area for improvement was made on 21 June 2024.

Action taken since then

Activities staff demonstrated high levels of motivation and a strong appreciation for the value of meaningful engagement and regular community connections. As a result, residents benefitted from a diverse range of creative, enjoyable, and health-promoting activities, with the positive impact evident during our visit. Plans to extend community based opportunities were in place.

This area for improvement had been met.

Previous area for improvement 2

The provider needs to demonstrate that their extensive quality assurance procedures are actually resulting in improvements to the service. These audits need to be meaningful and effective in identifying issues or concerns but also to evaluate and analyse the data and information 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).

This area for improvement was made on 21 June 2024.

Action taken since then

Impactful quality audits had been undertaken with dynamic and closely monitored action plans developed to support and track planned improvements. The new management team had worked hard to establish robust,

meaningful ways of monitoring and improving the service. There was a clear commitment to continuous improvement and an improvement culture with a focus on reflection and learning.

This area for improvement had been met.

Previous area for improvement 3

To ensure that staff have the skills, knowledge and understanding to fulfil their role; the provider should ensure that observations of staff practice and competency checks are done at regular intervals.

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).

This area for improvement was made on 21 June 2024.

Action taken since then

Competency checks had been undertaken across a range of areas including infection prevention and control, medication management and moving and assisting. The electronic monitoring system showed a high level of compliance with expected targets.

This area for improvement had been met.

Previous area for improvement 4

To support a consistently high quality of service, the provider should ensure that the continuing assessment, planning and evaluation of staffing is transparent, evidence-based and focussed on achieving good outcomes for people. This should include, but not limited to, taking into account:

- feedback from service users, family and staff
- quality assurance outcomes and clinical governance
- staff wellbeing
- individual needs, abilities, characteristics and circumstances.

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).

This area for improvement was made on 21 June 2024.

Action taken since then

The management team had implemented a responsive assessment process to ensure the right number, skill mix, and deployment of staff to meet residents' needs. Regular assessments of residents' health and wellbeing needs and other factors informed the approach. This helped achieve positive outcomes for residents while also supporting staff wellbeing. The management team agreed to share this process regularly with residents, families and staff, through meetings, newsletters, or similar channels to help build understanding and transparency around staffing decisions.

This area for improvement had been met.

Previous area for improvement 5

The service needs to ensure the consistency of the care and support planning documentation is developed to ensure that these documents are an up to date and accurate portrayal of the manner with which a person is cared for and supported within the home.

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

'I am fully involved in developing my personal plan, which is always available to me' (HSCS 2.17).

This area for improvement was made on 21 June 2024.

Action taken since then

The personal plans we reviewed provided valuable insights into residents' needs and preferences, highlighting staff's commitment to acknowledging each individual's life history and supporting the routines and relationships that mattered most to them. Records showed that staff knew individual residents well and people benefitted from care and support planning that was tailored to their assessed needs. Risk assessments and care plans were regularly reviewed and updated which meant that care remained responsive to residents' evolving needs.

This area for improvement had been met.

Previous area for improvement 6

The provider needs to continue to develop and support staff through supervision and training requirements to ensure that the staff team have the right skills, knowledge and assessment of their performance to continue to provide high standards of care and support to the people they care for.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state 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 28 April 2023.

Action taken since then

Staff demonstrated the skills, knowledge, and competence required to provide consistent, responsive support. Staff compliance with training was good and competency checks were in place. Staff told us that their supervision meetings were useful and supportive of their ongoing learning and development. This meant that residents and their families could have confidence in the staff team.

This area for improvement had 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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very 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?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good
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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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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