

Newhouse Care Home Service

57-59 Galston Road
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Type of inspection:
Unannounced

Completed on:
8 August 2025

Service provided by:
Parkcare Homes No.2 Ltd

Service provider number:
SP2003000147

Service no:
CS2003000773

About the service

Newhouse is registered to provide a care home service to a maximum of 22 adults with learning difficulties who may also have physical disabilities. The service is also registered to support a specific client with mental health issues and/or alcohol related brain damage. The provider is Parkcare Homes No.2 Limited, part of the Priory Group. At the time of inspection, there were 21 people living at Newhouse.

Newhouse is situated in a semi-rural location on the outskirts of Hurlford, East Ayrshire within reach of public transport links and local amenities. The home is a detached villa with additional purpose-built extensions and is set within extensive grounds; it is split into two units, Willow and Rowan. Accommodation is provided over two floors and all bedrooms are single occupancy; one of the bedrooms has an ensuite. At the time of inspection, a further ensuite was being put into one of the bedrooms. The service has two living rooms, shared bathrooms, separate dining areas, conservatory and a spacious outdoor area.

About the inspection

This was an unannounced inspection which took place on 29 and 30 July 2025 between the hours of 09:30 and 19:00. 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 family
- spoke with 17 staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

In addition to this, we received responses to our survey from six people supported, seven relatives and two professionals.

Key messages

- Staff were warm, caring, and responsive, contributing to a positive atmosphere and strong relationships with residents.
- Residents felt safe, valued, and listened to, with good access to healthcare professionals.
- The home environment was clean, welcoming, and well-maintained, with ongoing improvements to facilities.
- Residents enjoyed meaningful activities and outings, supported by a dedicated activities coordinator.
- Care plans were person-centred but required improvement in documenting some health needs.
- Fluid balance monitoring was inconsistently applied, leading to potential confusion in hydration records.

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 setting?	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 positively impacted outcomes for people and clearly outweighed areas for improvement.

People experienced warm, compassionate care from staff who knew them well. Interactions were kind and respectful, and people told us they felt safe, valued, and listened to. Staff were attentive to people's needs and responded promptly when support was required. This contributed to a strong sense of wellbeing and security.

Personal plans were detailed and person-centred, reflecting people's preferences and routines. For example, one person's plan included specific guidance on how they liked to eat meals and take medication, which staff followed consistently. However, in a few cases, health-related information lacked sufficient detail. The manager acknowledged this and had plans to address it through GP appointments and further assessments (see area for improvement 1).

People had access to healthcare professionals, and staff communicated effectively with visiting professionals. Medication was well managed, with clear protocols and accurate records.

Nutrition and hydration were supported through varied menus and individual preferences specific to people's needs. Mealtimes were observed to be calm and sociable, with support provided sensitively. We did find that fluid balance charts had been put in place for all residents regardless of assessed need. This led to inconsistent recording and potential misinterpretation of hydration status (see area for improvement 1).

Activities were meaningful and reflected people's interests. Residents participated in gardening, cooking classes, and outings. One person told us, "I want more hokey cokey," highlighting the value placed on fun and engagement. The service had a dedicated activities coordinator and used "Our Voice" meetings to involve people in planning.

There was a strong focus on emotional wellbeing. People maintained relationships with family and friends, and staff supported this through regular communication and visits.

Areas for improvement

1. To ensure people's health and wellbeing benefits from their care and support, the provider should improve the accuracy and consistency of health-related documentation, including care plans and wound management records. This should include ensuring that:

- a) Care plans for individuals with specific health conditions contain comprehensive information about how the condition presents and how staff should respond.
- b) Wound management is clearly documented, including treatment plans, actions taken, and progress notes.
- c) Fluid balance charts are only assigned to individuals who require them, and are completed consistently to reflect accurate hydration monitoring.

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

'My care and support meets my needs and is right for me' (HSCS 1.19); and '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 positively impacted outcomes for people and clearly outweighed areas for improvement.

The environment at Newhouse was clean, welcoming, and generally well maintained. People told us they felt comfortable and at home, and we observed that the setting promoted a sense of safety and wellbeing. Maintenance records were up to date, and health and safety checks were carried out regularly, which supported a safe living environment.

People's bedrooms were personalised and decorated to their preferences, contributing to a homely atmosphere. Communal areas were well used and furnished comfortably. Although some items were identified for upgrading, these were included in the service's improvement plan. Residents were actively involved in decisions about décor and communal spaces, which helped them feel ownership of their home.

While the home was largely well presented, some areas showed signs of wear. Carpets and flooring in communal areas and bathrooms were tired, with staining noted. However, refurbishment work was underway, including the installation of a new shower room and ensuite facilities. These improvements were part of a planned programme and demonstrated the provider's commitment to enhancing the environment.

Accessibility was good throughout the building. People were able to mobilise freely, and adaptations such as grab rails and appropriate signage supported independence. Although the building's age limited the ability to provide ensuite bathrooms in all rooms, the provider was making the best use of available space to meet current care home guidance.

Residents had access to a large, well-kept garden, which was used regularly for activities and relaxation. The garden included raised flowerbeds, seating areas, and space for games, and was described by people as inviting and enjoyable. Outdoor access was unrestricted, and people were seen using the space during the inspection.

There were quiet areas available for rest and reflection, and we observed sensory relaxation activities taking place.

Cleaning routines were robust and well documented, and PPE stations were available and used appropriately, supporting effective infection prevention and control.

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 make sure people are kept safe, the provider should ensure that there is appropriate space, facilities and procedures for the infection prevention and control of dirty laundry and the management of clean linen to prevent cross infection. This should include having distinct clean and dirty areas for managing laundry.

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

'My environment is secure and safe' (HSCS 5.17).

This area for improvement was made on 22 August 2022.

Action taken since then

Since the last inspection, an extension had been built for a new laundry area. It was a spacious area which allowed for clear segregation of clean and dirty laundry to minimise risk of cross-contamination and allowed for effective infection control practices.

This area for improvement is 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 setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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