

# Rosturk House Care Home Service

Carslogie Road  
Cupar  
KY15 4HY

Telephone: 01334 659 820

**Type of inspection:**  
Unannounced

**Completed on:**  
7 July 2025

**Service provided by:**  
Rosturk House Limited

**Service provider number:**  
SP2004004957

**Service no:**  
CS2003042852

## About the service

Rosturk House is a purpose built, single storey care home and is registered to provide 24 hour care and support for a maximum of 54 older people. Nursing care is delivered by community nursing staff.

The provider is Rosturk House Limited. The home is located in a residential area of Cupar and there are good transport links locally.

All bedrooms are single occupancy and have en-suite shower, WC facilities. There are well maintained gardens around the home as well as an accessible, enclosed central garden.

There were 43 people living in Rosturk at the time of our inspection. The deputy managers were available to support the business of inspection.

## About the inspection

This was an unannounced inspection which took place on 2 and 3 July 2025, between 9:00 and 21:00. 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 seven people using the service and four of their family
- three people and 22 relatives returned questionnaires
- spoke with 19 staff and management and 14 staff returned questionnaires
- observed practice and daily life
- reviewed documents
- spoke with a visiting professional and five returned questionnaires.

## Key messages

- People enjoyed very good care and support.
- Staff were knowledgeable, caring and respectful.
- Quality assurance systems were in place and contributed to high standards.
- Management demonstrated effective leadership and communication.
- The home was clean and well maintained.
- Relatives felt welcomed and involved.
- Reducing the risk of lost belongings was identified as an area for 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?	5 - Very Good
How good is our staff team?	4 - Good
How good is our setting?	5 - Very 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 the service demonstrated major strengths in supporting positive outcomes for people.

It is important that people experience warm, nurturing relationships with the staff who support them. We observed interactions between people and staff which were kind and caring. People told us they felt treated with dignity and respect. People and relatives told us staff knew them well. Comments included, "They are very well looked after". Visitors confirmed they were made to feel welcome. One area for improvement repeatedly identified was in regard to small items of clothing being lost. It is important that people have confidence in the way their personal property is looked after. **(See Area for improvement 1)**

There was good oversight of people's likes and dislikes as well as health needs. From records, observations and discussions we found changes were made in response to changing care and support needs. This meant people could be safe and their health and wellbeing maintained. Prompt referrals were usually made to health professionals meaning that people had the most appropriate health care at the correct time. This alongside the way staffing was arranged meant people experienced responsive care where possible.

People's health and wellbeing should benefit from their care and support. Senior care staff were aware of changes to people's physical health and continued to monitor these appropriately. The service demonstrated good use of recognised risk assessment tools to support identification of physical health risks. A visiting healthcare professional verified people enjoyed very good care and support.

It is important people benefit from prescribed treatments. We found good management and administration of medication. There was regular audit which provided oversight and assurance that any discrepancies could be easily identified and addressed. We observed safe administration, proper storage and very good record keeping, all of which meant medication was well managed and people were kept safe. As required protocols were in place to guide staff manage pain and distress.

There were systems in place for recording and analysis of accidents and incidents including, appropriate actions taken to mitigate risk and keep people safe. Management used information about falls and other indicators to assess outcomes experienced by people.

People should expect to be given help with eating and drinking in a dignified way and have their personal preferences respected. Mealtimes appeared to be busy but a calm and pleasant part of the day. People chatted to each other and enjoyed their meals together. Providing room service for people who chose to remain in their own rooms was well organised. People were encouraged and enabled to eat their meals independently, with just the right level of support from staff, where needed.

People should expect to be supported to get the most out of life. We saw people who were able to move freely both inside and outside the home. We saw evidence of people maintaining relationships outside the home. The temporary activities coordinator was held in high regard with people especially enjoying the regular exercise session. One person commented on how the number of attenders had increased and staff commented on the benefits to people in terms of safer mobility and enjoyment.

Activities records provided evidence of a variety of group and individual activities that had taken place and had been thoroughly enjoyed. Individual records provided some evidence of one to one time with people who were less able or not inclined to join group activity.

All areas within the home were clean, tidy and free from clutter, which ensured that cleaning tasks could be carried out effectively. Care equipment, such as bed mattresses, bed rails and shower chair, were cleaned regularly. As a result, we could be confident that the risk of infection was being reduced and people were kept safe.

### Areas for improvement

1. In order to ensure residents' experience safekeeping of their personal belongings, the service should:

- a) Ensure inventories of personal belongings are subject to review when new items are provided.
- b) Ensure there is an effective laundry system to prevent, as much as possibly practical, the loss or damage of residents' personal belongings.

This is to ensure care and support is consistent with the Health and Social Care Standard (HSCS), which states 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 leadership?

### 5 - Very Good

We evaluated this key question as very good, as the service demonstrates major strengths in supporting positive outcomes for people.

We found very good leadership that clearly demonstrated the principles supporting the Health and Social Care Standards and resulted in very good care and support being experienced.

Management within the home was effective and there was strong leadership. Information gathered from a variety of audits and overviews had been used to sustain improvement within the service. The service had an active improvement plan which reflected their self evaluation, their aim to involve everyone with an interest in the home and continually improve standards. The outcomes for people living in the service were positively affected as a result.

Staff told us they felt confident giving feedback and voicing their opinion. They felt comfortable communicating with management. They benefitted from support and guidance in regard to their training and development.

Relatives reported having confidence in staff and the benefits of good communication. People benefitted from visible leadership from senior care staff. Although the service was subject to the same workforce pressures as experienced throughout the sector, there was a good level of continuity and staff were confident about their role and responsibilities. Management's approach supported the wellbeing of staff, person centred care and a strong sense of community.

There were systems in place for recording and analysis of accidents and incidents, including appropriate actions taken to mitigate risk and keep people safe.

We were reassured by the capacity of senior members of the regular care staff to manage any aspect of the service associated with their role and responsibilities. They demonstrated a commitment to ensuring standards were maintained and improving the quality of life for people living here.

## 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. Despite an ongoing reliance on agency staff, we found staffing arrangements were sufficient and staff worked well together. People held staff in high regard describing them as, "kind" and "hard working".

We found people using the service were protected by safer recruitment checks in place before staff took up post. Agency staff were given sufficient orientation in order to support the people in their care. There remains an opportunity for the manager to involve residents and families in the recruitment and induction process and as part of their ongoing development of a participation strategy.

We sampled staff rotas and spoke with staff. Most staff said that staffing levels were good and that they could safely support people. Staff were visible throughout the home and quickly responsive to people's support needs.

The provider's risk register had regular assessments of physical, social, psychological and recreational needs recorded, to inform the direct care hours for the individual and inform staffing levels. The duty roster provided the information needed to plan for and manage known shortfall or absence.

Staff worked well as a team and felt support by each other and by the leadership team. Regular handover meetings provided an opportunity to share concerns and ideas. More formal staff meetings took place, to address specific issues and receive staff feedback. As a result, people living in the service could be confident that they were being cared for by staff who were well supported.

The manager had a good overview of staff training, including induction. As a result, the manager had a clear view of staff training needs and had made good progress with local priorities to ensure staff could practice safely.

## How good is our setting?

### 5 - Very Good

We evaluated this key question as Very Good, as the significant strengths outweighed any areas for improvement.

People should benefit from high quality facilities which support their outcomes. We found the accommodation had been equipped and decorated to a very high standard. The service was homely and welcoming. The service benefitted from bright spaces with plenty of natural light. There was good signage throughout the home which helped to orientate people.

The home was clean, tidy and very well looked after, with no evidence of intrusive noise or smells. Communal areas within the home were clean, tidy and free from clutter, which ensured that cleaning tasks could be carried out effectively.

Equipment was well maintained, with servicing and safety checks being carried out at planned intervals. This helped to ensure people were safe.

The home had a relaxed, welcoming atmosphere. People had a choice of where they wanted to spend their time. Some people enjoyed spending time in the shared lounge/dining areas, whilst others preferred to be in their own rooms.

We found the overall environment was of a very good standard of upkeep which helped to ensure people could enjoy a pleasant setting. There were regular audits and checks carried out relating to the environment and upkeep of equipment. The service was clean and fresh. There was a domestic model of care and good standards of housekeeping and infection prevention and control. This meant people could be kept safe within a very homely environment.

### How well is our care and support planned?

4 - Good

We evaluated this key question overall as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Reviews, risk assessments to assess resident's care needs were carried out regularly and then used to inform the care plan. Those we sampled showed that people were encouraged to give their views and people told us that they were listened to by staff and management.

People benefitted from detailed assessments of their needs both prior to and on admission to the home. Full care plans were then developed in the immediate weeks following admission.

The way records were designed care was predominantly generic with an emphasis on activities of living. There were clearly efforts to ensure records were completed consistently and that person-centred care was being delivered. This meant records could guide staff in delivering and recording care and support that met people's wishes and assessed needs.

Although improvements in record keeping were identified as ongoing, we were satisfied that they provided sufficient information to support good communication and guide staff practice.

## 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 evidence high quality care and sustain improvements across all aspects of the service, the provider should develop their quality assurance systems to clearly communicate what is being done to support their aims and objectives, why it is important for information to be gathered and how it has been used to direct change.

This should include indicators and/or trends in outcomes experienced by individual people using the service, improvements in staffing, resources and facilities and planned service development.

This is to ensure that care and support is consistent with 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

The manager had developed their quality assurance systems to include indicators and/or trends in outcomes experienced by individual people using the service, improvements in staffing, resources and facilities. Feedback from people using the service, their families, staff and visiting professionals was central to the manager's quality assurance and they had planned ongoing service development. As a result, we found evidence of improvements across all aspects of the service.

**This area for improvement has been met.**

#### Previous area for improvement 2

In order that people experience good outcomes and quality of life, the provider should ensure people are supported to spend their time in ways that are meaningful and meet their outcomes. This should include meaningful engagement with people who experience advanced physical and/or cognitive impairment.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which states 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 6 September 2023.**

#### Action taken since then

We found temporary arrangements in place to support activities had resulted in improved outcomes for people. Care staff were observed supporting one on one activity while offering supervision and managing risk. For example, communicating with people to reduce their distress and encouraging safer mobility. Even in inclement weather, the secure garden was enjoyed independently by those who were able. This again reduced some people's distress and encouraged exercise.

We found staff prioritised time for people cared for in bed, to allow enough time for more than just the basic of care.

Mealtimes were also recognised as the opportunity they were for meaningful social interaction and as a result, people were making friends.

All of which contributed to people's wellbeing.

**This area for improvement has been met.**

#### Previous area for improvement 3

Care plans should include information and guidance for staff about all aspects of an individual's care and support. This should include but is not limited to stress and distress guidance.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which states that: 'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty' (HSCS 3.18).

**This area for improvement was made on 6 September 2023.**

#### Action taken since then

Although improving care plans was described as a, "work in progress" we found good record keeping, including support plans and medication records. Reviews were up to date and reflected a good level of resident and family involvement. We found support plans were up dated to reflect people's changing needs and wishes. This meant records reflected a responsive service and provided information and guidance for staff about all aspects of an individual's care and support.

**This area for improvement has been met.**

#### Previous area for improvement 4

In order to ensure individuals and their representatives experience a service with a culture of continuous improvement with a robust and transparent quality assurance system, the service should; Ensure accidents, incidents and unplanned occurrences are subject to transparent internal investigation and the outcomes used to improve the service, staff practice and to identify preventative measures.

This is to ensure care and support is consistent with Health and Social Care Standard 4.19: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes'.

This area for improvement was made on 30 January 2025.

## Action taken since then

We sampled care records and supporting documents, including accident and incident reporting. We found the manager had developed their quality assurance systems to include indicators such as, accidents, incidents and unplanned occurrences. Relatives described very good communication from management and staff resulting in them feeling well informed and reassured regarding action taken where issues had arisen.

This area for improvement has been met.

## 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
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	4 - 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	5 - Very Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

How good is our staff team?	4 - Good
3.1 Staff have been recruited well	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very 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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