

St Serfs Care Home Service

Kinbrae Park Gardens Newport-on-Tay DD6 8HD

Telephone: 01382 542 276

Type of inspection:

Unannounced

Completed on:

15 August 2025

Service provided by:

St Serfs Care Home Ltd

Service no:

CS2010251669

Service provider number:

SP2010010981



Inspection report

About the service

St Serfs is a Care Home for older people situated in a residential area of Newport-on-Tay, close to transport links, shops and community services. The service is operated by Acre Care Homes. The service provides residential care for up to 26 people.

The service provides a very pleasant environment within a large Victorian house and contemporary extension to the side of the building. Accommodation over two floors in single bedrooms, (two doubles are available for people with established relationships), each with en-suite toilet and wash hand basin. There are good facilities and several very welcoming communal areas. The home sits in it's own grounds and there is adequate on-site parking.

The service aims and objectives reflect the values and principles of the Health and Social Care Standards (HSCS) and include: 'To provide a home for you to live, socialise, dine and rest in safety and comfort'.

The manager was available to support the business of inspection and 22 people were at home when we visited.

About the inspection

This was an unannounced inspection which took place on 12 and 13 August 2025 and between 09:30 - 19:00. The inspection was carried out by one inspector from the Care Inspectorate and was supported 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 17 people using the service and seven of their family
- spoke with 11 staff and management
- · observed practice and daily life
- · reviewed documents.

Key messages

- The management team were visible and approachable.
- Staff were held in high regard.
- Families reported being very happy with the care and support their loved one received.
- People were able to stay connected to their families and the local community.
- Quality assurance systems were in place to monitor standards and support improvements.
- People were cared for with kindness by staff that knew them well.

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?	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?

4 - Good

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

People should experience warmth, kindness and compassion in how they are supported and cared for. When speaking with people and observing interactions between residents and staff, it was evident that people had developed positive and trusting relationships with the staff who supported them. This included both the direct care team and ancillary staff. It was good to see the service had a positive approach to risk management and where people were supported to maintain their independence.

Staff clearly knew the residents well and understood how best to support them. The service used a range of health assessment tools, which were used to monitor people's health and wellbeing. These included, nutrition and hydration, mobility, skin health and stress or distress. Where these assessments identified needs then a specific care plan was put in place and this helped staff to maintain people's wellbeing. Relatives described improvements with people's mobility and weight as a result of the care and support experienced by their loved one.

We found the majority of care records sampled provided clear information about people's care needs, personal routines and preferences. As a result, care plans could help staff deliver care which reflected people's wishes. The provider's own audits had identified some gaps in records and we recognised action to address these, was ongoing.

Staff felt happy in their work, spoke highly of the support they had received from the management and how well the staff within the home worked together. They told us people were cared for to a high standard. This was confirmed by the relatives we spoke with. They told us that they received regular communication and updates from staff and described improvements in their loved ones health and wellbeing.

There was a range of activities evidenced and the activity coordinator was continuing to developing opportunities for people to be involved in their local community. We found a focus on life history work had involved families and was reflected within some of the care records sampled. This should be further developed to ensure staff involvement in activities. (See Area for improvement 1)

Mealtimes were calm and relaxed. Staff took time to make sure that people were happy with their choices and found alternatives if this was not the case. People were encouraged and supported with their food and fluid intake in a sensitive way. This meant that good nutritional and fluid intake was promoted, benefiting people's health.

It is important people benefit from prescribed treatments. We found good management and administration of medication. We observed safe administration, proper storage and good record keeping, all of which meant medication was generally well managed and people were kept safe. As required protocols were in place to guide staff manage pain and distress. Medication records showed that people received their medication as intended by the prescribing GP. The service had systems in place to monitor safe administration of medications.

Areas for improvement

1. In order to promote the health and wellbeing of people using the service, the provider should ensure staff are available to support people receiving care to engage in activities, spend their time in ways that are meaningful and support positive outcomes.

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); and

'I can maintain and develop my interests, activities and what matters to me in the way that I like' (HSCS 2.22).

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.

The manager had been in post for a little over a year. The provider was responsive and regularly supported the home in person. We found very good leadership that clearly demonstrated the principles supporting the Health and Social Care Standards and resulted in good care and support being experienced.

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.

We were reassured by the capacity of senior 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.

Relatives reported having confidence in staff and that there was good communication. They said staff were visible and that they felt confident approaching management if needed. Although the service was subject to the same workforce pressures as experienced throughout the sector, there was 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 complaints, accidents and incidents, including appropriate actions taken to improve people's experiences, mitigate risk and keep people safe.

We found management within the home was effective and there was strong leadership. Information gathered from a variety of audits and overviews had been used to monitor performance 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. Areas for improvement identified at this inspection included, ensuring consistent record keeping, mitigating the risks associated with lost laundry and developing activities. We acknowledged the provider's own improvement plan aimed to monitor standards and take remedial action. As a result, we had confidence that the provider would continue to take steps to improve people's experience of the service.

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. We found staffing arrangements were sufficient and staff worked well together. People held staff in high regard.

We found people using the service were protected by safer recruitment checks and staff were given sufficient induction/orientation in order to support the people in their care. The manager could involve residents and families in the recruitment and induction process and as part of their participation strategy.

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

Staff worked well as a team and felt supported by each other and by the leadership team. Regular handover/flash 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 we found staff compliance rates were high. Staff described supervision and training as valuable in raising their awareness and developing their knowledge. To mitigate the risk of a focus on tasks above outcomes experienced by people, the manager should highlight the importance of the health and social standards as part of training and supervision. This would also promote staff involvement in meaningful activity and support their focus on people's wellbeing. (Area for improvement recorded under section 'How well do we support people's wellbeing?' applies)

How good is our setting?

4 - Good

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

People expressed satisfaction with the facilities and described the service as warm and homely. Families reported feeling welcomed and comfortable during their visits.

The environment was homely and welcoming. The larger lounge and dining room were free from clutter, bright and spacious. There was a choice of communal areas for people to spend their time in. This included smaller quieter areas which we saw a number of people enjoying.

People had personalised their bedrooms, with evidence of people enjoying spending time in them. We found evidence of ongoing redecoration and the provider's improvement plan included the carpets in communal areas. Housekeeping staff had worked hard to ensure all areas were clean.

The overall environment was of a good standard of upkeep which helped to ensure people were safe and enjoyed a pleasant home environment. We found signage in and around the home could be improved. The recent addition of new residents and their families could provide an opportunity for feedback in this regard and support ongoing self assessment and improvement planning.

People had access to outdoor space and enjoyed spending time in the garden. We spoke with a few residents who enjoyed sitting outside or taking walks in the grounds or local area. The provider had reviewed the environment and outdoor spaces as part of their self assessment and improvement plan. (Please see outstanding area for improvement)

In relation to the environment and upkeep of care equipment, we found proper arrangements for safety checks, servicing and maintenance. There was a clear system to report daily issues and records verified remedial action was requested and/or carried out, promptly. The home was clean, fresh and tidy, with no evidence of intrusive noise or smells. There was good housekeeping and infection prevention control measures, all of which meant people could be kept safe.

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.

Staff told us they felt confident in using the electronic system and that there was good communication and record keeping as a result.

We found the majority of care records sampled provided clear information about people's care needs, personal routines and preferences. As a result, we could have confidence in staff understanding the importance of good record keeping and that care plans could help staff deliver care which reflected people's wishes. The provider's own audits had identified some gaps in records and we recognised action to address these, was ongoing.

The service used a range of health assessment tools which were used to monitor people's health and wellbeing. These included nutrition and hydration, mobility, skin health and stress or distress. Where these assessments identified needs then a specific care plan was put in place and this helped to maintain people's wellbeing. We were reassured that people's health needs were supported by regular input from healthcare professionals. We could be confident that family were encouraged to be involved and their views considered.

People benefitted from detailed assessments of their needs both prior to and on admission to the home. As a result, full care plans were then developed in the immediate weeks following admission and for the majority of people.

We found risk assessments to assess resident's care needs were carried out and regularly reviewed to inform the care plans. It was good to see the service had a positive approach to risk management and where people were supported to remain as independent as possible. This was highlighted by one resident who described their designated tasks around the home as helping them to, "feel useful".

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 provider should ensure that people can regularly, freely and safely access outdoor space to maintain their health and wellbeing.

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

'I can independently access parts of the premises I use and the environment has been designed to promote this' (HSCS 5.11); and

'If I live in a care home, I can use a private garden' (HSCS 5.23).

This area for improvement was made on 2 August 2024.

Action taken since then

During this inspection, we found that some people were accessing the garden independently and others with support and supervision from staff.

We recognise the age and design of the home and traditional outside space requires ongoing risk management and resources to maximise the positive outcomes experienced by people living here.

The provider confirmed that increasing accessibility remained under review. Consideration was being given to establishing a secure area as part of the providers ongoing improvement plan.

As recorded at our last inspection, this area for improvement will be carried forward and reviewed at our next inspection.

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
1.4 People experience meaningful contact that meets their outcomes, needs and wishes	4 - Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	4 - 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
3.2 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	4 - 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

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.