

Millfield House Care Home Service

Millfield Gardens
Canongate
JEDBURGH
TD8 6ER

Telephone: 01835862688

Type of inspection:
Unannounced

Completed on:
20 August 2025

Service provided by:
Fairview Care Limited

Service provider number:
SP2023000006

Service no:
CS2023000050

About the service

Millfield House is a care home which provides accommodation for 25 older people. The provider is Fairview Care Ltd.

The home is situated in the Borders town of Jedburgh, close to local shops, cafes and amenities.

Accommodation is provided over two floors. Each floor has a sitting room and dining room. All bedrooms have ensuite toilet and shower facilities. Further shared bathing facilities and additional toilets are available throughout the home. There is an enclosed garden at the rear of the building.

At the time of inspection 21 older people were living in the home.

About the inspection

This was an unannounced inspection of the service which took place between 13 August 2025 and 15 August 2025. 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 eight people using the service and three of their families. We also gave the opportunity for service users, health professionals and staff to complete an electronic questionnaire of which we received 16 responses.
- we talked with staff and the management team
- observed staff practice and daily life
- reviewed a range of documents

Key messages

- People experienced very good health and wellbeing outcomes as a result of their care and support.
- People's health benefitted from very good engagement with other health services.
- Staff worked well together and were flexible in their approach.
- The environment was homely and welcoming.
- Cleaning practices ensured a pleasant living environment for people and improved their wellbeing outcomes.

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 staff team?	5 - Very Good
How good is our setting?	5 - Very 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 significant strengths in aspects of the care provided, and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People experienced very good health and wellbeing outcomes as a result of their care and support. Staff interactions with people experiencing care were warm, gentle and encouraging. The home had a welcoming and friendly atmosphere. Staff worked hard to ensure people were comfortable and provided reassurance to people when required. This approach from staff helped create a nurturing environment where people could thrive.

Staff treated people with dignity and respect and were focussed on achieving the best possible outcomes for the people they were caring for. Care was delivered at a pace suitable for each person. Staff spent time speaking to people and knew people's history and interests. This meant that trusting relationships were formed between people and the staff who cared for them.

Residents told us that they were happy living in the home and that staff were very caring, friendly and attentive. One person told us 'I am happy here. The staff are very good to me'. We received comments from family members who told us 'Mum took a while to settle, but she's much like her old self, she's not fretting any more she's so relaxed, she likes the staff, and her bedroom is lovely'. This gave confidence that people were respected and treated with compassion and dignity as an individual.

A full activity schedule was in place, giving a range of in-house activities. Activities took place in different areas of the home meaning that residents were not just confined to their own floor, they could move around freely and use all the facilities on offer. This meant that people could choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day.

Entertainers regularly visited the home to perform for people. We saw that visiting relatives were also invited to attend these events. The service had made links with local community services such as the local church. We encouraged the home to continue to build on the very good practice displayed in this area.

People's health benefitted from very good engagement with other health services. Feedback from other health professionals told us staff were quick to act on health-related issues and were responsive to any advice given. This approach helped people keep well and ensured their health needs were being met.

The manager regularly checked the medication practice of staff and recorded the findings. We looked at a sample of people's Medication Administration Records and established that staff had given the correct medication to people at the stated times. Processes were regularly audited with clear plans in place when issues were identified. Areas for storing medication were clean and tidy. This good practice helped reduce errors and kept people well as a result.

A range of charts were in place to ensure people's health and wellbeing was continuously monitored. Communication systems including regular handovers, daily flash meetings and department meetings focussed on people's wellbeing. These resulted in actions being taken to support people's wellbeing. One relative told us 'Dad has had some big health concerns this past year, I feel he's still here with us because of the care and support he has received from the staff team'. This evidenced that staff were aware of the current needs of the people they cared for.

People's requirements for eating and drinking were being met. People had ready access to snacks and fluids. Kitchen staff spent time with people to build their knowledge about people's nutritional needs. People experienced a sensitive and dignified dining experience. The provision of good-quality food helped benefit people's health and wellbeing.

How good is our staff team?

5 - Very Good

We found significant strengths regarding the staffing of the service and how this supported positive outcomes for people. We evaluated the performance of the service under this key question as very good.

The recruitment of new staff was carried out in a safe manner with systems in place to reduce risks to people experiencing care. Induction processes ensured staff were equipped to start supporting and caring for people effectively. People were kept safe as a result of induction processes.

Staff completed training that was relevant to their roles. Training records were kept and evidenced a very good level of completion of courses. Systems were in place to monitor staff training, and this helped the management team prioritise learning for staff. The quality of training was described as very good by staff, ensuring they had the right knowledge and skills to support people effectively.

Rotas were in place which ensured that people were regularly cared for by the same staff. This allowed for relationships to be developed between people and the staff caring for them. On the floor, teams were led by seniors who staff spoke positively of. Staff retention levels were good, and this stability resulted in greater comfort for people experiencing care. The staff team was flexible in their approach, ensuring they could adapt to any arising situation.

Staff received formal supervision from their line managers. Staff stated supervision took place on a regular basis. Documentation we sampled evidenced that staff were provided opportunities to evaluate competency and their learning and development needs. This gave confidence that staff had access to up-to-date practice guidance or information.

How good is our setting?

5 - Very Good

We found significant strengths in aspects of the care environment, and how this supported positive outcomes for people, therefore we evaluated this key question as very good.

The building was warm, comfortable and airy. People's bedrooms were filled with their own belongings such as photos, ornaments and furniture. Bedrooms looked very different and reflected people's tastes and interests. This evidenced that people's input was valued by the service.

People living in the home benefitted from being able to access different parts of the home. Garden areas were safe, accessible, well-kept and welcoming. We observed staff actively encouraged people to go outside, to enjoy the space surrounding the home.

The home benefitted from an established maintenance team. Care equipment was subject to regular maintenance checks to ensure items continued to be safe for people to use. The building was clean, tidy and peaceful with no intrusive noises.

Schedules were in place to ensure good standards of cleanliness were upheld. Cleaning practices ensured a pleasant living environment for people and improved their wellbeing outcomes.

A slight odour of urine was detected on the ground floor. The manager advised that arrangements for deep cleaning the carpets were being finalised.

Relatives reported they found the environment to be homely and welcoming. One relative commented 'Millfield House is a lovely well set out home, the coffee areas are immaculate and there is always tea, coffee and homemade cakes set out for relatives which is a lovely touch'.

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 support positive outcomes for people, the service should ensure they have effective systems in place to protect and look after people's personal belongings.

This is to ensure care and support is consistent with Health and Social Care Standard 4.23: "I use a service and organisation that are well led and managed."

This area for improvement was made on 4 February 2025.

Action taken since then

Relatives are reminded to tell staff when they are bringing new items into the home, there are reminders displayed within the notice board, and this topic has been covered during relative meetings. Personal belongings are inventoried, tagged, photographed and recorded within the online care planning system. If staff are asking for relatives to bring pieces in from home for whatever reason, there is a new policy in place to return these items within two weeks.

This area for improvement has been met.

Previous area for improvement 2

To ensure people are supported to drink well, the manager should ensure that people's hydration support needs are adequately risk assessed. The outcome of assessments should be reflected in people's support plans with clear guidance for staff as to how they can support individuals.

This is to ensure care and support is consistent with Health and Social Care Standard (HSCS) which state: "My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices" (HSCS 1.15) and "I experience high quality care and support because people have the necessary information and resources" (HSCS 4.27).

This area for improvement was made on 12 March 2024.

Action taken since then

Nutritional assessments have been updated to reflect individuals' needs around fluid intake. Care plans detailed peoples wishes and preferences in relation to drinking throughout the day. For those that do not require close monitoring of fluid intake records reflect how many cups or glasses have been drunk each day excluding the volume. Senior staff are now completing an audit each evening to ensure records are maintained and including this information within handovers.

This area for improvement has been met.

Previous area for improvement 3

To ensure that medication is managed in a manner that protects the health and wellbeing of service users. The manager should:

- Ensure that medicines are administered as instructed by the prescriber;
- Demonstrate that staff follow policy and best practice about medication administration records and documentation;
- Ensure that staff receive training and refresher training appropriate to the work they perform;
- Ensure that managers are involved in the audit of medication records.

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

"I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11) and

"I experience high quality care and support because people have the necessary information and resources" (HSCS 4.27).

This area for improvement was made on 12 March 2024.

Action taken since then

The manager regularly checked the medication practice of staff and recorded the findings. We looked at a sample of people's Medication Administration Records and established that staff had given the correct medication to people at the stated times. Processes were regularly audited by the manager with clear plans in place when issues were identified. Areas for storing medication were clean and tidy. This good practice helped reduce errors and kept people well as a result.

This area for improvement has been met.

Previous area for improvement 4

People should be reassured that their personal plan contains the most current and up to date information including anticipatory care. Staff should develop anticipatory care plans further to include full and current details of people's health and wellbeing needs and wishes.

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

"My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my choices and wishes" (HSCS 1.15) and

"I am supported to discuss significant changes in my life, including death or dying, and this is handled sensitively" (HSCS 1.7).

This area for improvement was made on 12 March 2024.

Action taken since then

Personal plans had been updated to include information in relation to anticipatory care planning, people's wishes for resuscitation were noted with DNACPRs (Do Not Attempt Cardiopulmonary Resuscitation) completed where this was people's chosen outcome. Contacts for relevant health professionals and family members were noted in plans. This meant that people could be quickly contacted when issues arose.

This area for improvement has 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 staff team?	5 - Very 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

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