

Westbank Care Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
17 October 2025

Service provided by:
Westbank Care Home Limited

Service provider number:
SP2013012002

Service no:
CS2013314644

About the service

Westbank Care Home is registered to provide care and support for 20 older people who have physical needs and/or dementia. This includes a maximum of two places which may be used to provide short term/respite care and three people under the age of 65 as part of Stroke rehabilitation pilot.

The care home is a two storey detached villa situated within a few minutes walking distance to Troon town centre. The home is located on the seafront and benefits from unrestricted views across the Ayrshire coastline to the isle of Arran.

There are two communal lounges and a small dining room on the ground floor. There are eight bedrooms with ensuite toilet and shower facilities and 12 bedrooms with just ensuite toilet. There is an accessible bath located on the upper floor and a large wet floor shower facility on the ground floor.

About the inspection

This was an unannounced inspection, which took place on 15, 16 and 17 October. 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 five people using the service
- Spoke with staff and management
- Observed practice and daily life
- Reviewed documents

Key messages

- Continuity of management and staffing helped to create very good supportive relationships with people living in the care home.
- People were treated well and with dignity and respect, people were well looked after by staff who demonstrated compassion and care in their approach.
- Training programme for staff helped to develop and support continuous improvement.
- Enthusiastic and motivated activities coordinator providing an array of opportunities.
- Manager and senior staff providing professional and supportive role models within the service.
- Staff team working well together and provide support and help to each other when needed.
- Environment is clean and well presented creating a nice comfortable and homely atmosphere.
- Care and support plans contain person focused information about individuals that staff know really 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?	5 - Very Good
How good is our leadership?	4 - 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?

5 - Very Good

We evaluated this key question as very good where significant strengths in aspects of the care provided and how these supported positive outcomes for people clearly outweighed any areas for improvement.

People living in Westbank Care Home benefit from a consistently good standard of care and support that promotes their health, wellbeing, and dignity. Throughout the inspection, people were observed to be relaxed and comfortable and well cared for. The atmosphere in the home was warm and welcoming, with staff demonstrating genuine compassion and care for the people they looked after.

A major strength of this service is the continuity of the staff team. This enables a thorough knowledge and understanding of each individual's care and emotional needs. This contributes to an effective person focused approach and also early identification of changes in individuals health presentation. This continuity ensures that care is not only clinically sound but also emotionally supportive.

Staff were able to speak confidently about individual's histories, preferences, and health conditions, demonstrating a strong person-centred approach. Which was reflective of the interactions and engagement we witnessed. Staff clearly knew people well and treated them with dignity and respect and this helped to create a warm, caring compassionate ethos within the service.

Activities were varied and inclusive, led by an enthusiastic and motivated coordinator who knew people well. Life story work was evident, and outings such as tricycle rides along the shorefront were popular and meaningful. Staff also participated in these activities, reinforcing a sense of community and shared enjoyment.

People experienced very good outcomes because of the consistent, compassionate, and person-centred care provided by a stable and knowledgeable staff team. Health needs are well managed, and individuals are supported to live well, with dignity and purpose.

Medication administration was observed to be safe, respectful, and person-centred. Staff took time to ensure residents received their medication in a manner that suited them, with clear documentation of preferences (e.g., with water or juice). As required medications known as (PRN) were administered with appropriate protocols in place and well understood. There were some that could be further enhanced regarding the detail around personal triggers and needs. Controlled drug counts were well managed, and discussions were held around streamlining processes to reduce time pressures on nursing staff.

The manager and nursing team demonstrated strong clinical oversight, with good communication and coordination with external health professionals. Care plans reflected current health needs, including dysphagia, stress and distress, and Alzheimer's disease, with appropriate input from dieticians and other specialists.

The dining experience was observed at multiple times and was consistently positive. Although the dining room is small, staff adapted well, offering flexible arrangements that respected individual choice. Evening snacks were served on individual trays, enhancing dignity and reducing mess, a thoughtful touch that reflects the ethos of valuing each person.

How good is our leadership?**4 - Good**

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

The manager provided information and documentation to support a well-established quality assurance framework, with monthly audits covering care plans, environment, nutrition, staffing, and many more.

There was a detailed Quality Improvement Plan in place, which was aligned with the Care Inspectorate's framework for inspection criteria. This helped the manager and staff team to focus on implementing a continuous improvement ethos and culture within the service.

The manager demonstrated good leadership and is a positive role model with good oversight of the clinical needs of individuals and a clear understanding of the service and its challenges. Staff spoke positively about the support they received and the manager's proactive approach to resolving issues.

The manager also has a very good understanding of all the individuals' needs of the people living there. This contributed to ensuring that all clinical care is kept up to date and people's care needs are supported. Existing tools such as the Safety Cross and Falls Prevention Toolkit were in place and used effectively to monitor and evaluate individuals' outcomes. Quality assurance systems were embedded and led to improvements. The manager provides effective leadership and supports staff to maintain high standards of care and service delivery.

The manager had good relationships with people's relatives, knew them well and communicated with them, keeping them updated with any changes or developments within the care home. Some relatives commented regarding the management of the home: "Always feel listened to and any concerns or problems have been dealt with promptly. The manager is approachable, kind and available when needed."

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.

As this is a small care home service, the manager plays a pivotal role throughout the recruitment process. This helps to ensure there is a good standard of consistency and approach when implementing procedures that follow the safer staffing legislation and best guidance standards regarding recruitment.

These procedures ensure that anyone employed to work with vulnerable adults in this care home were appropriately checked and vetted through the appropriate procedures such as: police records, past employment references, right to work and sponsorship for overseas workers and any registration requirements such as SSSC for carers and NMC for nurses.

We sampled several files and noted them to be complete and accurate in regards to these requirements. This helps to ensure people are properly recruited and suitable for working with vulnerable adults. This also contributes to the continuity of staffing and promotes staff retention as well as creating a stable team of care staff that also contributes to the continuity of care being delivered. The implementation of appropriate recruitment procedures contributed to the development of a consistent and well-functioning team that supports positive outcomes for people living there.

We reviewed the training records and found them to be comprehensive and well organised. Staff were supported to complete mandatory training and additional topics relevant to people's assessed clinical needs, such as continence, falls prevention, and dementia care. Nurses were supported to maintain their clinical procedure competencies including venepuncture and catheter care.

Additional training is accessed through various external professional support services and other providers. Ensuring that all staff have up-to-date knowledge and skills. Staff were competent and well trained, with access to development opportunities that enhance their ability to meet residents' needs effectively and compassionately.

Supervision and oversight were in place and the manager maintains regular contact with all staff which helps to support good team dynamics and creates a good ethos and culture of support and learning that encourages staff development. See area for improvement 1.

Staffing levels were appropriate for the size of the service and the needs of the people living there. The manager kept up to date dependency assessments and these were used to inform rota planning and the deployment of staffing resources.

We noted that staff worked really well together and supported each other by being flexible and responsive to ensure shifts were covered. This helped to limit the use of agency staff. We also received very positive feedback from relatives who wrote: "They are Kind, friendly, knowledgeable and caring. We could not ask for any more. Staff are exceptional. Good fun and kind with the residents. Nice and friendly team."

Observations confirmed sufficient staff presence across all times of day, with good teamwork and communication evident in their daily practices. This ensures that individual's needs and any changes are promptly communicated between staff and appropriate action taken if required.

The staff team demonstrates strong cohesion and mutual support, with individuals stepping into different roles when needed. This flexibility ensures continuity of care and helps to foster a positive team dynamic.

Overall, we found people were supported by a consistent, caring and responsive staff team. Staffing arrangements promoted safety, continuity, and high-quality care.

Areas for improvement

1.
The manager should continue to develop and implement the staff supervision programme to ensure there is evidence to support the good work and standards of care provided by the staff team that we observed during this inspection.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'My needs are met by the right number of people.' (HSCS 3.15) and 'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11)

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.

The home is clean, well maintained, free from any offensive odours and has a homely and relaxed atmosphere. Bedrooms are nicely presented and helps to create a personalised space for people. There is a small dining room and this is set up nicely and well presented to create a relaxed and comfortable atmosphere. Staff were responsive and attentive to individuals level of support and this helped to ensure that people have a positive dining experience.

The environment supports comfort and dignity, with thoughtful touches that enhance the daily lives of the people who live there. People live in a safe, comfortable, and well-maintained environment that supports their wellbeing and sense of home.

We reviewed the regular servicing and maintenance records and found them to be up to date and accurate. The fire safety documentation and folders with servicing certificates for fire safety, individuals evacuation needs, electrical systems, and fire alert and equipment were sampled and found to be in order. We discussed with the manager arranging these records in separate folders for ease of access. See area for improvement 1.

We would continue to advise the provider to implement a programme of regular refurbishment and decoration to enhance the positive aspects about his care home. See area for improvement 2.

Areas for improvement

1. To arrange the maintenance servicing certificates into one handy folder that is easily available and can be quickly monitored. Continue to keep the home fabric and fittings in good order and regular re-decorating to ensure the home environment is maximised and as well presented as possible.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSC 5.24

2. The provider should continue to invest in the environment and implement a regular programme of refurbishment and decoration to ensure the environment is maintained and well presented.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSC 5.24

How well is our care and support planned?

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 reviewed the care and support and saw they were person-centred and reflected the individual needs, preferences, and outcomes. These were written respectfully and included good details about what mattered to each person, including routines, likes and dislikes, and how they wished to be supported.

There was evidence of meaningful involvement from people using the service and their families or legal representatives, with regular reviews and evaluations taking place to ensure plans remained relevant and responsive to individual's changing needs.

We saw that there was good clinical oversight and background information was well documented. Nursing input was evident in the development and oversight of care plans, particularly for those with more complex health needs. Plans included appropriate clinical risk assessments and protocols, such as for falls, nutrition, continence, and tissue viability.

Where people required support with pressure care, there were clear instructions for staff, including repositioning schedules and use of specialist equipment. Nutritional needs were well considered, with dietary plans tailored to individual requirements, including fortified diets, texture-modified meals, and support for people with diabetes or other health conditions.

Legal documentation, including Adults With Incapacity certificates and Power of Attorney details, were in place and up to date. Where relevant, anticipatory care plans and end-of-life preferences were sensitively recorded, reflecting the wishes of the person and their family. This supported staff to deliver care in line with people's values and beliefs.

Communication with external health professionals was generally good. There was evidence of timely referrals to community nursing, dietetics, and tissue viability services, and updates to care plans following changes in health status. Staff worked collaboratively with GPs and other professionals to ensure continuity of care and appropriate clinical oversight.

Overall, while there were some minor inconsistencies in the level of detail across plans, the service demonstrated a good standard of care planning. Continued focus on embedding clinical evaluations and ensuring all plans are consistently updated will support further improvement.

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 the safety of people's medication, the provider should ensure that the temperature in the room used for the storage of medication is consistently within safe levels.

This should include, but is not limited to, daily recorded temperature checks, including documenting of any actions taken

This area for improvement was made on 28 October 2024.

Action taken since then

We reviewed the medication procedures in place and the regular temperature checks on the room and fridge was taken daily and within safe limits. We reviewed and sampled the medication administration recording sheets and controlled medication procedures. These were in place and records were well documented and person centred in terms of how people liked to take their medication.

This area for improvement has been met.

Previous area for improvement 2

To support the quality of people's outcomes, the provider should ensure that quality assurance processes and systems are regularly reviewed and evaluated.

This should include, but is not limited to, using benchmarking and regular monitoring of external guidance to adjust and improve quality assurance processes.

This area for improvement was made on 28 October 2024.

Action taken since then

We reviewed the various quality assurance procedures in place and noted the manager completed several audits with outcomes and action plans developed from the results of the auditing activities. As a small service the manager has a very good oversight and insight into the issues within the service. This helps to ensure there is a consistent approach to individuals care and support. This will be an ongoing part of the service development.

This area for improvement has been met.

Previous area for improvement 3

To support that the assessment, planning and regular evaluation of staffing is evidence-based, transparent and focussed on people's outcomes, the provider should improve how the decision making process is documented.

This should include, but is not limited to, capturing what measurements and information contributed to the evaluation of staffing and the rationale for professional judgement decisions.

This area for improvement was made on 28 October 2024.

Action taken since then

The manager had implemented a dependency tool to help assess the needs of individuals and this helps to inform on dependency levels and staffing deployment and resources. The manager demonstrated a good understanding of the needs of individuals and the staff team worked well together and also flexibly within the service to meet the needs of the people who live there.

This area for improvement has been met.

Previous area for improvement 4

To support the robust and effective management of people's health conditions, the provider should improve the quality of care plans and the use of pain assessment tools.

This should include, but is not limited to, ensuring that detailed care plans for health conditions and associated nursing interventions are in place, with evidence of regular evaluations.

This area for improvement was made on 28 October 2024.

Action taken since then

We reviewed several care plans and noted from medication administration documentation and in particular prescribed medication known as required of (PRN) often these were for pain relief or agitation. There was a good level of knowledge of the people living in the care home by the manager and the staff team who knew people well and could identify when an individual was in pain or not 'their usual self' and this prompted further action to resolve this.

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 leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - 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	4 - Good
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good
4.2 The setting promotes people's independence	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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