

Earlsferry House Care Home Care Home Service

Williamsburgh
Elie
Leven
KY9 1BA

Telephone: 01333 330 124

Type of inspection:
Unannounced

Completed on:
12 November 2025

Service provided by:
Earlsferry House Care Limited

Service provider number:
SP2020013472

Service no:
CS2020378969

About the service

Earlsferry House Care Home is situated in the small seaside village of Elie and overlooks Elie Bay. Local amenities are available a short distance away. The home offers 24-hour nursing care for older people and respite care, on a bed availability basis.

Earlsferry House Care Home provides accommodation on two floors and has 26 rooms, 17 with en suite facilities. There were 20 people living in the service at the time of the inspection. There is an attractive landscaped garden and decking area to the rear of the home, accessible directly from the downstairs dining room and from the conservatory. There is adequate parking for visitors to the front of the building.

About the inspection

This was an unannounced follow up inspection which took place on 12 November 2025. The inspection was carried out by two inspectors 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 three people using the service and one of their family members
- spoke with seven staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

Staffing arrangements were sufficient however further work was required to ensure an efficiently organised day.

The home was clean and well presented.

Documents and daily charts required further attention.

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 good is our staff team?	3 - Adequate
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Further details on the particular areas inspected are provided at the end of this report.

How good is our staff team?

3 - Adequate

This was a follow up inspection looking at requirements and areas for improvement made at the last inspection.

We saw that people's care and support needs were regularly reviewed, and this informed the number and skill mix of staff scheduled to be on duty. Efforts had been made to address staff shortages within the domestic team, and we were assured that the service was clean and well presented. Recruitment was ongoing, but this aspect of staffing the home remained a concern. Although the management team were confident that domestic staff were on duty each day, this was difficult to evidence through documentation. An area for improvement is made. See area for improvement 1.

We were assured that care staff were not allocated to domestic tasks, which ensured that people's direct care needs were prioritised. Staff spoke about working together to provide care at key times. Staff from the catering and activity teams provided assistance during meals to ensure that people's needs were met promptly.

Overall, although the team worked well together, there were issues with the organisation of the day and the allocation of tasks. A new system was due to be introduced but had not yet been implemented. Further work was necessary to ensure that quality assurance systems fully assessed whether staffing arrangements were effective. An area for improvement is made. See area for improvement 2.

Areas for improvement

1. To support good outcomes for people, the provider should ensure that domestic staffing arrangements are sufficient and that these arrangements can be clearly evidenced.

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' (HSCS 5.22).

2. To support the health and wellbeing needs of people, the provider should ensure that robust quality assurance processes are in place to monitor the effectiveness of staffing arrangements. Staff should be organised and deployed in a way which ensures safe and effective working practice.

This is to ensure that care and support is consistent with the 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).

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 10 November 2025, to ensure that people's care and support needs are met, the provider must ensure staffing arrangements are safe and effective. To do this, the provider must, at a minimum:

- a) Regularly assess and review people's care and support needs.
- b) Demonstrate how the outcome of people's assessments are used to inform staffing number and arrangements.
- c) Ensure that ancillary staff arrangements are sufficient to support positive outcomes for people.
- d) Implement quality assurance systems to evaluate care experiences and assess if staffing arrangements are effective in providing responsive, person-centred support.

This is in order to comply with section 7(1)(a) of the Health and Care (Staffing) (Scotland) Act 2019.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: 'My needs are met by the right number of people' (HSCS 3.15).

This requirement was made on 15 September 2025.

Action taken on previous requirement

Some parts of this requirement are met. We have made two new areas for improvement to address the outstanding concerns. Please see key question three for details.

Met - within timescales

Requirement 2

By 10 November 2025, the provider must:

- a) Ensure that the internal premises, furnishings, bathrooms and equipment are clean and safe.
- b) Ensure that processes such as cleaning schedules and regular quality assurance checks of cleaning are in place and are effective.
- c) Ensure that safe infection control practices are adhered to by all staff at all times.

This is in order to comply with Regulation 4(1)(a) and (d) (Welfare of Users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is in order 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' (HSCS 5.22).

This requirement was made on 15 September 2025.

Action taken on previous requirement

We found that improvements had been made to maintain a clean and tidy home. Private bedrooms and bathrooms were clean and fresh, and there were no issues of concern. Care equipment appeared recently cleaned, and communal areas were clean and free of clutter. One relative said, 'It's lovely here, I'd recommend it'.

The provider had governance and quality assurance processes in place for infection prevention and control. These included audits, cleaning schedules, and staff competency checks. Staff had access to suitable equipment and appropriate cleaning products.

Recruitment to the domestic team was ongoing, and interim measures were in place to ensure standards were maintained until this was completed. We found that the contingency arrangements supporting housekeeping were effective, which meant that the internal premises, furnishings, bathrooms, and equipment were clean and safe.

This requirement is met.

Met - within timescales

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 ensure positive outcomes for people who use this service the provider should ensure that documentation and records are accurate, sufficiently detailed and reflect the care/support provided. The provider should be able to show evidence of regular on-going monitoring and evaluation of records to demonstrate that appropriate actions are taken, or changes to care are made, as a result of the information being recorded.

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS), which state that: 'My care and support meets my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 15 September 2025.

Action taken since then

The service had made very limited progress in this area for improvement. Many documents were incomplete and did not reflect the care and support provided. There was insufficient evidence to show that records were monitored or evaluated. Due to inaccuracies within the documentation, we could not be assured that all appropriate actions were taken in response.

The service stored all daily documentation in a central location, which affected the staff's ability to complete these immediately after care. Errors and omissions were more likely due to the delay in completing records. We raised this with the management team during the inspection.

This area for improvement remains unmet.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How good is our staff team?	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate

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