

Saltgreens Care Home Care Home Service

Chapel Street
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Type of inspection:
Unannounced

Completed on:
16 December 2025

Service provided by:
Scottish Borders Council

Service provider number:
SP2003001976

Service no:
CS2019378038

About the service

Saltgreens Care Home is situated within the Scottish Border's town of Eyemouth. The care home provides a care service to a maximum of 35 older people.

Accommodation is provided over three floors with five individual units. All units provide single bedrooms with ensuite toilet and wash hand basin facilities. Communal bathing and showering facilities are also available within each unit. All units have a small kitchenette and dining/lounge area. There are kitchen and laundry amenities within the main building.

The care home is located close to shops and local amenities with views of the harbour. There are outdoor areas to the front and sides of the building. Limited parking facilities are available, however, there is paid parking available close by.

On the day of inspection there were 30 people living in Saltgreens care home.

The service provider is Scottish Borders Council.

About the inspection

This was an unannounced inspection which took place on 08 December, 09 December and 12 December 2025. Our visit was then followed by time examining evidence remotely.

The inspection visits were carried out by one inspector from the Care Inspectorate whilst another inspector contacted relatives by phone. We gave feedback to the manager on 16 December 2025.

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 six people using the service, six relatives, 24 staff and management.
- considered feedback from completed and returned questionnaires from seven supported people and 21 staff.
- observed practice and daily life
- reviewed documents
- received feedback from six visiting professionals.

Key messages

- Four outstanding areas for improvement were met at this inspection.
- Staff demonstrated an understanding of people's needs and preferences and offered support in a manner which was both warm and attentive.
- Current staffing arrangements were appropriate and effectively supported the needs of people using the service.
- Efforts had been made to enhance and improve the environment, resulting in a positive and comfortable setting

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 staff team?	4 - Good
How good is our setting?	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.

During the inspection, it was evident people experiencing care benefitted from kind and compassionate interactions with staff. Staff demonstrated an understanding of people's needs and preferences and offered support in a manner which was both warm and attentive. Interactions were unhurried, allowing people to receive care at a pace which suited them, promoting comfort and reassurance.

These practices reflected a strong commitment to person-centred care and contributed positively to the overall wellbeing and experience of those living at Saltgreens Care Home.

People told us they were happy and relatives shared how they felt reassured their loved ones were safe and looked after well.

The activity coordinator worked with staff to ensure residents received meaningful engagement, including one-to-one interaction. A range of community groups visited the home, such as local schoolchildren, which promoted intergenerational contact and social stimulation. People were also supported to access their wider community, for example enjoying trishaw rides provided by volunteers. Management were committed to further strengthen meaningful engagement within the home, ensuring opportunities for social connection and enrichment continued to develop. A previous area for improvement had been met.

Relatives' meetings had recently been re-introduced. Chaired by an impartial local volunteer, and, provided families with a valued forum for open communication and collaborative decision making

Medication processes were carried out in accordance with best practices, with continuous monitoring and documentation to ensure transparency and accountability at every stage.

Guidance within PRN (as required) medication protocols provided clear instructions for staff to follow regarding appropriate administration and any necessary prior interventions. Where PRN medication was administered frequently, we advised this to be formally reviewed to determine whether continued PRN use remained appropriate or whether conversion to a regular daily prescription would better meet the person's needs.

The service demonstrated effective oversight of people's clinical health needs, with various recording documents in place to monitor and respond to changes. Staff were vigilant in observing alterations in individuals' presentations, ensuring appropriate and timely care was consistently delivered.

Staff worked collaboratively with multidisciplinary health professionals, including GPs, district nurses and specialist services. This ensured people benefitted from coordinated support tailored to their individual needs.

A new electronic care planning and recording system had recently been introduced. Care and support plans which had already been transferred into the system were clear, comprehensive, and provided detailed guidance on each person's care and support needs.

However, we found that some paper-based care and support plans contained conflicting guidance. This inconsistency had the potential to cause confusion for staff and undermine the accuracy of the information held.

We advised sufficient time, and resource should be allocated to review all care and support information as it is transferred to the new system. This will ensure consistency across records and maintain the integrity of guidance available to staff.

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.

The recruitment of new staff was carried out in a safe manner with systems in place to reduce risks to people experiencing care.

Staff received training through a blended approach, combining face-to-face sessions with e-learning modules. Feedback from staff was positive, and there was good compliance of mandatory training being completed. Refresher sessions were scheduled where needed to ensure staff remained up to date. We advised any additional training completed should be included within the manager's training matrix to acknowledge and reflect the ongoing development of staff.

There was good compliance and oversight of staff competency including any ad hoc observations recorded. This gave assurance staff were competent and confident in their role and demonstrated commitment to maintain high standards. A previous area for improvement had been met.

Staff rotas were planned in advance, with consideration given to the specific skills and competencies of team members. Based on our observations and discussions, current staffing arrangements were appropriate and effectively supported the needs of people using the service.

Staff were observed to work well together and collaborated throughout the service. Morale was positive and staff told us they felt supported in their role. This cohesive team approach contributed to effective service delivery and a shared sense of purpose. A previous area for improvement had been met.

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 presented a welcoming and warm atmosphere. It was evident efforts had been made to enhance and improve the environment, resulting in a positive and comfortable setting

Regular maintenance checks of the building fabric and equipment used were carried out, ensuring the environment remained safe and well maintained. Effective infection prevention and control (IPC) measures were in place, supported by management oversight. These checks ensured people could be confident their home was safe to live in.

Domestic staff demonstrated clear knowledge of their roles and confirmed adequate stocks of IPC and personal protective equipment (PPE) were available, which was evident in well maintained stores. A previous area for improvement had been met.

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 people experience high quality care, the provider should ensure staff have their competency assessed through regular competency observations. Competency checks should be recorded and linked into training, one to one supervision and personal development.

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

"I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).

This area for improvement was made on 22 April 2024.

Action taken since then

A range of competency observation was being completed and there was good oversight of ad hoc observations being recorded. See key question three: how good is our staff team?

This area for improvement had been met.

Previous area for improvement 2

To support people's health and wellbeing, the provider should ensure that there is a sufficient number of staff on duty with the appropriate knowledge and skills, and that staff are effectively led and deployed.

This should include, but is not limited to:

ensuring that the service undertakes observations over a 24-hour period to support decision making in relation to the number of staff required, and take account of the layout of the building when making decisions in relation to staffing levels.

This is to ensure care and support is consistent with Health and Social Care Standard which states:

"My care and support meets my needs and is right for me" (HSCS 1.19).

This area for improvement was made on 22 January 2025.

Action taken since then

At the time of inspection, there were sufficient staffing levels to ensure people's health and wellbeing was met. See key question three; how good is our staff team?

This area for improvement had been met.

Previous area for improvement 3

To support people's health and wellbeing, the provider should ensure that people are supported to engage in activities that are meaningful to them.

This should include, but is not limited to:

Ensuring staffing levels support people to engage in activities, people are consulted on how they would like to spend their time, and people have opportunities to access the local community.

This is to ensure care and support is consistent with Health and Social Care Standard which states:

"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 22 January 2025.

Action taken since then

An activity coordinator had been employed and worked alongside staff to ensure people received stimulating interaction. Various community groups visited the home and people were supported to enjoy their local community.

Management were committed to further strengthening meaningful engagement within the home. See key question one: how well do we support people's wellbeing?

This area for improvement had been met.

Previous area for improvement 4

To support people's health and wellbeing, the provider should ensure there is a sufficient supply and adequate storage of equipment and basic items.

The environment and equipment should also be appropriately maintained.

This should include, but is not limited to:

Ensuring equipment and basic items supply and storage is monitored, maintenance actions identified are implemented, and there is improved oversight of maintenance concerns and equipment checks.

This is to ensure care and support is consistent with Health and Social Care Standard which state;

"I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment" (HSCS 5.22).

This area for improvement was made on 22 January 2025.

Action taken since then

There was sufficient stock of items including for infection prevention and control within the home.

Equipment checks were completed within timescales and were found to be in working order. See key question four: how good is our setting?

This area for improvement had 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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our staff team?	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

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