

Willow House Care Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
8 January 2026

Service provided by:
Holmes Care Group Scotland Ltd

Service provider number:
SP2020013480

Service no:
CS2023000114

About the service

Willow House Care Home is situated on the outskirts of Anstruther. The service provides nursing and social care. The home comprises of two floors, each having its own communal sitting and dining areas. The upper floor can be accessed by a passenger lift. Bedrooms are all ample size with ensuite toilet and shower facilities.

The home benefits from well kept, landscaped surrounding garden areas, with garden seating. There are car parking facilities at the front of the home. The service is provided by Holmes Care Group Scotland Ltd.

About the inspection

This was an unannounced which took place on 8 January 2026. 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 three people using the service and one of their family members
- spoke with five staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

The required improvement has been met. See section 'What the service has done to meet any requirements made at or since the last inspection'.

We saw some progress across all areas for improvement made at our last inspection. Further work is required to embed this improved practice and ensure that the improvements made, support good outcomes for people. See section 'What the service has done to meet any areas for improvement we made at or since the last inspection'.

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

Requirements

Requirement 1

By 15 December 2025, you must ensure that people experience care in an environment that is safe and minimises the risk of infection. In particular you must:

- a) Ensure that furnishings and mattresses are clean and safe.
- b) Ensure that processes such as enhanced cleaning schedules and robust quality assurance checks of furnishings and mattresses are in place and any identified issues are remedied without delay.
- c) Ensure that clinical waste is managed safely following national guidance.

This is in order to comply with Regulation 4(1)(a) and (d) and Regulation 10 (2)(b) and (d) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 211/210).

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 25 September 2025.

Action taken on previous requirement

We saw good oversight was in place to monitor the condition of mattresses and soft furnishings within the service. This involved the manager conducting additional daily checks and assigning mattress cleaning and inspection tasks to care staff.

Spot checks were carried out during this inspection, and no concerns were found.

A program of replacement for soft furnishings was in place, and we noted a supply of extra mattresses were now held in the service.

Systems were now in place to monitor the disposal of used PPE within the correct clinical waste areas.

No malodours were observed during this inspection. We observed a service that was clean and well-maintained.

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 promote positive outcomes for individuals, the provider must ensure that care records are accurate, sufficiently detailed, and clearly reflect the care and support planned and delivered. Additionally, there should be evidence of regular, ongoing monitoring and evaluation of these records to effectively track health and wellbeing.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: 'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This area for improvement was made on 25 September 2025.

Action taken since then

We saw improvement to the consistency of completion of personal care, topical medication and bowel care records.

The senior care team were able to confidently relay how these care records were monitored and actions taken to address any changes to care needs. For example, administration of laxative where records indicated possible signs of constipation. This gave us confidence that records were being effectively used to track and inform people's health and wellbeing needs.

The service should ensure that this level of detail is fully reflected upon within each person's specific care plans and care reviews. Area for improvement 4 applies.

MET.

Previous area for improvement 2

To ensure sufficient, safe and effective oversight of people's medication, the provider must ensure robust systems are in place to monitor medication over stock and accurately record carry forward balances on medication administration records.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This area for improvement was made on 25 September 2025.

Action taken since then

Although we saw better systems were in place, with introduction of overstock count sheets, some minor errors were still observed. This included inconsistency in the recording of carry forward totals on medication administration records. We also found examples of medications held in overstock that did not match with the overstock count sheet.

This area for improvement remains in place to allow for new systems to be fully embedded and ensure consistently accurate recordings of medication overstock.

NOT MET.

Previous area for improvement 3

The provider should ensure that people are supported by a staff team that are skilled and confident. Development opportunities should include but not be limited to: Engagement and meaningful days, dementia care and stress and distress.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: '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 25 September 2025.

Action taken since then

We saw that workshops had taken place to enhance care staffs' knowledge and confidence around supporting people with meaningful days. The manager of the service shared with us plans to focus more on supporting people with their individual health and wellbeing outcomes.

Care staff had yet to undertake further face to face training in supporting people with stress and distress. We saw that dates for this training had been scheduled.

Overall, we saw some progress. This area for improvement remains in place to allow for planned training to take place and for the skills and knowledge to be embedded into practice.

Previous area for improvement 4

To promote responsive care and make sure that people have the right care at the right time, the provider should ensure its review processes are effective in identifying inaccuracies within care records and evaluate whether the care being provided meets people's needs, wishes and outcomes.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: '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 benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 25 September 2025.

Action taken since then

We saw that further work was still required to ensure that monthly reviews are carried out consistently and holistically. Care records should be used to inform care reviews and direct care that meets people's current outcomes. Reviews continued to lack wider consideration to people's emotional and social wellbeing.

The service was aware of where further improvement was required.

NOT MET.

Previous area for improvement 5

To support people's wellbeing, the provider should ensure that end of life care is subject to early assessment and care planning which involves that person and/or their representatives to ensure their choices, wishes and preferences are documented and met when they become unwell.

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

This area for improvement was made on 25 September 2025.

Action taken since then

We could see examples of where details within 'end of life' plans had been reviewed and added to. However, other plans lacked any meaningful information about how to support someone with their end-of-life care. The service are seeking training from specialist team, which may further support this area for improvement.

NOT MET.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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