

Harbour Care Home Care Home Service

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Type of inspection:
Unannounced

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Service provided by:
Enhance Healthcare Ltd

Service provider number:
SP2012011938

Service no:
CS2014329901

About the service

Harbour Care Home is an established care home provided by Enhance Healthcare Ltd.

The home is registered to provide 24 hour care and support for up to 45 adults with a range of physical and sensory needs. The home is split into three living areas, with large communal spaces also accessible. Harbour Care Home is located in the seaside town of Dysart, Kirkcaldy. Accommodation is located across two floors with an accessible garden area to the rear.

About the inspection

This was an unannounced inspection which took place on 28 and 29 January 2026. 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 seven people using the service. A further four completed a customer service questionnaire. We also spoke with two of their family members and a further six completed a customer service questionnaire.
- spoke with 13 staff and management.
- observed practice and daily life
- reviewed documents.

Key messages

People benefitted from care and support from a consistent and skilled staff team.

Leaders of the service demonstrated a drive for improvement.

The service promoted people being active, engaged and participating.

Care records were good. Some areas for improvement were identified to drive further development.

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?	5 - Very Good
How good is our staff team?	5 - Very Good
How good is our setting?	5 - Very 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 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.

It is important people benefit from prescribed treatments. We observed safe administration and proper storage of medication. Medication was well managed and as a result, people benefitted from prescribed treatments. We saw examples of where the service was prompting people to be as independent as possible with managing their medications. This enhances people's choice and control.

We found protocols were in place to support "as required" medication but that they could have been more detailed. There was also little detail recorded about how effective "as required" medication had been when administered. This meant information might not be available to guide decisions on changes needed for effective symptom control. Area for improvement 1 applies.

We found that effective nursing care and oversight was in place. Daily handover and 'flash meetings' allowed for all the leads of the service to come together to share information about people's needs and plans for the day. This included discussing any GP or other health professional input that may be required. Management of people's skin care and pain was well attended to. A relative told us, "[Loved one] always looks well" and "I see [them] happy". People told us they liked living at Harbour Care Home, one commented, "Oh aye I like it here". We were assured that people benefitted from high quality nursing care and support.

Mealtimes appeared to be a calm and pleasant part of the day which many people looked forward to. People chatted to each other and enjoyed their meals together. People were encouraged and enabled to eat their meals independently with the right level of support from staff where needed. Oversight of people's nutritional needs was good. Weight was well monitored and those with adapted dietary needs were safely accommodated. A range of healthy snacks and drinks were available out with mealtimes, some on a self-service basis. People's wellbeing benefitted from an approach that enables a healthy attitude to food and drink.

There was a range of opportunities which promoted people's physical and mental health. Although the service employs a dedicated health and wellbeing team, we observed a whole team commitment to keeping people engaged, active and happy. We saw examples of where people had been supported to build skills such as self-travel, maintaining personal hygiene and taking part in outings. A daily program of events and opportunities for socialisation were offered. People told us they looked forward to these. We observed small and large group activities that were well facilitated and enjoyed. One person was overheard saying "oh that was so fun". Throughout our inspection we observed people moving freely around the service and accessing the community. Although it was clear that people's outcomes were very good, as a result of the care and support at Harbour Care Home, the service could enhance how it formally supports people to set, plan and achieve goals. See section 'How well is our care and support planned?' section for details of this area for improvement.

Areas for improvement

1. To support people's health and wellbeing and ensure 'as required' medication is benefitting people, the service should consider providing more detail regarding when these are needed and that when these medications are administered that the effectiveness of them is assessed.

This is in order 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).

How good is our leadership?

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.

We saw a range of quality assurance checks in place, carried out on a daily, weekly and monthly basis. Records we reviewed evidenced that various members of the staff team were involved in these checks to monitor standards of care and support. This supports leaders at all levels to have a clear understanding of their role in monitoring practice and identifying, directing and supporting improvement activities. Checks undertaken included: daily manger walk round, 'first impression' checks, engagement, medication and nutritional audits. The service should give further attention to regularly and clearly recording the voices of people living in the service, in these quality assurance checks. This ensures that people are involved in evaluating the quality of the service provided. Area for improvement 1 applies.

The leaders of the service demonstrated a clear vision for improvement and a clear understanding about what is working well and what improvements were needed. We saw how feedback from people gathered at resident meetings had been used to inform the service development plan. We reviewed development plans that were reflective of the areas for improvement identified from quality assurance checks. This evidenced people's experiences as drivers for change.

Despite some changes to management in recent months, the provider demonstrated both proactive and reactive approaches to support consistency of care. This included having regular onsite support from the senior management team and additional compliance checks to ensure effective leadership. Relatives told us that they were kept up to date with all leadership changes. We were confident in the services' capacity for improvement as a result.

Feedback from people, relatives and staff was positive. Comments included:

- "I like how the management team set up trainings for staff, it's really helpful and shows the really care about us growing in our various roles".
- "He's [nurse] the boss, he's my friend".
- "They [leaders] go through the care plan with me every few months, keep me well involved".
- "[Leaders] are really nice and I always go to them with any concerns".
- "Care and support for staff and residents is now excellent".

Areas for improvement

1. To support a culture of responsive and continuous improvement, the provider should ensure that people's views, suggestions, and choices are gathered regularly as part of service performance checks.

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

'I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve' (HSCS 4.8).

'I can be meaningfully involved in how the organisations that support and care for me work and develop' (HSCS 4.6).

How good is our staff team?

5 - Very Good

We evaluated this key question as very good, as the service demonstrated major strengths in supporting positive outcomes for people. We found staffing arrangements were sufficient and staff worked well together.

We found people using the service were protected by safer recruitment checks and staff were given sufficient induction/orientation to support the people in their care. The interview process clearly reflected the values underpinning the Health and Social Care Standards (HSCS). The provider could involve residents and families in the recruitment and induction process and as part of their ongoing participation strategy.

We sampled staff schedules and spoke with staff. Most staff said that staffing levels were good and that they could safely support people as a result. Staff were visible throughout the home and quickly responded to people's support needs. A whole staff team approach meant that people's needs were well known and addressed without delay.

The provider's staffing method included a dependency tool which reflected individual service user assessed needs, the three living areas and skill mix needed for day and night. This gave us confidence that the right number of staff with the right skills were working at all times to meet people's needs.

Although the service was subject to the same workforce pressures as experienced throughout the sector, recruitment had been successful. In addition, we found sufficient staff supporting catering, maintenance, and housekeeping. Staff confirmed they worked flexibly to cover planned and short notice absence all of which could reduce the need for support from ad hoc agency staff and promote continuity in staffing. We observed warm and joyful interactions between support staff and supported people. Relatives told us staffing was consistent; "Can't really fault them", "Staff are regular, they know [loved one] well".

We saw staff worked well as a team. They said they felt supported by each other and by the leadership team. One staff member commented, "We have good management and good carers". Regular handover meetings provided an opportunity to share concerns and ideas. More formal staff meetings took place, to address specific issues and receive staff feedback. As a result, people living in the service could be confident that they were being cared for by staff who themselves felt well supported.

Management had a good overview of staff training, including induction. We found staff compliance rates for mandatory and essential training was very high. Staff described supervision and training as valuable in raising their awareness and developing their knowledge. Leaders of the service were visible and 'hands on'. We saw examples of how this had allowed for 'modelling' of positive behaviour support techniques, for people with more complex mental health needs. Overall, this helped to maintain a positive culture and support skill development.

How good is our setting?

5 - Very Good

We evaluated this key question as very good, as the service demonstrated major strengths in supporting positive outcomes for people.

The design of the home meant people could experience smaller unit living, while having easy access to larger communal space and gardens. People benefitted from a modern, comfortable, welcoming environment with plenty of natural light and space. The home was clean, tidy, and very well looked after, with no evidence of intrusive noise or smells. The provider had identified areas for improvement including addressing the damaged handrail surfaces. This should be a priority to support effective cleaning and infection prevention and control. See area for improvement 1.

The location of the home could foster relationships and support people's connection to the wider community. The accessible, secure garden was seen to maximise independence for those people keen to be outdoors.

The home had a relaxed atmosphere. People had a choice of where they wanted to spend their time. Some people enjoyed company in sitting areas, whilst others preferred to be in their own rooms. Communal spaces had ample resources to allow people to be active and engaged e.g. Pool table, exercise equipment. The location and culture of care supported the inclusion of family and friends. There was open visiting and pleasant areas for families to spend time out with their loved one's bedroom if they wished.

We found the home to be clean and generally very well maintained. We found that the service upheld good standards of infection prevention and control. There was ample storage for any essential equipment.

Communal areas within the home were clean, tidy, and free from clutter, which ensured that cleaning tasks could be carried out effectively. Equipment was maintained well, with safety checks being carried out at planned intervals. This helped to ensure people were safe and enjoyed a pleasant home environment.

As a result, Harbour Care Home was a pleasant place to live.

Areas for improvement

1. To maintain effective infection control and a safe and hygienic environment for residents, staff and visitors, the provider should ensure frequently touched areas are intact and do not compromise the effectiveness of cleaning.

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).

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 support plans that were thorough and detailed. A previously made area for improvement around care planning is now met. See section 'what the service has done to meet areas for improvement made at or since our last inspection' of this report for details. We sampled plans that made good reference to best practice guidance and for more expert care, clear contact information for specialist medical teams, e.g. Parkinson's nurse. We saw examples of 'end of life' and 'anticipatory care plans' that were detailed and promoted person-centred comfort care. Care records were completed consistently and in line with people's needs for example, food and fluids charts. We were assured that plans and care records supported effective care delivery.

Monthly care plan reviews were evident as part of the 'resident of the day' system. We saw some examples of where the information on people's front facing profile was out of date. This included information about people's adapted diets. We were assured to find that the information recorded within the main nutritional care plan, and the information held by the kitchen was up to date. We suggested the service include checking this section of the plan as part of its review process. This helps to reduce any risk of people getting care and support that does not meet their needs.

The service evidenced facilitating six-monthly formal reviews, where supported people, their next of kin and any relevant professionals were also in attendance. Having the right people involved in reviewing the care and support provided is important, as it ensures that the care being delivered is appropriate and effective. We reported to the service that the person's voice was frequently absent from these reviews and should be more actively promoted. Area for improvement in section 'How good is our leadership?' applies.

People should benefit from dynamic, innovative, and aspirational support planning. Although we saw ample evidence to show that people were being supported to have meaningful days, support plans and care records did not always demonstrate this effectively. The service should support people to be actively involved in setting, planning and achieving their goals and aspirations. This helps to maximise people's capacity to reach their full potential. Area for improvement 1 applies.

To promote least restrictive practice, we also suggested that the service re-visit the information recorded within people's legal care plans and within the service's 'restrictive practice log'. This promotes review of legal powers and reflects on any risks around deprivation of liberty. This ensures that any restrictions are kept to a minimum and when in place, carried out sensitively. Area for improvement 2 applies.

Areas for improvement

1. To support people to have full and meaningful lives, the provider should ensure that where people have identified outcomes and goals, that these are planned, recorded and evaluated on a regular basis.

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

'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).

'I can maintain and develop my interests, activities and what matters to me in the way that I like' (HSCS 2.22).

2. To promote a continuous culture of least restrictive practice, the provider should ensure that people's plans reflect any legal powers in place, any restrictive practice being used and ensure this is subject to robust and regular review to ensure promotion of choice and control.

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

'If my independence, control and choice are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively' (HSCS 1.3).

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

In order that people experience good outcomes and quality of life, the provider should ensure people are supported to spend their time in ways that are meaningful and meet their outcomes.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: '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 11 November 2024.

Action taken since then

We observed very good opportunities for people to be active, engaged, and 'have fun'. Please see section 'How well do we support people's wellbeing?' of this report for details on what we saw. The service could better enhance their planning and recording of people's outcomes and this is reflected in section 'How well is our care and support planned?' of this report.

This area for improvement is MET.

Previous area for improvement 2

The provider should ensure that preferred methods of contact for representatives regarding changes to health and wellbeing are established on admission, and are reviewed, and updated as required.

This is to ensure care and support is consistent with Health and Social Care Standard 1.15: 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

This area for improvement was made on 14 December 2023.

Action taken since then

We saw clear and up to date information recorded in people's plans around their next kins or representatives. This was easily accessible. Relatives we spoke with told us communication was good.

This area for improvement is MET.

Previous area for improvement 3

To promote responsive care and ensure that people have the right care at the right time, the service provider should ensure that people have person-centred care plans in place, that offer clear guidance to support staff and are regularly reviewed. Priority should be given, but not be limited to, epilepsy care plans, pain management, bowel and continence care and anticipatory care plans.

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 11 August 2023.

Action taken since then

We reviewed personal plans that were detailed, person centred and kept up to date. Information about people's health conditions were particularly clear and reflected best practice guidance. Further information about care planning and areas for improvement are reflected in section 'How well is my care and support planned?' of this report.

This area for improvement is MET.

Complaints

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

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?	5 - Very Good
2.2 Quality assurance and improvement is led well	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
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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