

## Harbour Care Centre Care Home Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
2 February 2026

**Service provided by:**  
Enhance Healthcare Ltd

**Service provider number:**  
SP2012011938

**Service no:**  
CS2023000111

## About the service

Harbour Care Centre is a care home registered to provide support to a maximum of three people with personal and or psychological care needs. At the time of this inspection, they were supporting two people. The service is part of Enhance Healthcare Ltd and is attached to Harbour Care Home (CS2014329901), which is managed by the same provider. The manager of Harbour Care Home is also the manager of Harbour Care Centre. When required, the nurse on duty at Harbour Care Home will provide clinical care and support at Harbour Care Centre.

## About the inspection

This was an unannounced inspection which took place on 29 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:

- spent time with two supported people living in the service. We spoke with one of their relatives and another completed a customer service questionnaire.
- spoke with five staff and management
- observed practice and daily life
- reviewed documents.

## Key messages

The benefit of a multi-disciplinary approach was recognised and promoted.

Some staffing changes had been managed sensitively and with minimal disruption to supported people.

Some previously made areas for improvement remain in place as the service continues to develop practice.

## 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

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 awarded an evaluation of good for this key question. This means we found several important strengths which had a positive impact on people's experiences.

We saw care that was considerate and flexible. Days were focussed around doing things that were enjoyed and with flexibility. We observed one supported person enthusiastically joining in with larger group events in the adjacent care service. This was acknowledged as positive progress and had increase opportunities to be active and engaged.

We saw a healthy approach to nutrition being promoted. This included encouraging low-calorie snacks, fruits and vegetables. A relative told us, "They do a good job at managing [their] healthy snacks". The service had been quick to address any concerns around supported people's health and wellbeing with the correct professionals.

People's wellbeing should benefit from their care and support. We found evidence of strong multi-agency partnerships in place, to guide appropriate levels of care. This included regular reviews from social work and relevant health professionals. The staff team recognised the benefit to seeking professional guidance and input to improve experiences for the supported person. A relative commented, "My [loved ones] wellbeing is well cared for....I am so happy to get the care [they] get". Another commented, "Communication is good". We were confident that the service were responsive and ensured that people got the right care and support at the right times.

Care records we reviewed were consistent and detailed daily care delivery. Strategies to manage stress and distress were being reviewed. Records evidenced recent incidents of distress that had put supported people at risk of harm and had resulted in some restrictive practice measures being introduced. We discussed with the service enhancing their restrictive practice monitoring process to ensure that any measures in place are least restrictive, subject to regular review and supported by the appropriate legal powers. This also ensures that any restrictions are kept to a minimum and when in place, carried out sensitively. Area for improvement 1 applies.

Our review of medication management found good, safe systems in place. As required medication protocols were also in place. Supporting care records had good detail on how the supported person would indicate symptoms, such as pain. We were assured that people benefitted from their prescribed treatments.

A previously made area for improvement around care planning is now met. See section 'What the service has done to meet any areas for improvement we made at or since the last inspection'.

### Areas for improvement

1. 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).

## How good is our staff team?

## 4 - Good

We awarded an evaluation of good for this key question. This means we found several important strengths which had a significant positive impact on people's experiences. Some improvement in key areas would enhance people's experiences.

At this inspection we examined staff recruitment as part of our core assurances and focussed on assessing staffing arrangements. The interview process clearly reflected the values underpinning the Health and Social Care Standards (HSCS). We found people using the service were protected by safer recruitment checks that were completed before staff took up post. We found staffing arrangements were as required and staff worked well together. Some recent changes to regular staff teams had been well managed by the provider and inconsistency kept to a minimum. This meant that people's needs were well known by the staff team supporting them.

A relative told us, "Good carers with good communication", "Staff are brilliant. [My loved one] has a great bond with them".

Staff told us that the management team were supportive and responsive of any concerns or issues raised. One staff member commented, "Seriously the new manager is good, they deputy too". Leaders of the service were visible and 'hands on'. We saw examples of how this had allowed for 'modelling' of positive behaviour support techniques. Overall, this helped to promote a positive culture and support skill development.

Records indicated supervisions and observations of practice had been carried out for some staff working in the service. The service acknowledges that further work was required to ensure that these were carried out regularly and supported skill development. A previously made area for improvement remains in place to support consistent oversight of staff development. See section 'What the service has done to meet any areas for improvement we made at or since the last inspection'.

It was clear that the staff team knew the supported persons needs well. Improvements had been made since the last inspection around training for epilepsy care and treatment. We found some gaps in other essential trainings such as 'trauma informed care' and 'stress and distress'. The service evidenced a clear action plan to support staff to increase their skills and knowledge in these areas. A previously made area for improvement remains in place. See section 'What the service has done to meet any areas for improvement we made at or since the last inspection'. This supports a confident and competent staff team, impacting good outcomes for people.

## 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 safe and consistent practice, the provider should ensure that people receive care from well trained and competent staff. This training should be in line with the needs of supported peoples' specific needs, with systems in place to measure competence.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state 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 6 March 2024.**

#### Action taken since then

This area for improvement remains in place. Our review of training records found some gaps in essential training. See section 'How good is our staff team?'.

NOT MET.

#### Previous area for improvement 2

The provider should ensure that audit processes are in place and effective in identifying areas for improvement. Where areas for improvement are identified, they should contribute to a development/ improvement plan for the service.

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

**This area for improvement was made on 6 March 2024.**

#### Action taken since then

We found improvement to the oversight of quality assurance and improvement planning for Harbour Care Centre. Leaders of the service demonstrated a capacity to drive further improvement.

MET.

#### Previous area for improvement 3

Staff working in the service should receive regular supervision and review of competency to ensure their learning and development needs are met and they have the right skills to support people to meet their outcomes.

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 6 March 2024.**

**Action taken since then**

This area for improvement remains in place. Our review of records found some ongoing improvement was required to supporting skill development. Work had already commenced to address these gaps and support care staff to further enhance their skills and confidence in meeting the needs of the people in Harbour Care Centre. See section 'How good is our staff team?'.

NOT MET.

**Previous area for improvement 4**

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 and up to date guidance to support staff.

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 6 March 2024.**

**Action taken since then**

Care and support records we reviewed were detailed, clearly and promoted best practice. We saw care plan audits had been conducted and that these has supported improvement in the quality of recording. We were assured that care and support planning was enhanced by robust quality assurance.

MET.

**Complaints**

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## 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

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