

Prestige Nursing and Care - Fife Support Service

Unit 22 First Floor Offices
Thomson House
Harbour View
Methil
KY8 3RW

Telephone: 01592 800539

Type of inspection:
Unannounced

Completed on:
9 February 2026

Service provided by:
Prestige Nursing (Scotland) Limited

Service provider number:
SP2003002515

Service no:
CS2004084731

About the service

Prestige Nursing and Care - Fife provides a homecare service to older people, adults and children in Fife. The service currently supporting just over 100 people, both private clients and those funded by the local authority. Staff work across multiple areas of Fife.

The service state their aims to be, 'To care and support for as many people as possible to be able to live in their own homes and to achieve the outcomes that they want' and 'To be the most trusted, professional, and person-centred provider of 'Specialist Homecare' services in the UK, delivering care for all of life'.

About the inspection

This was an unannounced inspection which took place on 2, 3 and 4 February 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 14 people using the service and four of their family
- spoke with six staff and management
- observed practice and daily life
- reviewed documents
- we received 30 responses to our care service questionnaire.

Key messages

Care and support was delivered by a staff team who knew people well.

People were happy with the care staff who delivered their care.

The staff team was consistent and timing of visits was good.

Some complaints handling could improve.

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 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?

5 - Very Good

We evaluated this key question as 'very good', which reflects performance that demonstrates major strengths in supporting positive outcomes for people.

People should experience care and support which benefits their health and wellbeing. People felt it was important that they had good relationships with those coming into their homes to deliver care. Feedback about the care staff was overwhelmingly positive. People said, 'They treat you with respect' and 'They're super professional'. Even when people were less able to give comprehensive feedback about their care, they made positive comments. One person said, 'I like these ladies', another said, 'All the girls are nice'. Relatives and clients spoke about the effort carers made to 'go the extra mile'. We were confident that the care team were well liked and well respected.

People were appreciative of their core teams of carers. They enjoyed having consistency of who was supporting them and felt this contributed greatly to their feelings of confidence and safety. We observed multiple examples of warm and positive relationships which had been established for a long time. People's independence was well promoted. Staff respected people's existing abilities and ensured that these were maintained. Mobility and activity were promoted whenever possible and staff were observed to spend some of their visit time encouraging people to move about their homes.

Staff were aware of what actions they should take when people appeared to be declining in health. We saw evidence of staff actively engaging with external professionals to seek advice and to escalate concerns. We also heard from one relative about how observant staff were of people's changing health needs. They reported the prompt actions of the staff member and the efficient and kind way they dealt with a crisis. This gave reassurance that staff were well trained and that robust processes were in place for staff to access support from the office base.

Medication management was robust, with good attention paid to record keeping and documentation. People reported feeling confident that staff would manage their medication with care. One person said, 'My medication is always done, with no problem'. Records for 'as required' medication were in place, however, in some cases the detail around topical creams could be improved.

How good is our staff team?

4 - Good

We evaluated this key question as 'good', which applies to performance where there are a number of important strengths which clearly outweigh areas for improvement.

People described their staff teams in glowing terms, saying, 'I'm happy with every single one' and 'They couldn't be better'. When asked about the skills and knowledge of staff one person commented, 'They obviously select their carers very carefully'. They felt this because of the consistent performance of staff and their professional approach.

Staff were well supervised, with regular observations of their practice being made by senior staff. Staff found these to be supportive and appreciated the feedback they received in order to improve their practice. Competency checks were also regular, with key areas such as medication management and moving and handling being well covered. Staff training was at a good level and staff were aware of their responsibility to keep mandatory training up to date. Good systems were in place to oversee training completion and support staff to complete what was required. We were confident that the staff group had the necessary skills and knowledge for their role and that their performance would be regularly monitored over time.

In a small number of cases people had found reason to raise a concern or complaint about staff members. The service had a complaints policy and procedure in place with accessible information to support people with the complaints process. However, when we spoke with people they told us that when they complained they were not always satisfied with the response. Not everyone was confident that matters were fully dealt with and this left them feeling disappointed. An area for improvement is made. See area for improvement one.

Although most people had a consistent staff team there were occasions when different staff members were required to cover sickness absence and annual leave. The service could consider reinstating their approach of informing people who would be coming to their home. Although this was not a key concern for many people, it was a process which they had appreciated in the past.

Some people were concerned about the ability of the service to cover sickness absence and annual leave. They perceived that there was a shortage of staff at certain times. One person said, 'There's no plan B'. The provider was engaged in an ongoing recruitment campaign at the time of the inspection, but responses were limited. Recruitment was robust however, with electronic systems being used to track recruitment and onboarding to ensure that best practice for safer recruitment was adhered to.

Quality audits were being completed, with information from these being tracked and updated on a service improvement plan. Leaders had a good overview of staff training, supervision, and professional registrations and they had identified what was working well and where improvement was needed. Together, this contributed positively to supporting good outcomes for those experiencing care.

Areas for improvement

1. In order to ensure good outcomes for people experiencing care, the manager should improve the service response to concerns. Concerns should be taken seriously, fully recorded and acted upon appropriately. Outcomes and actions from concerns should be clearly documented and followed up to ensure improvement has been achieved.

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'If I have a concern or complaint, this will be discussed with me and acted on without negative consequences for me' (HSCS 4.21).

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 to support good outcomes for people experiencing care, the manager should ensure there is effective oversight of care packages with appropriate action taken when care cannot be successfully delivered.

This is to ensure care and support is consistent with Health and Social Care Standard 4.19: I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

This area for improvement was made on 25 July 2024.

Action taken since then

The service were closely monitoring all care packages, staff attendance at client's homes and the completion of care tasks. If care had not been delivered for any reason, this was identified by care staff and office staff were alerted. We saw good evidence to show that these incidences were well documented and processed by the office team.

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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very 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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