

# Letham Park Care Home Care Home Service

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Edinburgh  
EH6 4NN

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**Type of inspection:**  
Unannounced

**Completed on:**  
13 March 2026

**Service provided by:**  
Renaissance Care (No1) Limited

**Service provider number:**  
SP2011011731

**Service no:**  
CS2011303093

## About the service

Letham Park Care Home is one of a number of care services provided by Renaissance Care (No1) Limited. It is registered to provide care and support for up to 70 older people. The care home is situated in the North Leith district of Edinburgh close to a main road with public transport facilities, shops and parks nearby.

The care home consists of two buildings surrounded by landscaped gardens including car parking. Mathieson House at the front of the grounds is a refurbished Victorian property. It provides care and support for up to 20 people. Garden House is a modern building to the rear of the grounds and provides care and support for up to 50 people across three levels with lift access. Each unit (Islay, Arran and Skye) is similar in layout with a lounge and a dining room.

The care home also had a hair salon, communal lounges, enclosed gardens and a conservatory. The home employed registered nurses, social care workers, with dedicated kitchen, laundry, domestic and maintenance staff. There were also dedicated activity coordinators.

There were 57 people experiencing care at the time of the inspection.

## About the inspection

This was an unannounced inspection which took place on 10 and 11 March 2026. The inspection was carried out by three 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
- intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with 16 people using the service
- spoke with six relatives
- received feedback from three visiting professionals
- spoke with staff and management
- observed practice and daily life
- reviewed documents

This inspection was carried out specifically to follow up on one requirement and four areas for improvement made in the inspection report dated 09 December 2025.

These related to people's staffing arrangements being right for them, the quality of record keeping and incident reporting, the cleanliness of people's living spaces, people being involved in activities meaningful to them and the quality of planning for people who experience stress and distress. Please refer to the Outstanding Requirements and Outstanding Areas for Improvement section of this report to view progress made.

## Key messages

- Improvements had been made to recording, documentation and reporting procedures.
- The provider had recruited additional care staff including wellbeing leads to support improved staffing levels across the service.
- Activities and individualised support time with people had improved however further developments were needed to support meaningful engagement.
- Leadership arrangements supported continuously improving the service.
- Stress and distress plans needed further improvement so they were of a consistently high standard.
- Further improvements were needed to the cleanliness of the building and people's laundry arrangements.
- The quality of people's mealtime experience needed further improvement with staff being deployed effectively at key times.

## 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 good is our staff team?	3 - Adequate
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Further details on the particular areas inspected are provided at the end of this report.

## How good is our staff team?

## 3 - Adequate

Although there were had been some improvements made to people's staffing arrangements this key question remains as an adequate evaluation as strengths were just outweighing weaknesses.

The previous requirement in relation to staffing has been met overall but certain aspects of support needed further improvement (Please refer to the outstanding requirement section of this report to view details of progress made and any outstanding areas for improvement).

Although we noted some improvements to the cleanliness of the building, people's laundry arrangements and personalisation of rooms, there were areas of the building that required refurbishment, redecoration and deep cleaning. There had been shortages of staff in the housekeeping team which had impacted on the quality of people's experience. The provider was looking at increasing the pool of domestic and laundry staff to improve the quality and consistency in cleanliness of the building (see Area for Improvement one)

There had been some improvements made to the level of activities available to people, including increased bus trips. However, meaningful engagement records were not evidencing that people experienced a consistently good quality of support especially for those who spent time long periods of time in their rooms. The activities programme also needed to evidence that people's choices and interests were being promoted well. (see Area for Improvement two)

Mealtime arrangements had improved in some areas of the home but there remained an issue with staff being effectively deployed at key times. The provider had recently recruited additional care staff and one of the vacant wellbeing lead posts had been recruited to. This should help to improve the quality of support people experience. We received mixed feedback about the quality of people's food and the manager was working with catering staff to support improvement to people's catering arrangements and ensure people's choices and preferences were being accommodated (see Area for Improvement three).

### Areas for improvement

1. The service should ensure sufficient housekeeping staff are in place to maintain high standards of cleanliness and to carry out regular deep-cleaning activities to ensure that people experience a clean and welcoming environment .

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

'My needs are met by the right number of people' (HSCS 3.15) and 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.22).

2. The service should ensure there are adequate numbers of staff to improve the quality and consistency of meaningful engagement and activity provision. This is to ensure that people experience stimulation, social interaction, and opportunities that reflect their individual interests and preferences.

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

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

3. The service should improve mealtime experiences by ensuring that sufficient staff are available and effectively deployed to provide timely, well-organised, and supportive dining routines. The provider should continue to use people's feedback about the quality of the meals to improve their dining experience.

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

'I can enjoy unhurried snack and meal times in as relaxed an atmosphere as possible (HSCS 1.35) and 'I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables, and participate in menu planning. (HSCS 1.33)

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

### Requirements

#### Requirement 1

By 11 February 2026, to ensure that people's care and support needs are met effectively, the provider must ensure staffing arrangements are safe.

To do this, the provider must, at a minimum:

- (a) ensure staff have sufficient time to complete daily documentation accurately and promptly, ensuring records are up to date, person-centred, and reflective of the care provided
- (b) enable staff to have time to engage meaningfully with people they support, promoting wellbeing and ensuring interactions are not rushed or task-focussed
- (c) ensure there are sufficient staff to enable the person in charge to respond promptly to the needs of people using the service and support staff. This includes having the capacity and skills to review and accurately report accidents, incidents and protection issues in a timely manner
- (d) ensure there are enough skilled, knowledgeable staff available at all times to support people with their daily needs at times of their choosing, including overnight
- (e) ensure there are sufficient staff to meet each person's individual needs during key times, including meal times, so that people receive the support they need to maintain good nutrition in a dignified manner
- (f) ensure that there are sufficient staff to achieve a clean, well maintained and comforting environment at all times.

This is in order to comply with section 7 of the Health and Care (Staffing) (Scotland) Act 2019.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am confident that people respond promptly, including when I ask for help.' (HSCS 3.17).

**This requirement was made on 9 December 2025.**

#### Action taken on previous requirement

Documentation and reporting practices had improved significantly, with staff receiving clear guidance and regular audits, supporting better outcomes for people's health and wellbeing. This section of the requirement has been met.

Training in meaningful engagement had been delivered; however, the quality and consistency of activities

still required development. Staff missed opportunities to engage and approaches varied noticeably between team members. This section of the requirement is continued in Area for Improvement 1 under "How good is our staffing?" section of this report.

Leadership presence had improved, with appropriate senior cover in place out of hours. Clearer escalation and incident management systems had strengthened across the service, with staff having better access to guidance around reporting procedures. This section of the requirement has been met.

The service had recently recruited more staff who were due to start subject to pre-employment checks. Dependency tools and rotas showed that staffing numbers were appropriate for the needs of people using the service, including overnight and weekends. This section of the requirement has been met.

Although staffing numbers had improved, there was a lack of structure during mealtimes which impacted on the quality of people's dining experience. This part of the requirement has been continued as an Area for Improvement under "How good is our staffing?" section of this report.

The general cleanliness of the setting had improved. However, environmental issues persisted in relation to cleanliness, odours, and the condition of some equipment, indicating the need for deeper cleaning routines and targeted domestic support. The service would benefit from recruiting additional housekeeping staff to ensure improved standards of cleanliness and more consistent laundry arrangements. This section of the requirement has been continued as an Area for Improvement under "How good is our staffing?" section of our support.

### 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 enhance the safety and wellbeing of people experiencing care, the provider should ensure that staff have access to an appropriate on-call system and are trained in how to use it to obtain managerial support.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14). and 'I experience high quality care and support because people have the necessary information and resources' (4.27).

**This area for improvement was made on 9 December 2025.**

#### Action taken since then

The service had improved on-call systems, with clear escalation information readily available for staff. A service manager and a member of the senior management team were named as contacts, with phone numbers available for out of hours support.

This Area for Improvement has been met.

## Previous area for improvement 2

To support people's health and wellbeing and improve their quality of life, the provider should improve the quality of people's stress and distress plans, with an emphasis on individualised proactive and preventative strategies and effective record keeping and analysis.

This is to ensure that 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 23 September 2025.**

### Action taken since then

Although some people had good quality Positive Behavioural Support (PBS) plans in place, some were lacking in preventative measures and detail. The service continued to cascade training, providing staff with the support they need to improve plans, thereby improving outcomes for people experiencing stress and distress.

This Area for Improvement is continued.

## Previous area for improvement 3

To promote people's dignity and respect, the provider should regularly check that only items belonging to people are placed in their rooms and all laundry returned belongs to them. Regular checks should be carried out to monitor that improvements have been made and are sustained.

This is to ensure that care and support is consistent with the 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 23 September 2025.**

### Action taken since then

We saw overall improvements in the laundry systems and identification of personal items. However, some people did not have the updated naming system in place and others had items that did not belong to them in their rooms.

This Area for Improvement is continued.

## Previous area for improvement 4

To promote people's wellbeing, dignity and self worth the provider should ensure that people are supported to personalise their rooms and to ensure that people experience a consistently clean environment, including changes of linen/bedding when required. Cleaning records should evidence that people's rooms are cleaned and checked daily and deep cleaning checks should be carried out consistently.

**This area for improvement was made on 23 September 2025.**

## Action taken since then

The service had begun a programme of redecoration, improving the appearance and personalisation of people's rooms. Some rooms were in need of refurbishment and personalisation to enhance people's sense of belonging.

This Area for Improvement has been continued.

## 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 good is our staff team?	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate

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