

## Bayview Care Home Care Home Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
16 June 2025

**Service provided by:**  
Bayview Care Home Limited

**Service provider number:**  
SP2017012997

**Service no:**  
CS2017360828

## About the service

Bayview Care Home is registered to provide a care service to a maximum of 30 people, including two people who are under 65 years. The service is provided by Bayview Care Home Limited which is part of the Meallmore group.

The service is located in a quiet residential area of Cruden Bay. There are landscaped, easy to access gardens and a summer house. There are various shared social and dining spaces located downstairs.

All bedrooms are single rooms with toilet facilities. Shared bathing and showering facilities are located on both floors of the care home.

## About the inspection

This was an unannounced inspection which took place on 4 and 5 June 2025. 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 nine people using the service and four of their family
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

## Key messages

- People had been supported to a good standard to help them look their best.
- Staff were visible and accessible to people. This meant that they did not have to wait for assistance.
- People were very positive about the quality and variety of meals. The meals looked appetising.
- People were very positive about the staff team. They said they were kind and caring.
- People were supported to be as mobile as possible.
- Improved analysis of falls should happen to help reduce the risks to people.
- Improvements must be made to the management of critical incidents and accidents.
- The home was generally clean and odour free.
- Upgrades to the lounges and dining rooms had taken place.
- People had personalised their bedrooms and this helped create a homely feel.
- Improvements should be made to the completion of the environment audit.

## 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?	3 - Adequate
How good is our setting?	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?

## 3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

People appeared well cared for. The right level of care and support had been provided to help people with their washing and dressing needs. This helped ensure that people looked their best.

When people were less accepting of help with their washing and dressing, detailed care plans were in place. These identified different strategies that staff could try to encourage those people to accept the help on offer without impacting on the person's right to choose.

People were positive about the staff team. They said that staff were kind and caring. There were many lovely interactions with staff, and these had a positive impact on people.

Relatives said that staff were visible and accessible when they visited. This meant they were on hand to answer any queries they had and to provide them with updates on their loved one's care, support and wellbeing.

One family praised the responsiveness of the staff team. When they raised changes that they wanted, care plans were updated and the care and support delivered was changed to reflect their wishes. This led to improved outcomes for this person and increased confidence that people were listened too.

People who required aids to help them walk safely had these within reach. This enabled them to walk freely around the home. Some people said that they were able to access the lift and return to their own rooms whenever they wanted. They were able to choose where they wanted to spend their time.

Some people required hoists to help them transfer and change from different seating. There could have been better support by staff. At times there was a lack of reassurance and explanation given when hoisting. This meant that some people remained anxious.

People were positive about the quality and variety of meals on offer. When people were at risk of weight loss, extra calories were added to their diets to help stabilise their weight. Increased monitoring of their weight enabled staff to assess if the measures taken were working.

Throughout the shared areas in the home fluids were available. These were accessible for people to help themselves to or for staff to access for people. Staff need to be more attentive to replenishing glasses. People who chose to remain in their bedrooms had been provided with a glass of juice, however, there were no jugs to replenish. Some people would have been able to help themselves. This would support people retaining skills and independence.

The number of falls in the home had reduced, however, there continued to be a high number of falls occurring in specific areas of the home. Improvements are needed to the analysis of the falls to ensure that any trends in time, location are identified. This analysis could then be used to inform changes to help reduce the risks of falls. **(See area for improvement 1.)**

Electronic motion sensors were widely used in people's bedrooms. These sounded when someone was

mobilising without staff support. There was no overview of the number of sensors and this meant that some could be in place unnecessarily. It is important for managers to ensure that equipment that may be considered restrictive, is used appropriately and when there is a clinical need based on risk.

The management of people's medications was good. Recording sheets were clear and there were no gaps in administration noted. The good systems for ordering meant that there were sufficient stocks of medications. This meant that people would receive the prescribed medications that helped keep them well.

When an accident, incident or adverse event occurred, the recording, observation and care and support was not completed to a good and safe standard. Observations were not always completed and this meant that a deterioration in health would not be picked up. Changes in people's presentation or wellbeing were not followed up on, for example, increased pain, changes to mobility. This increased the risk of people not getting the necessary medical input that they needed. Improvements must be made to the care, support and management of critical incidents to ensure that people get the input they need to prevent a deterioration in their health and wellbeing. **(See requirement 1.)**

## Requirements

1. By 30 September 2025, the provider must ensure that when an accident, incident or adverse event occurs, that people receive the right care, support and medical intervention. In order to do this, you must:

- ensure that incident records are completed in detail with actions needed clearly identified
- ensure that observations are completed, as per your own policy or as the persons health indicates.
- staff must ensure that any change to people's presentation, for example, pain levels, mobility, levels of awareness, are monitored and acted upon.
- ensure that medical input is sought when there are any concerns with people's clinical presentation.

This is to comply with Regulations 4(1)(a) (welfare of service users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

'My care and support meets my needs and is right for me' (HSCS 1.19); and

'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14).

## Areas for improvement

1. Improvements should be made to the analysis of falls to ensure that any trends are identified. This is in order to inform changes that will reduce the risks to people.

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).

## How good is our setting?

## 4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

The environment was generally clean and tidy. There were appropriate cleaning protocols in place. There were sufficient domestic assistants on duty to ensure that cleaning schedules were maintained. However, there were a couple of malodorous areas in the home. The managers were aware of this and were exploring solutions to try and address the malodours. Managers were committed to ensuring that people lived in a clean and odour free home.

Maintenance records were in good order, with a clear process for highlighting any required work. The handyperson attended to any maintenance tasks promptly and effectively. This meant that equipment and facilities used by people, were safe and in good working order.

Signage was clear and helpful in supporting people to make choices about where they wanted to spend their time and to find their way around the home. Personalised signage on room doors helped people locate their rooms independently.

Many bedrooms were personalised to a good standard. People had been encouraged to take items in from home, for example, photographs and ornaments. This helped create warm and homely bedrooms that helped people feel at home.

Many bedrooms had a tangle of wires with some trailing across floors. This could impact on the use of moving and handling equipment and increased the risk of falls. The managers responded to our concerns and ensured that trailing wires were secured appropriately. Managers should continue to monitor the environment to ensure that potential trip hazards are dealt with. This will help support people to mobilise safely.

People had a choice of lounge areas to spend their time. These had been redecorated to a good standard. The service was committed to ensuring that lounges were well decorated and comfortable rooms for people to use.

People and families had been asked how the garden spaces could be improved, and their suggestions had been acted upon. The home had recently held a gardening day to further improve the garden spaces with support from people's families and staff. People and their families were also encouraged to donate a plant that had special meaning to them. People were included to ensure that the gardens were meaningful. Improvements could be made to the enclosed garden space. There was a missed opportunity to plant up the raised bed.

The service had used an audit tool that was designed to assess the environment for people living with dementia. This was an opportunity to help services identify what needed to change to help make the home's environment better for people. However, accuracy of the completion of this audit needs to be improved. For changes to be made, an accurate and realistic assessment of the environment needs to take place. This will help identify what changes are needed to help support people living with dementia.



## 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

Improvements should be made to the outdoor spaces to ensure these are easy to access, comfortable and safe spaces for people to spend time.

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 8 October 2024.**

#### Action taken since then

The garden had been improved to a good standard. The service had involved people in deciding what changes needed to happen in the garden to make this meaningful and comfortable areas to spend time. People were very positive about the gardens and told us that they were supported to spend time outside.

People, their families and staff were included and involved in the changes to the gardens. This inclusion demonstrated valuing the input and expertise of people.

The raised beds in the enclosed garden should be developed to improve this area. The addition of plants to this area would improve the appearance and make it a more enjoyable area to spend time.

**This area for improvement has been met.**

#### Previous area for improvement 2

Improvements need to be made to the awareness and oversight of people when there is a legal framework in place to support them with their finances.

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

'If I need help managing my money and personal affairs, I am able to have as much control as possible and my interests are safeguarded' (HSCS 2.25).

**This area for improvement was made on 8 October 2024.**



**Action taken since then**

There were good systems in place for the management of people's money. Where it was in place, managers had good oversight of the legal financial powers held by appointees.

Clear systems in place for recording people's pocket money, with receipts and recording of any expenditure and of money coming in. This made it easier for managers when they completed financial audits to be confident that people's moneys were being managed appropriately.

**This area for improvement has been met.**

**Previous area for improvement 3**

To ensure that people benefit from a culture of continuous learning and improvement the provider should ensure that leaders investigate all unplanned events and share learning with the staff team.

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 8 October 2024.**

**Action taken since then**

Improvements continue to be needed to the management of unplanned events. Critical incidents had occurred and there were inconsistencies in ensuring appropriate monitoring and the necessary actions being taken in response to the changing clinical needs. This meant a delay in the input from medical professionals.

**This area for improvement now informs the requirement key question 1; 'How well do we support people's wellbeing?'**

**Previous area for improvement 4**

The service should ensure that when concerns are raised, including potential allegations of abuse, these are logged, investigations are carried out thoroughly, and findings are accurately presented to ensure that adequate lessons are learned.

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 8 October 2024.**

**Action taken since then**

Improvements continue to be needed to the management of adverse events including unexplained bruising and allegations of abuse. There were inconsistencies with the recording, monitoring and follow up of incidents. This increased the risk of incidents not being investigated effectively. This increased the risk to people's health, safety and wellbeing.

This area for improvement now informs the requirement key question 1; 'How well do we support people's wellbeing?'

## Complaints

Please see Care Inspectorate website ([www.careinspectorate.com](http://www.careinspectorate.com)) for details of complaints about the service which have been upheld.

## Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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