

Napier House Care Home Service

300 Napier Road
Glenrothes
KY6 1BF

Telephone: 01592 583 140

Type of inspection:
Unannounced

Completed on:
14 September 2026

Service provided by:
Fife Council

Service provider number:
SP2004005267

Service no:
CS2017353222

About the service

Napier House is a purpose built care home for older people provided by Fife Council. The service is located in Glenrothes and situated close to parks, shops and other local amenities.

The home was registered on 18 September 2017 to provide 24 hour care and support for a maximum of 60 older people in five living areas including a 12 bed: Short Term Assessment and Review Service (STAR). STAR provides intermediate care/short term assessment for people.

Napier House mission statement describes a vision where: "High quality care and support results in people experiencing excellent standards that reflect the principles within the health and social care standards".

There were 50 people living here at the time of inspection, including seven accessing STAR.

About the inspection

This was an unannounced follow up inspection which took place on 14 September 2026 and between 10:00 and 17:00. 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 and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with nine people using the service and three of their family
- spoke with six staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- Staff deployment had been reviewed and improvements on-going. The outstanding staffing requirement was met.
- People were happy with the provision of activities and the outstanding area for improvement was met.

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

Requirements

Requirement 1

By 31 August 2026, to ensure that people's care and support needs are met effectively, the provider must ensure staffing arrangements deliver continuity in staffing.

To do this, the provider must implement quality assurance systems to evaluate people's care experiences and assess if staffing arrangements are providing consistent person-centred support.

This is in order to comply with section 7(1) (a) (b) & (c) 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 Standard (HSCS) which state that: 'I am supported and cared for by people I know so that I experience consistency and continuity' (HSCS 4.16).

This requirement was made on 29 May 2026.

Action taken on previous requirement

Overall people were happy with the staff who looked after them and staff were held in high regard. We were told that during the day, there was always someone who knew them. There was recognition of the value relief and agency staff had in supporting the right number of staff to be available within the living areas. People were aware of the use of agency staff and sometimes lacked confidence in their skill.

Comments included, "I get on good with them all, they are all good. The staff are very helpful and know how to look after me. There is one man in particular who is brilliant". However, some comments reflected inconsistent experiences and included, "Lots of staff changes, they are all nice but I take bad to change but we are always seen to" and "I don't get the same opportunity to build up a rapport and it makes me feel less confident and reassured. Night time is different, it is agency staff and they don't know what to do with me".

People described their experience of care and support, providing examples where staffing had meant a good experience and, at other times, where care had been delayed as a result of agency staffing arrangements. We found that the continuity of staffing varied between living areas. This was an indication that improvements in outcomes experienced by people were at an early stage.

At this visit we found the service had developed a comprehensive action plan. They had begun to gather people's views via meetings. These could be further developed to include comments about staffing and this was discussed with the manager at feedback. The provider had started to gather staff views via an electronic survey. This information should assist in identifying future service improvement and ways to keep staff in post.

The provider's well established dependency tool informed staffing numbers. Effective communication was supported by hand-over paperwork. This information was now reflected in a new electronic system to track day to day staffing arrangements. This should be used by the provider to inform broader staffing decisions and reduce future risk of people experiencing inconsistent care and support.

The monthly manager's report included a breakdown of staffing including hours and skill mix. Sampled duty rosters provided some assurance that the number of staff available to support people was sufficient but vulnerable to short notice absence.

Ongoing work was aimed at addressing staff vacancies and managing short notice absence. However, staff were clearly committed to maintaining high standards. This was evident during inspection where some staff were working extra hours to ensure people experienced care and support that was right for them.

People benefitted from very good management oversight and a clear vision of what was needed in order to reduce the risk of people experiencing inconsistent care and support. This included a considered approach to assessing how the home could provide care and support for people who had been assessed as needing long term residential care and who wanted to move in.

The provider's assessment of how well staffing arrangements support people's experience of continuity and consistent standards of care and support, was ongoing. The provider should continue with their improvement work to ensure people share a consistent experience of staffing and that the care and support they receive is right for them.

On balance this requirement is met.

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

In order that people experience good outcomes and quality of life, the provider should provide sufficient staff to support people receiving care to engage in activities meaningful to them.

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 7 October 2025.

Action taken since then

There was one activity coordinator who was held in high regard and activities were a valued part of the service. Records and photographs demonstrated people's enjoyment. At this inspection, we found people were satisfied with the provision of activities. They confirmed they were aware of regular, planned activities and were encouraged to participate.

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.scot.

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.scot

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.gov.scot

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.