Bay Court Care Home
Care Home Service

Bay Court Care Home
2 Anthony Road
Largs
KA30 8EQ

Telephone: 01475 308020

Type of inspection:
Unannounced

Completed on:
10 August 2026

Service provided by:
Priory CC154 Limited

Service provider number:
SP2024000919

Service no:
CS2025000333

About the service

Bay Court Care Home is registered to provide care to a maximum of 80 older people, over the age of 65. The service provider is Priory CC154. The care home registered with the Care Inspectorate on 17 July 2025.

The care home offers accommodation over three floors. At the time of the inspection, individuals were living on the ground and one unit of the first floor.

Each bedroom has accessible en-suite toilet and shower facilities. People in the home have access to a range of communal areas including quiet lounges, and dining areas. There are additional communal facilities available including a café, hair salon, cinema and private dining/function room. The home is bright and airy with well-maintained enclosed gardens for people to use.

At the time of the inspection there were 26 people living in the care home.

About the inspection

This was an unannounced inspection which took place on 9 and 10 August 2026 between the hours of 0730 and 1500. 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:

- registration information,
- information submitted by the service

This was the first inspection of the service.

In making our evaluations of the service we:

- spoke with eight people using the service and five of their relatives
- spoke with 11 members of staff and two of the management team
- observed practice and daily life
- reviewed documents

Key messages

- People benefited from positive relationships with a committed staff team who knew them well.
- People had access to a very good range of activities and local community links based on their preferences.
- Quality assurances processes involved the staff team and resulted in improvements.
- The environment was well maintained and presented, providing a choice of social spaces.
- Personal plans were person centred and directed staff on peoples needs and how they liked them to be met.
- Decisions related to staffing arrangements should be more transparent

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 leadership?	5 - Very Good
How good is our staff team?	4 - Good
How good is our setting?	5 - Very Good
How well is our care and support planned?	5 - Very 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 found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People's health and wellbeing should benefit from their care and support. We observed a team of dedicated and compassionate staff who clearly knew and cared for the people they supported. Interactions and engagements we witnessed and heard about, confirmed that staff treated people with compassion, dignity and respect. One person told us 'they are good bunch... they are just fantastic' whilst a relative commented 'the staff are very good.....they interact very well'. This helped to make people feel valued.

Staff responded to changes in health and wellbeing and liaised with external health professionals, such as General Practitioners when needed. Staff made timely referrals to doctors, speech and language or dietician professionals when required. This supported individuals to have the right support from the right people. Relatives that we spoke with confirmed that communication was good. One relative commented 'the staff were very good at getting in touch and then keeping me up to date as things progressed'. This approach ensured that families were updated and involved in changes to care.

People benefited from access to a well presented, varied and well-balanced diet. The menu was displayed and staff offered visual choices at the point of service. When individuals were unable to select what they would like, staff were patient in their approach and took time with people. Staff were observed to offer alternatives to what was on the menu until they found something that people would like to try. This helped ensure people got drinks, meals and snacks they liked. Meals were enjoyed in an unhurried, relaxed atmosphere with people choosing where they preferred to eat. One person told us 'the food is lovely, there is plenty choice'. This promoted good nutritional intake. When required, appropriate monitoring and recording of peoples food and fluid intake was undertaken. This promoted health and wellbeing through improved nutrition and hydration.

Medication was managed effectively using an electronic system. This supported people to take the right medication at the right time. There was guidance available for staff on the administration of 'as required' medication. The medication system created follow up actions for staff when this medication was administered. This ensured that any follow up action needed was prompted and completed.

There was a range of equipment available to support people to be as independent as possible whilst monitoring for risk such as falls. This approach promoted the least restrictive approach whilst also allowing individuals to be as mobile as possible.

Staff ensured people had opportunities to take part in a range of meaningful activities such as gardening, intergenerational activities, pet therapy, arts & crafts, musical activity such as violin and harp concerts, cycling and trips to the local community with staff. Links with the local community helped keep people connected. This included a planned 'beach clean up' at the local beach. This allowed those living and working in the care home to come together with volunteers and families to litter pick on the local beach. It was clear people enjoyed these activities. One relative told us 'he does enjoy taking part in the activities, I didn't think he (person supported) would but staff support him', whilst an individual supported advised 'I like to keep busy and there is plenty to do'. An activity worker had been recruited to promote socialisation opportunities.

How good is our leadership? 5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People spoke positively about the management team who were responsive, approachable and supportive. One relative told us 'I speak with them (the managers) every time I visit, they are always around'.

The management team worked well together. Strong leadership and effective quality assurance processes supported a culture of continuous improvement. Completed quality audits gave managers good oversight of key areas, including personal planning, risk assessments, medication management, nutrition, accidents, the environment and individuals experiences. Quality assurance processes included the wider staff team, which contributed to the staff team striving to get things right for people. An electronic system allowed the management team to share the audits with the staff team and designate and follow up specific actions. Action plans were regularly reviewed to monitor progress. This allowed managers and the staff team to measure what improvements had been made and what remained outstanding. This process ensured quality assurance informed improvement.

Daily departmental meetings took place promoting effective communication. This ensured a coordinated approach was embedded into daily running of the service.

An electronic overview of accident and incidents allowed reporting of events by the staff team and any corrective actions taken by the management team. This demonstrated a lessons learned approach which helped ensure learning was taken from unplanned incidents. Staff debriefing following adverse events demonstrated that staff had the opportunity to reflect on unplanned events.

An appropriate complaint policy and procedure allowed the management team to evidence what actions had been taken should any complaints or concerns be received.

Meetings gathered the views of people using the service, those closest to them and the staff team. This allowed for individuals to share their experiences. These views were used to shape the ongoing service improvement plan which identified strengths and where improvement was required. We discuss in Key Question 3 how these meetings could be developed further. The management team had begun to explore self evaluation of the service. This would enhance the current quality assurance processes.

How good is our staff team? 4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. The strengths identified had a positive impact on peoples experiences.

We received positive comments in relation to the staff in the care home and how they supported individuals. One person commented 'staff are very responsive to changes, can't fault them' whilst another person told us 'staff are very good, they keep me updated'.

Staffing arrangements were determined by regular assessment of peoples care needs and expressed wishes. We observed staff working together and being deployed where needed. Overall, there were enough staff to meet the needs of individuals. We received mixed feedback from staff on the staffing levels in the care home. Staff were unsure if staffing numbers could be increased in response to specific challenges or events and were also unclear of the process used to calculate staffing levels. We asked the management team to review this element of the safer staffing method with staff. The management team gave a commitment to this.

People should have confidence that the people who support them are trained, competent and skilled. A blended approach had been used with staff training. E-learning covered a wide range of mandatory training. The staff team engaged with the training provided. Staff practice was assessed using observations of practice. This helped to ensure that staff worked consistently to the expected standard. The service was working with staff to identify and select staff to 'champion' roles for specific areas or topics. This included end of life care, nutrition, dementia and continence. This helps promote best practice.

Staff told us they had access to the management team. This gave them the opportunity to discuss the service and areas for development. We discussed how these natural opportunities could be used to request staff views on staffing and share updates. This would enhance this area going forward.

People could be confident that new staff had been recruited safely and the recruitment process reflected the principles of 'Safer Recruitment, Through Better Recruitment'. When needed, staff were prompted and supported to register with the appropriate workforce regulator. This helped to keep people safe.

How good is our setting? 5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

The layout of the environment meant people could move around easily. This promoted individuals' independence. The environment was clean, tidy and clutter free. The staff team promoted a welcoming environment and atmosphere in the care home. Although designed for small group living, the environment was adaptable which meant that different communities could come together. This allowed people to meet other people living in the care home. One relative commented 'very impressed by the care home, it is gorgeous'.

There was a community café available at the main entrance. This was well used by those living and visiting the care home. This provided an additional space for people to spend their time.

Bedrooms were single occupancy with en-suite shower facilities, and had been personalised when individuals wished for this. This promoted privacy and a sense of belonging. There was a range of equipment including falls mats, falls sensors and bed sensors. These helped to keep people safe.

The service benefited from a large enclosed, accessible , well maintained garden. This provided individuals with a choice of areas where they could spend their time, with little assistance needed from the staff team. The service promoted a gardening club. This allowed individuals to become involved in picking and planting seasonal plants and flowers. We could see that new hedges and shrubbery had been planted. This had the intention of providing additional privacy once fully grown. It was clear that staff had worked hard to make the outside space an inviting and purposeful space for individual to spend their time. Balcony spaces offered additional outdoor space for when these units were fully operational.

We asked the service to monitor and review the signage in the care home. We were assured that a dementia specific environmental audit would be undertaken when the care home occupancy increased. This would allow the service to consider how people used the space and what changes would provide positive outcomes.

There was a clear system in place to report and request repairs. Repairs were followed up in a timely manner. Equipment checks were completed as expected. Maintenance arrangements helped to keep people safe and comfortable.

How well is our care and support planned? 5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Personal plans helped to direct staff about peoples support needs and their choices and wishes. Personal plans were written in a person-centred way and involved those living in the care home. The service was working with staff through quality assurance to identify when expected standards had not been met. There was evidence of people and/or those closest to them being involved in planning and reviewing care, when they wished. This helped ensure people were receiving the right care for them. Life history work was being completed in partnership with others. This was important to provide staff with sufficient detail to get to know people.

When needed, we found that the service compiled additional plans for specific health related conditions or changes. This helped to ensure that staff had the most relevant information to support people.

It is important for services to keep clear and accurate records of care delivery and how this impacted on individuals. Clear and detailed accounts of care for individuals were written in a respectful manner. Work was ongoing with the staff team to highlight and rectify daily entries that missed the opportunity to reflect outcomes for people. This would help ensure that people benefited from their planned care interventions.

Personal plans were reviewed and updated regularly to account of people's changing needs. Quality assurance systems ensured that care was delivered in line with the information provided and that plans gave an accurate refection of needs and wishes. We asked the service to continue to use quality assurance processes to ensure that when changes had been identified, that this was consistently resulting in a change to plan rather than just the evaluation.

A review schedule detailed six-monthly reviews that had taken place and those planned. This is important to give those living in the care home and those closest to them the opportunity to be involved in their care and support.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.scot.

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 leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good

How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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