

Glebe House Care Home Care Home Service

Cumnock Road
Dalmellington
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Telephone: 01292 551 289

Type of inspection:
Unannounced

Completed on:
25 February 2025

Service provided by:
West Coast Care Limited

Service provider number:
SP2014012273

Service no:
CS2017354628

About the service

Glebe House Care Home is registered to provide a care service to a maximum of 44 adults and older people with physical/sensory difficulties, dementia/memory impairment, life limiting conditions and/or mental health conditions.

The service registered with the Care Inspectorate on 21 June 2018. The provider is West Coast Care Limited.

The care home is located on the outskirts of the village of Dalmellington in East Ayrshire. The home is purpose-built with 44 single bedrooms with en-suite facilities on ground floor level.

Accommodation is all single bedrooms with en-suite facilities. There are three sitting rooms and a large dining room for the use of people living in the service. There is access to a large garden.

About the inspection

This was an unannounced inspection which took place on 24 February 2025. 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 people using the service and received feedback from their family members
- spoke with staff and management
- observed practice and daily life
- reviewed documents
- received feedback from visiting professionals

Key messages

There were warm and compassionate relationships between people living in Glebe House and the staff who supported them.

Staff worked very well together and understood the health and support needs of people living in Glebe House.

Staff teams were led by a skilled and competent management team.

The atmosphere of the home was friendly and welcoming.

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?	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**.

Staff demonstrated compassion and kindness when supporting people. Staff engaged with people living in Glebe House with a calm and unhurried approach. We saw very good examples of genuine, warm connections, which resulted in positive responses from people being supported. We saw that people were viewed as individuals and that there was a culture of courtesy between staff and people using the service resulting in an ethos of respect and dignity.

The choices and preferences of people living in the home were supported very well by staff who were familiar with individual's needs.

Staff showed consideration and kindness towards people which helped to create a relaxed atmosphere.

People told us,

"Staff are very nice , they are friendly and kind".

"When I wasn't well recently the staff took very good care of me".

"The staff are great, they help me when I need it".

"I like to walk as much as I can, staff support me with this, it helps keeps me on my feet".

"I've lived in other places , this one is the best with the best staff".

Staff understood the importance of involving people in meaningful activity to help their wellbeing and support good mental health. There was a good range of meaningful activities for people to take part in the activity team had developed community links to support people to keep in touch with groups in their local area.

People told us about some of the activities they enjoyed, such as, getting out in the garden, going shopping and musical entertainment.

The catering and care staff were aware of people's dietary choices and ensured that people were offered the diet that supported their nutritional needs. People commented positively about the quality of food and how much they enjoyed it. Mealtimes were well managed and people were supported to enjoy their meals in a calm, unhurried way. Drinks and snacks were available between meals to support people hydration and nutrition.

Personal plans were up to date which helped to guide staff about the agreed care for the person and ensured a consistent approach. Risk assessments were up to date and reflected into plans of care. This helped to minimise risk and safeguard people.

Personal plans included good information regarding people's choices and people's preferred routines. This ensured that people's choices were respected.

Care plans were being regularly reviewed and audited to ensure that they are reflective of people's current care and support.

There were comprehensive clinical governance processes in place which informed regular review and discussion about the management of individuals' clinical risks. This ensured that people's healthcare needs were effectively supported.

Medication was being managed safely and effectively to support people's health needs.

Senior care staff and nurses were knowledgeable about who to call on for support and advice regarding people's health needs. Records showed the contact made with healthcare professionals. We saw that they were called promptly for advice and support when people became unwell. The outcomes of advice were reflected into care records. Family members commented staff kept them up to date with any changes in their relative's health.

Visiting professionals commented positively about the care and support people received from the staff team at Glebe House. They said that staff were organised, knowledgeable and skilled. They said that staff know residents well and not only supported people's health needs but also their social needs. Visiting professionals spoke about a holistic approach to care and support of people living in the home.

We saw that the home was clean by housekeeping staff who were aware of their responsibilities to safeguard people from infection by maintaining good standards of cleanliness in the home. Regular monitoring of cleanliness and adherence to current infection prevention and control guidance ensured that the high standards were maintained. People we spoke with commented positively about the cleanliness of the home.

How good is our staff team?

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 we talked with during the inspection spoke positively about the skills of staff and the care they gave. They described staff as caring, kind and hard working. People said,

"Staff don't know the word no to any of my problems".

" My mum is content at Glebe House, she always has nice things to say about the staff".

" The staff are very good at keeping in touch with updates when there are changes in my relatives health".

" I'm confident that my mums' choices are respected, and staff try to maintain her preferred routines".

We saw staff were working hard to ensure the best of care for the people they support. Staff told us they feel supported by the management team and their peers. They commented that Glebe House was a good place to work. This contributed to a friendly and welcoming ethos in the home.

Staff teams were well led by a visible and skilled management team. There were effective communication pathways in place with regular staff and heads of department meetings. This resulted in effective teamwork with staff working well together, which supported good outcomes for people. The positive teamworking and good communication was commented on by relatives and visiting professionals.

Staff had access to regular supervision sessions with their line manager. This gave opportunity to reflect on their practice and discuss learning and development needs. This ensured that people were supported by staff teams who understood their responsibilities to deliver safe and effective care.

Staff roles were clearly defined and understood by staff. We saw flexibility in staff teams with some staff working across teams when needed to ensure the best outcomes for the people they were supporting.

We saw that people were being supported by responsive and attentive staff. The care teams were deployed and directed effectively by skilled and competent team leaders. This ensured that people were receiving the care they needed at the time they needed it.

The service was using a responsive dependency assessment tool to ensure that there were sufficient numbers of staff with the appropriate skills available at the right times to effectively support people. The factors influencing staffing requirements were being regularly reviewed and informing changes as needed in teams working in the home. This ensures that people were effectively supported, and the very good outcomes we observed would be consistently achieved.

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 support people's nutrition needs and develop a sociable experience the provider should review and develop the management of mealtimes.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I can enjoy unhurried snack and mealtimes in as relaxed an atmosphere as possible" (HSCS 1.35).

This area for improvement was made on 21 July 2022.

Action taken since then

We observed that mealtimes were well managed with staff being deployed appropriately to support people with eating and drinking. Mealtimes were unhurried which ensure that people could enjoy their meals at their own pace. This resulted in a sociable mealtime experience for people which helped to support their nutritional needs.

This area for improvement has been implemented.

Previous area for improvement 2

To enhance the culture of continuous service improvement the provider should implement a plan to support the service to achieve a consistent approach to assessing and monitoring service provision.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: "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 21 July 2022.

Action taken since then

The providers quality assurance system was being used effectively to assess and monitor service provision. Outcomes of quality audits were informing service improvement resulting in the very good outcomes for people we observed during the inspection.

This area for improvement has been implemented.

Previous area for improvement 3

To ensure consistency of approach to assessment and monitoring of cleanliness of mattresses and pressure relieving equipment, the provider should ensure that regular audits are carried out and outcomes actioned.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: "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 21 July 2022.

Action taken since then

There were robust process in place to regularly check the cleanliness of mattresses and pressure relieving equipment. Action was being taken to clean or replace this equipment when issues were identified.

This area for improvement has been implemented.

Previous area for improvement 4

To ensure the information in personal plans is accurate and up to date, the provider should ensure that the outcomes of audits are fully actioned.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: "My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices" (HSCS 1.15), and "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 21 July 2022.

Action taken since then

Personal plans were reflective of the management of people's current care and support needs. Information was up to date and regularly reviewed. This ensured that staff were directed to deliver consistent and agreed care to effectively support peoples needs.

This area for improvement has been implemented.

Complaints

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

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?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

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