

# Alexander House Care Home Care Home Service

Main Street  
Crossgates  
Cowdenbeath  
KY4 8DF

Telephone: 01383 518 080

**Type of inspection:**  
Unannounced

**Completed on:**  
17 February 2025

**Service provided by:**  
Holmes Care Group Scotland Ltd

**Service provider number:**  
SP2020013480

**Service no:**  
CS2023000159

## About the service

Alexander House Care Home is a care home for older people, situated in the residential area of Crossgates, Fife, close to local transport links, shops and community services. The service provides nursing and social care for up to 44 people. The home has a pleasant garden area and accommodation is provided over three floors. All rooms have en-suite toilets and shower facilities, and four rooms can accommodate couples. Each floor has an open plan lounge/ dining room and a passenger lift.

At the time of this inspection, the top floor was not in use.

Alexander House Care Home was re-registered with the Care Inspectorate on 05 June 2023 to provide 24 hour care and support for up to 40 people. The service is provided by Holmes Care Group Scotland Ltd.

## About the inspection

This was an unannounced follow up inspection which took place on 17 February 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 six people using the service
- spoke with staff and management
- observed practice and daily life
- reviewed documents

## Key messages

The service had met the outstanding requirement. We were reassured the temperature was comfortable for people living in the service and this was being monitored.

Managers continue to work towards meeting outstanding areas for improvement.

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

### Requirements

#### Requirement 1

By 7 February 2025, in order to ensure the welfare of people using the service, the provider must ensure that the temperatures in all areas of the home are monitored and appropriately adjusted to ensure service users are comfortable and warm.

This is to comply with Regulation 10(2)(c) and 4(1)(a) 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 environment has plenty of natural light and fresh air, and the lighting, ventilation and heating can be adjusted to meet my needs and wishes.' (HSCS 5.19).

This requirement was made on 7 January 2025.

#### Action taken on previous requirement

We spoke with the manager during this inspection who assured us temperatures throughout the service were being regularly monitored and maintained. The service felt comfortable and warm during our visit. We spoke with people who all told us they felt the temperature was comfortable. People we spoke with and observed were appropriately dressed and blankets were being utilised for some.

We accessed communal areas and bedrooms throughout the service. We found thermometers attached to walls in all bedrooms. All temperatures were within comfortable ranges. We sampled documents and found evidence of staff recording the temperatures in bedrooms each evening. We suggested the service record temperatures in the morning to further ensure a consistently comfortable temperature is maintained.

Following the last inspection the manager identified areas where practice could have been improved and has taken actions to assure changes are made. The service had implemented additional checks to the heating system. The manager also developed a temporary heating arrangements protocol. This was clear and accessible to staff in the duty room. We felt confident the necessary steps had been taken to keep people warm and comfortable, including in the event of an unexpected breakdown in the heating system.

As a result, this requirement had been 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

The service should promote the health and welfare of people using the service by ensuring that all food items are stored appropriately. Where containers are used to store ingredients these should be labelled, cleaned and replenished regularly in a way which ensures that all items are within their use by dates.

**This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.22).**

**This area for improvement was made on 20 November 2024.**

#### Action taken since then

Given the short timescale since the last inspection we did not assess this area for improvement. This will be reassessed at the next inspection.

#### Previous area for improvement 2

In order to promote peoples dignity and wellbeing the provider should ensure people have their own clothing. The provider should ensure there is a robust laundry system is in place, where residents' clothes are identifiable, cleaned and returned to them in a timely manner.

**This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I use a service and organisation that are well led and managed (HSCS, 4.23) and 'My care and support meets my needs and is right for me' (HSCS, 1.19).**

**This area for improvement was made on 20 November 2024.**

#### Action taken since then

Given the short timescale since the last inspection we did not assess this area for improvement. This will be reassessed at the next inspection.

#### Previous area for improvement 3

The provider should ensure a consistent approach to medication administration, the provider should ensure:

- "As required" medication protocols are in place for anyone in receipt of "as required" medication, including any non-pharmacological intervention strategies to be used, prior to administration of as required medication. The outcome of any "as required" medication administered, should also be recorded on the reverse of the medication administration recording sheet.

- Ensuring that any source of medication in the home is stored securely in order to protect vulnerable people.

- Ensuring that storage facilities for medication are maintained at an optimal temperature.

**This ensures care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "Any treatment or intervention that I experience is safe and effective" (HSCS 1.24).**

This area for improvement was made on 17 June 2024.

## Action taken since then

Given the short timescale since the last inspection we did not assess this area for improvement. This will be reassessed at the next inspection.

## Previous area for improvement 4

The provider should ensure that all stakeholders (particularly people living in the home and their families) are kept informed of management arrangements, and are kept up to date with any changes. This is to ensure that people feel confident in the leadership arrangements and who to approach if they need support.

**This is to ensure that care and support is consistent with Health and Social Care Standards which state that "I use a service and organisation that are well led and managed" (HSCS 4.23).**

This area for improvement was made on 17 June 2024.

This area for improvement was made on 17 June 2024.

## Action taken since then

Given the short timescale since the last inspection we did not assess this area for improvement. This will be reassessed at the next inspection.

## Previous area for improvement 5

The provider should ensure that audit processes are effective in identifying areas for improvement, and use these findings as well as findings from other sources such as inspection and the views of others, to implement a development/improvement plan that identifies who is responsible for the improvement and timescales for that work to be undertaken.

**This is to ensure that care and support is consistent with 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 17 June 2024.

This area for improvement was made on 17 June 2024.

## Action taken since then

Given the short timescale since the last inspection we did not assess this area for improvement. This will be reassessed at the next inspection.

## Previous area for improvement 6

The provider should ensure staff receive regular supervision to ensure learning and development needs are assessed and for reflective review of the learning experience.

**This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).**

This area for improvement was made on 17 June 2024.

This area for improvement was made on 17 June 2024.

#### Action taken since then

Given the short timescale since the last inspection we did not assess this area for improvement. This will be reassessed at the next inspection.

#### Previous area for improvement 7

The provider should ensure that staff are deployed in such a way that benefits people using the service and to ensure availability of staff to support people timeously. This should include taking account of the views of staff, people using the service and their relatives.

**This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: "My needs are met by the right number of people" (HSCS 3.15) and "I am confident that people respond promptly, including when I ask for help (HSCS 3.17).**

This area for improvement was made on 17 June 2024.

**This area for improvement was made on 17 June 2024.**

#### Action taken since then

Given the short timescale since the last inspection we did not assess this area for improvement. This will be reassessed at the next inspection.

#### Previous area for improvement 8

To ensure positive outcomes for people who use this service the provider should;

- a) Be able to demonstrate that personal care documentation and records are accurate, sufficiently detailed and reflect the care/ support planned and provided.
- b) Ensure that people and their families (where appropriate) are invited to contribute to the plans.
- c) Be able to show evidence of regular ongoing monitoring and evaluation of records to demonstrate that staff have a clear understanding about their role and responsibilities, to meet people's personal care needs and can demonstrate this through their practice.

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

This area for improvement was made on 17 June 2024.

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#### Action taken since then

Given the short timescale since the last inspection we did not assess this area for improvement. This will be reassessed at the next inspection.

## 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).

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