

Greenhills Care Home Care Home Service

Broughton Road
Biggar
ML12 6HA

Telephone: 01899 229 111

Type of inspection:
Unannounced

Completed on:
3 April 2025

Service provided by:
Thistle Healthcare Limited

Service provider number:
SP2003002348

Service no:
CS2003010577

About the service

Greenhills Care Home is registered to provide a care service to a maximum of 45 older people. The provider is Thistle Healthcare Limited.

The home is situated within a quiet, residential area of Biggar and is accessible to public transport links, local shops and amenities. A car park is available to visitors.

The home is purpose built split into three areas all on one level. All bedrooms have full ensuite with showering facilities and people are encouraged to bring in their own furnishings and decorate their rooms to their own preference.

There are two communal lounges and dining areas as well as a hairdressing salon and pantry area for people and relatives to use. The garden provides seated areas for residents and relatives, with lovely views over the surrounding countryside.

At the time of the inspection 36 people were living in the home.

About the inspection

This was an unannounced inspection which took place on 2 and 3 April 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 16 people using the service who were able to give their opinion and four relatives.
- for people unable to express their views, we observed interactions with staff and how they spent their time.
- spoke with staff and management.
- observed practice and daily life.
- reviewed documentation.
- spoke with two visiting professionals.

Key messages

- Staff knew people well and treated them with kindness and respect.
- The service was well led with the manager being approachable and supportive.
- People's wellbeing benefitted from regular activity and social opportunities.
- The home was clean and welcoming.
- The service should improve oral health care plans.
- From the findings of this inspection, we have made four areas for improvement.

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?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good
How good is our setting?	4 - Good
How well is our care and support planned?	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?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People told us that staff interacted warmly and respectfully with them. Staff had meaningful conversations with people who experienced care which had a positive impact on how people felt listened to. This supported good conversations and growing good relationships and gave people a strong sense of their own identity and wellbeing. We were told that care and support was carried out in a dignified way and personal preferences and choices respected.

Feedback was positive about the quality of care and support people received. Comments included "I have no complaints, I am very comfortable here" "staff are very friendly and know me well" and "this is a lovely home, there is always something going on." Relatives' comments included "My husband is very happy here; I am kept well informed and always made to feel welcome".

People enjoyed coming together for meals. Staff ensured that mealtimes were relaxed, enjoyable and sociable. People were offered alternatives if choices available were not to their taste. We discussed with the manager the layout of the dining room to ensure space was used effectively to promote safety and not overcrowded. Action was taken immediately, and changes were made. People's health and wellbeing benefitted from the provision of high quality and well-presented food.

Activities were currently led by care staff who had received training for this role. The service also had employed a wellbeing and dementia lead to support staff and people's wellbeing. People's preferences for activities were noted in their personal plans. People were provided with a weekly activity plan which included physical exercise classes, entertainment, arts and crafts and community engagement. Relationships between people experiencing care were developed because of well provided activities.

To meet people's medical needs, the service had a safe, well-managed medication system. Staff had received training, and had clear guidance, to support this task safely. Medication care plans were detailed and directed support. There was oversight of medication management which included reporting of errors and actions recorded. We were confident that people's medication needs were being regularly reviewed and monitored.

People's health benefitted from good engagement with other health services. Other health professionals we spoke with told us staff were quick to act on health-related issues and were responsive to any advice given. This approach helped people keep well and ensured their health needs were being met.

People had personal plans in place which set out how their health and care needs would be met. Staff demonstrated an understanding of the needs of people. Personal plans and risk assessments showed each area of care and support informed staff how to deliver care safely and took account of their personal preferences.

How good is our leadership?**4 - Good**

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

The manager had a proactive approach to driving improvement. A service improvement plan was in place which was linked to a self-evaluation based on the quality framework for care homes for older people. We discussed with the manager how to develop this further ensuring that all areas of improvements are recorded.

We found there were effective quality assurance processes in place. There was a schedule for audits to be carried out in respect of all aspects of clinical, environmental and staff practice. There was evidence that the audits had been carried out as planned. Where areas for improvement were highlighted, actions to remedy issues were identified. Personal plans were reviewed and updated regularly ensuring care was responsive to people's individual needs.

Several staff members were identified as Quality Champions for a range of key aspects care. This fostered shared accountability for quality improvement across the staff team.

We received positive feedback on the management and leadership within the service. The staff told us they were well supported and listened to. All groups of staff had regular meetings, and the minutes showed that there was a focus on improving the quality of care provided. Quality assurance and service improvement was not always reflected in the minutes of staff meetings. Consideration should be given to how best to engage all staff in self-evaluation to ensure a shared responsibility for service improvement. (See area for Improvement 1)

We saw regular meetings were planned with residents and relatives, and surveys had been undertaken. This allowed people to be involved in evaluating the quality of the service. The service had shared actions taken as a result of feedback. This ensured that people experiencing care and support, and their relatives could influence the direction of the service.

Areas for improvement

1. In order to achieve comprehensive quality assurance and service improvement, the provider should ensure that all staff have the opportunity to be involved in and contribute to the self-evaluation of the service.

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)

How good is our staff team?**4 - Good**

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Staffing requirements were identified through regular assessment of people's care needs. We observed that the atmosphere in the home was calm and that there was sufficient staff on duty to meet the needs of residents. Staff told us that they always have time to engage meaningfully with residents and we observed interactions that were kind and compassionate.

Staff spoke positively about their role within the service, and the value of working within a supportive team. They had participated in a wide range of training and all of those we spoke to felt that this had provided them with the necessary skills to carry out their work confidently. Several staff members told us about their plans to embark upon further learning.

There was effective communication between the management team and care staff. Staff meetings and supervision sessions were taking place regularly. Staff handovers were detailed and supported staff to be knowledgeable about people's needs. This supported effective communication and better outcomes for people.

Supervision sessions provided staff with an opportunity to talk about areas of work practice. This helped identify any learning needs, providing better outcomes for people. The approach to staff development in the service meant that residents could be confident that the people who support them are trained, competent and skilled. There was a system in place to monitor the appropriate registration of staff members. This meant that there was clear oversight of when registrations required to be renewed.

How good is our setting?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

The home was warm and welcoming. We saw that there was a variety of spaces for people to enjoy in the home, with a mixture of busier and quieter seating areas. The service had plans to create a sensory and wellbeing room to increase activity options for people. We observed people freely accessing different spaces at the time of inspection. This meant that people could choose where to spend their day and have privacy when they wanted.

The home had been working to make the home dementia friendly. A Kings Fund Tool was used to assess this, and some areas had been actioned. The home continued to work on areas identified to enhance the setting to good practice and improve outcomes for people.

The communal areas were welcoming, spacious and tidy. The environment and equipment were generally cleaned to a high standard and well maintained. However, we found one bedroom to be malodorous. Although this should not have taken for us to raise this, the manager was responsive and took action to have this addressed.

Maintenance records were in good order, with a clear process for highlighting any required work. Any issues reported were actioned quickly, promoting people's health and safety. We found some gaps in fire safety records. Improved record keeping and oversight is needed to ensure all relevant checks take place. This will ensure people are kept safe from harm. (See area for improvement 1)

An environment improvement plan was in place. The home continued to make improvements to the environment and had completed many areas of refurbishment such as painting and decorating. Some areas

could me more detailed in relation to what needs to be completed and by when. A timely response is needed to ensure people experience a high-quality environment. (See area for improvement 2)

There were well-kept enclosed gardens for people to use. People could independently use the garden, weather permitting. We saw people enjoying activities in the garden and the different seating areas supported options for people to enjoy a social space with family and friends. People chose where to spend their time.

Areas for improvement

1. In order for people to be kept safe, the provider should ensure fire safety records are completed in a timely manner and follow best practice guidance.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state, "I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment." (HSCS 5.24)

2. The provider should ensure that the service addresses maintenance and environmental needs identified in the service action plans in a timely manner.

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

How well is our care and support planned?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Personal plans were clear for staff to follow and provided details of people's healthcare needs, abilities, and choices. The plans contained details on specific health conditions and information about the support required to help keep people well. This helped give staff a good understanding of the support needed when providing care to individuals.

We could see personal plans being regularly reviewed and updated in response to people's changing needs. This gave us confidence that they accurately reflect individual needs.

We found people did not have oral health care plans in place. Oral health had been supported daily, and staff had recorded when this had taken place. The lack of information in plans meant that we could not be confident people had their needs and preferences met. (See area for improvement 1)

People's care reviews had not all been completed within the expected timescale. The manager had oversight of this a plan was place for these to be undertaken. Review meetings should allow the opportunity to evaluate if people's needs and what is important to them are being met.

Risk assessments were kept up to date and showed actions to keep people safe. There was evidence of links and regular contact with GP's and external health professionals for advice and support. This ensures people receive timely and responsive care.

We found people had future planning wishes recorded. Discussions had taken place around what matters to people and their families. This ensures people's rights and wishes are considered when their health deteriorates.

Areas for improvement

1. The provider should ensure that personal plans accurately reflect the current needs of service users and ensure that care is delivered in accordance with those needs. In order to do this all service users' personal plans must:

- a) Reflect the assessed current oral health care needs of service users.
- b) Provide clear written and verbal direction to staff so that care is delivered in accordance with service users' needs.
- c) Reflect risks that have been identified by the service and health professionals, and steps to be taken to reduce and/or mitigate the risks.

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?	4 - Good
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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