

Hector House (Glasgow) Ltd Care Home Service

Hector House
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Glasgow
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Telephone: 01416 325 767

Type of inspection:
Announced

Completed on:
18 June 2025

Service provided by:
Hector House (Glasgow) Ltd

Service provider number:
SP2003000206

Service no:
CS2008173617

About the service

Hector House is a care home service registered to provide care for 16 older people. This large converted semi-detached Victorian villa is located in the south side of Glasgow.

It is close to a railway station, bus stops and a range of local facilities including shops and places to eat.

The accommodation is on three levels which can be accessed by stairs or a stair lift. Residents occupy the ground and first floor.

There is a staff office and a bedroom that can be used by family for overnight use should they require to be close to their loved one at end of life.

All bedrooms are equipped with a sink and toilet. There is a living room with large screen television, a separate dining room and a small snug area with a television. To the back of the home, there is an accessible garden with grassed and paved areas with seating and a range of greenery and plants. At the time of the inspection, there were 11 people living at the service.

About the inspection

This was an unannounced inspection which took place between 16 and 18 June 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 and complaints information, information submitted by the service and intelligence gathered throughout the inspection year. In making our evaluations of the service we:

- We spoke with six people using the service and five of their family representatives.
- We spoke with eight staff and management.
- We spoke to one professional.
- We observed practice and daily life.
- We reviewed documents.

Key messages

- People benefited from good quality support from a dedicated staff team familiar with their needs and preferences.
- There was a strong sense of community in the home. This helped people feel valued and gave a sense of belonging.
- People were very satisfied with their care arrangements.
- The service was led by approachable and responsive manager who was committed to making improvements.
- Personal plans were person centred and directed staff on how they should provide care and support in accordance with people's needs and wishes.

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's health and wellbeing should benefit from their care and support. Residents spoke highly of a small, stable team of dedicated staff who supported them. One person told us "the staff are really good and do whatever they can for me". There was a strong sense of community in the home. This helped people feel valued and gave a sense of belonging.

Families of people supported were positive about the care provided at Hector House. A relative told us "the staff are good" and "they contact us if needed". This showed that families had confidence in the staff team and felt well informed.

Meaningful activity and social engagement promoted wellbeing. People benefited from social events in shared lounge areas. Residents enjoyed shared celebrations which helped establish and maintain relationships with other people. We heard about additional events such as Father's Day celebrations, gardening, VE Day celebrations, and connections with the local community. Comments from people included "The activities are good". Staff demonstrated a strong commitment to ensuring people got the most out of life. We saw that people were enabled to be independent where possible. People were being encouraged with household tasks in the home such as cleaning, cooking and laundry. This gave a sense of purpose and achievement.

There was a relaxed atmosphere at mealtimes. Where people required help to eat and drink, staff provided this in a discreet, kind and timely manner. This meant that people were supported at a pace that suited them. Overall, people we spoke with were happy with the meal arrangements, the service had responded to one family's concerns around menu planning. Staff were aware of how to use monitoring charts for people who may be at risk of not drinking or eating enough to keep them well.

Staff were knowledgeable about people's care and support needs. Staff responded to changes in health care needs and liaised with external health professionals. This helped to keep people well. We received positive feedback from external professionals. One person told us "I find the staff really helpful, and they know people well".

When additional needs had been identified, such as falls, the service introduced appropriate assessments and support plans. This allowed the staff to monitor what worked for people.

Systems were in place to support safe medication administration practice and help ensure individuals were supported to take the right medication at the right time.

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.

People can expect a service that is managed well. The staff team spoke positively about the manager who was seen as being approachable and supportive. The manager was receptive to suggested improvements.

and demonstrated a commitment to continue to develop Hector House.

A range of audits assessed the quality of the service and compliance to expected standards. The manager had a service improvement plan. This was regularly updated to reflect the areas where improvement was needed, the timeframe and individual responsible for actioning and following up. This would be enhanced by including the outcome of audits undertaken. The manager also completed a self-evaluation to regularly evaluate progress to confirm positive change in the service. This helped to promote a positive learning and development culture within the service.

Appropriate systems were in place to monitor staff were registered with the appropriate professional body where required. Checks on staff practice and oversight of training helped ensure that staff were knowledgeable and worked to the expected standards.

The manager maintained an overview of accidents and incidents. A lesson learned approach helped ensure learning was taken from any unplanned incidents. Management documented actions undertaken following adverse events which demonstrated reflection on events and actions taken.

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.

The staff team were well established and worked well together. There was respectful communication within the team which created a warm atmosphere because of good working relationships. People received care from consistent staff who knew them well and who had built up caring relationships with them. The staff appeared motivated and positive feedback was received from those they supported.

It was evident that all staff had access to relevant training to meet the ongoing care and support needs of people. A training matrix was monitored by the manager to ensure staff training was up-to-date and reflected best practice.

Staff expressed the management team were knowledgeable and supportive of their work. They demonstrated an understanding of the nature and challenges associated with supporting the people they cared for. Additionally, they described manager as open and approachable, fostering a supportive and collaborative work environment.

There were opportunities for staff to discuss aspects of their work, development and wellbeing through team discussions, reflective accounts and formal supervision. This meant staff felt listened to and valued.

Staff arrangements were informed by assessments of people's needs. Staffing levels were increased if needs changed, for example a person living within the service who needed additional support at the end of their life. During our inspection staffing levels provided staff with sufficient time to offer compassionate care and support.

Staff were registered with the relevant professional body where required and had an understanding of their responsibilities. An induction program for new employees helped ensure staff were prepared for their role. This included shadow opportunities to facilitate introductions with people who experience care. People could be confident that safer recruitment guidance had been followed. The manager accepted our feedback on interview recording.

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.

People should benefit from safe, clean, and tidy facilities. The home had a warm inviting atmosphere. There were a range of rooms people could use including a large newly decorated sitting room with seating options to promote comfort, a small snug area, dining area and outdoor space. This meant people could have privacy if desired and a choices of where they liked to spend their time. Clean and comfortable ensuite bedrooms were single occupancy. Bedrooms had a lockable space to ensure privacy. There was a call alarm to summon assistance if needed. There were there shared bathing / showering options to promote choice.

An ongoing refurbishment plan helped ensure that Hector House was a pleasant place to live. The plan detailed refurbishment work completed and planned for both communal areas and bedrooms. It was evident that environmental improvements had taken place since the last inspection. People who use the service had been involved in choosing the décor. This helped ensure people felt listened to and were comfortable in their environment. The provider gave a commitment to continue to progress environmental improvements. We previously referred the manager to the Kings Fund Environmental audit tool when planning improvements . This is a structured environmental assessment to measure how suitable an environment is for people who live with dementia. Work had been undertaken and the findings reflected in the environmental improvement plan. (See area for improvement 1).

All staff were aware of cleaning schedules for the home and of their specific responsibilities in terms of infection prevention and control. There was no evidence of intrusive noise or smells. Staff carrying out housekeeping and cleaning in the service provided a good account of their roles and routines to ensure a good standard of cleanliness was maintained.

There were arrangements in place to ensure the home was safe and equipment was appropriately maintained. A previous area of improvement was met.

People can expect to choose to have an active life and participate in a range of recreational activities indoors and outdoors. There was a large garden for people to enjoy the fresh air and outdoor activities.. During the inspection we observed people enjoying sitting outside. We highlighted that the outdoor space could be further developed to make it a more inviting place to spend time. (See area for improvement 1).

Areas for improvement

1. Planned environmental improvements should be progressed to promote a pleasant, well maintained living indoor and outdoor living space.

This ensures 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) 5.24

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.

People can expect to be supported by staff who have the necessary information about their needs and wishes. Personal plans were person-centred and involved those living in the service. They gave good direction to staff about people's support needs and their choices. Where needs changed personal plans were updated. All plans had been reviewed in the previous six months to ensure they reflected people's current needs. There were good details about known risk factors and planned interventions to mitigate these. It was evident that staff knew people well and could respond to changes. This helped promote health and wellbeing and ensure people's support was right for them.

Services should keep clear and accurate records of daily care and support delivered and people's presentation and wellbeing. Record keeping would be further enhanced by evaluating people's experiences. The management team acknowledged this could be developed and were receptive to suggestions made during the inspection.

People had an anticipatory care plan (ACP) in place that reflected their wishes and, where appropriate, those of their representatives. Staff were familiar with people's preferences.

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

People should have confidence that staff are appropriately supported to complete training, keep skills up to date and are competent in their role. The organisation's staff training and development policy should be reviewed to reflect how staff will be supported (including which training staff will be paid to attend).

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

This area for improvement was made on 17 June 2024.

Action taken since then

The staff training and development policy had been updated to reflect staff would be paid to attend training. Effective management oversight helped ensure staff completed the required training.

This area for improvement has been met.

Previous area for improvement 2

In order that the environment (both internal and external) is used to its full potential and developed to meet current residents' needs, the manager should: Complete The King's Fund environmental tool and include the findings into the environmental improvement plan.

This ensures care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "The premises have been adapted, equipped and furnished to meet my needs and wishes." (HSCS 5.16)

This area for improvement was made on 17 June 2024.

Action taken since then

To ensure the external and external environment was used to its full potential the manager had completed a Kings fund environment audit. Improvements made were reflected in the environmental improvement plan.

This area for improvement has been met.

Previous area for improvement 3

In order that people are kept safe, environmental audits should be developed to include window restrictor checks throughout the home. The mobile hoist should be serviced aligned to current legal and manufacturer guidance.

This ensures care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "The premises have been adapted, equipped and furnished to meet my needs and wishes." (HSCS 5.16) and "My environment is secure and safe (HSCS 5.17).

This area for improvement was made on 17 June 2024.

Action taken since then

Window restrictor checks were in place, with a process for highlighting any required work of any repairs needed. Maintenance records were in good order. The hoist had been serviced aligned to current legal and manufacturer guidance. This helped to promote a safe environment for people.

This area for improvement has been met.

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
1.3 People's health and wellbeing benefits from their care and support	4 - 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
3.3 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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