

The Firs Care Home Care Home Service

12 Lowndes Street Barrhead Glasgow G78 2QX

Telephone: 01412 375 253

Type of inspection:

Unannounced

Completed on:

17 July 2025

Service provided by:

LANAM HEALTHCARE THE FIRS LTD

Service provider number:

SP2003002230

Service no: CS2013315033



Inspection report

About the service

The Firs Care Home is registered to provide care and support for up to 24 older people. The provider is Lanham Healthcare.

The home is an older style property, set on two floors with a secure garden area to the rear. A building in the grounds houses the laundry with additional storage rooms.

The service is situated in the Barrhead area of East Renfrewshire and is close to local amenities and public transport.

At the time of this inspection there were 21 people using the service.

About the inspection

This was an unannounced inspection which took place on 15, 16 and 17 July 2025 during the hours of 9:00 and 16:00. The inspection was carried out by one inspector and one inspection volunteer 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:

- Spoke with seven people who used the service and two of their relatives.
- Spoke with eight staff members and the management.
- Spoke with four visiting professionals.
- Observed practice and daily life.
- · Reviewed documents.
- Obtained feedback from eight other residents through feedback surveys.

Key messages

- The care home was warm and welcoming.
- People who used the service said they enjoyed living there.
- Staff knew people well and treated them with kindness and respect.
- Care planning was person centred.
- Families were highly complimentary about the quality of care their loved ones received.

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 setting?	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. We therefore evaluated this key question as very good.

Staff interacted positively and respectfully with residents, who appeared relaxed and well cared for. Care was delivered with warmth, kindness, and dignity, aligning with feedback from residents and families. Families praised staff as friendly, compassionate, and professional, and one resident shared feeling "completely comfortable," reflecting a strong sense of safety and wellbeing. These findings highlight a caring environment built on trust and mutual respect.

The home offered a well-structured, person-centred activity programme supporting residents' physical and mental wellbeing. A mix of group and individual activities catered to personal preferences, with external providers enriching the experience through therapeutic sessions. Staff actively engaged families via a private Facebook page featuring updates and photos, while in-home displays celebrated resident participation, fostering community and belonging.

The home's minibus enabled regular outings, helping residents stay connected with the community. Residents were supported to maintain meaningful relationships and continue valued activities, promoting independence and identity. These practices reflect a strong commitment to person-centred care and enhance quality of life.

We sampled the food and observed residents' mealtime experiences. The presentation and quality of the food were good, and feedback from residents indicated that meals were generally enjoyed. However, some residents expressed a desire for a wider variety of food options. During mealtimes, there was a visible and supportive staff presence. Individuals requiring assistance were appropriately supported in a respectful and dignified manner. Menus were clearly displayed on the wall, promoting choice and enabling residents to select alternative meals in line with their preferences or dietary requirements.

We reviewed relevant nutrition and hydration assessments and found evidence that staff were actively monitoring residents' weights. Staff spoken with, demonstrated a clear understanding of individual needs, including those requiring additional monitoring due to mobility concerns, stress and distress or food and fluid intake. We discussed with the service the importance of ensuring that fluid intake is accurately calculated and monitored, so that any emerging needs can be identified and addressed promptly. These practices reflect a commitment to maintaining residents' health and wellbeing through effective nutritional support and person-centred care.

People have the right to appropriate healthcare. We found that appropriate systems and assessments were in place to monitor and support residents' health and wellbeing. There was clear evidence of timely referrals to, and input from, a range of healthcare professionals including District Nurses, GP's, Podiatrists, Opticians, Dieticians, and Physiotherapists. This demonstrated that residents' healthcare needs were being actively monitored and managed in response to any changes.

We spoke with visiting healthcare professionals who provided positive feedback about the service. They highlighted staff's strong knowledge of individual residents and commended the effective partnership working in place. These collaborative approaches contributed to maintaining residents' health and ensuring their needs were met in a responsive and person-centred manner.

Medications were managed effectively with safe systems in place for storage, administration and recording. We were reassured people received medication that was right for them and at the right time. There were appropriate protocols for those who were prescribed, 'As Required' medication.

Personal plans were outcome-focused and guided staff in delivering appropriate care and support. The service implemented a 'Resident of the Day' approach, which allowed for a comprehensive review of an individual resident's care, support needs, and environment. This process also ensured that care plans were regularly updated. All departments, including care staff, housekeeping, maintenance, kitchen, and laundry, were actively involved, contributing to accurate and holistic documentation.

Oral health and skin care, including wound management with District Nurse support, were well managed. A recent reduction in falls was noted, though consistency in recording and reporting needed some improvement. Reassuringly, falls were handled effectively on an individual basis, and overall management, analysis, and quality assurance supported a lessons-learned approach, promoting residents' wellbeing.

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. We therefore evaluated this key question as very good.

The home presented as welcoming, clean, and secure. An appropriate entry system was in place, requiring all visitors to sign in and out, thereby promoting a safe environment for both residents and visitors.

The home was observed to be clean and well-maintained throughout. One relative commented positively on the environment, stating, "I love the atmosphere when you walk through the door, it is bright and airy and there are always bunches of flowers adorning the window space. The place smells and looks clean and fresh, no matter what time you visit."

Equipment used within the home was cleaned to a high standard, and maintenance records were up to date, with a clear process in place for identifying and addressing any required work. As a result, the general environment was safe, secure, and conducive to residents' wellbeing.

Residents benefitted from bright and spacious bedrooms, some of which included ensuite toilet facilities and lockable storage. The environment had been recently assessed to ensure that it remained dementia friendly. Each bedroom had the persons name clearly displayed so the rooms were easily identifiable and people felt familiarity within the home. Rooms were also personalised to reflect individual interests and preferences. One resident shared, "The manager sat with me, let me choose my own décor for my room. We looked through a catalogue. I picked my own curtains, bedding and pillows."

The home had a warm and welcoming lounge area, with a TV and comfortable seating. This is where people spent most of their time, mixed with others and participated in activities. There was a separate dining area and people were given the choice as to which area they wished to have their meals. The building also featured a spacious and recently refurbished conservatory, which provided a pleasant and versatile space for residents and their loved ones to enjoy. It was used both for quiet time and for hosting family celebrations, enhancing the home's welcoming and inclusive atmosphere.

The home also had access to a secure outdoor area. During the inspection, we observed residents enjoying time in the garden, which provided additional opportunities for relaxation and social engagement.



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

In order to address the recommendations, set by the Scottish Fire and Rescue service, the manager should develop an action plan detailing what has been completed and when.

This ensures care and support is consistent with the Health and Social Care Standards which states: "My environment is secure and safe". (HSCS 5.19)

This area for improvement was made on 27 March 2023.

Action taken since then

A fire safety audit has been implemented by new management. All staff have completed fire awareness and evacuation training, with e-learning refreshers available. Every resident has a Personal Emergency Evacuation Plan (PEEP). Fire drills and alarm tests are regularly conducted, and all maintenance records are current.

This Area for Improvement has been met.

Previous area for improvement 2

The service would benefit from carrying out a bespoke training needs analysis to identify which training staff require and identifying their preferred mode of learning.

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." (HSCS 3.14).

This area for improvement was made on 27 March 2023.

Action taken since then

New management has fully implemented a structured training programme delivered through both face-to-face sessions and e-learning. The programme covers, Fire Warden and Fire Risk Assessments; Care Planning and IDDSI; Visual Awareness and COSHH; MUST Step 5 Training; Continence Care; Dementia Awareness; Stress and Distress Management; Senior Carer Development and Medication Training.

This initiative ensures staff are equipped with essential knowledge and skills to maintain high standards of care and safety.

At the time of the inspection 95% of staff had completed their mandatory training.

This area for improvement has been met.

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Previous area for improvement 3

The service should ensure that care plans are used to their full potential in order that staff can support people who experience care to receive the most appropriate support. We recognise that this may require additional training in developing care plans for some staff.

This ensures care and support is consistent with the Health and Social Care Standards 1.15 which states: "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."

This area for improvement was made on 27 March 2023.

Action taken since then

All staff have completed care plan training, with ongoing one-to-one support provided by management to assist senior staff. Person-centred care plans have been implemented for all residents, alongside all relevant risk assessments.

Training is delivered through a blended approach, including In-house training, E-learning modules and External training in partnership with the Health and Social Care Partnership (HSCP)

Care planning practices are audited monthly by management to ensure quality, compliance, and continuous improvement.

This area for improvement has been met.

Previous area for improvement 4

The service should ensure that care reviews are outcome focussed and detail what people have achieved and what their goals are for moving forward.

This ensures care and support is consistent with the Health and Social Care Standards, which state that "My care and support meets my needs and is right for me." (HSCS 1:19)

This area for improvement was made on 27 March 2023.

Action taken since then

Management have implemented new paperwork for reviews which addresses any actions required from previous review and updates on current outcomes and progress.

We saw a review tracker that identified when reviews were completed and when they were due. Reviews were outcome focused and clearly documented contribution from the individual, their relatives and other significant people involved.

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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

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

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