

Mearns House Care Home Service

1 Aldton Court Newton Mearns Glasgow G77 5UU

Telephone: 01414 657 850

Type of inspection:

Unannounced

Completed on:

21 June 2025

Service provided by:

Mearns Care Limited

Service no:

CS2015340329

Service provider number:

SP2015012561



Inspection report

About the service

Mearns House is a care home service which provides care for up to 68 older people who may have physical difficulties and/or dementia. The provider is Mearns Care Ltd whose parent company is Meallmore Ltd.

The home is purpose-built and is located in a residential area of Newton Mearns, which provides single ensuite accommodation, over two floors. Each floor has access to communal/lounge/dining areas and an outdoor space. Other on-site facilities include a café area, cinema room and hairdresser's salon. There is a pleasant, enclosed garden for residents to enjoy.

At the time of this inspection, there were 50 people using the service.

About the inspection

This was an unannounced inspection which took place between 20 - 21 June 2025, between 09:00 and 21:15. 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:

- spent time with 22 people using the service and spoke with nine of their families who were visiting. We also obtained feedback from a pre-inspection questionnaire from one family;
- spoke with 20 staff and management, along with feedback from a pre-inspection questionnaire from 11 staff;
- · observed practice and daily life;
- · reviewed documents; and
- obtained feedback from three visiting professionals.

Key messages

- People living in Mearns House were overall happy with the care and support.
- People's families gave mixed feedback, with a lack of consistency across all shifts being the most common concern.
- The activity team and care staff supported people to get involved in a wide range of activities and interests.
- People living in the care home, and staff, benefited from a warm atmosphere because there were good working relationships across the care home.
- Whilst the environment was clean and well maintained, there were some aspects that would benefit
 from some improvement to the décor, soft furnishings and equipment as they showed signs of wear
 and tear.
- People benefited from the well-appointed cafes on each floor, the cinema room and their bedrooms having small kitchen areas with a fridge.
- Personal plans had a good level of detail to guide staff around how best to care and support each person.

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 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?

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 experienced warmth, kindness and compassion in how they were supported and cared for. The service ensured that people maintained relationships with those important to them. Family and friends were made to feel welcome. One relative told us: "I can visit when I want and staff make me feel welcome." Whilst another explained, "I pop in at different days and times to see my relative."

People living in Mearns House, were happy with the care and support and many spoke of enjoying the home's activity programme. One person told us, "We're very well looked after here.", whilst another explained, "I would give staff 10/10."

People's families gave mixed feedback. Whilst some families spoke of being very happy with the care home, several spoke of being happy most of the time, but they spoke of a lack of consistency across shifts. One family told us, "I can tell what staff are on by how my relative looks that day," with several others saying similar. Families told us that whilst senior staff and management were approachable and would listen when they raised concerns, improvements would not be sustained. They felt that the care home were more reactive than proactive. Comments included: "Each time I go with concerns, I am given promises and improvements may be made, but doesn't always happen or get maintained." "The home and staff are lovely," "I feel communication could be better between staff as at times, information does not get passed on." and "Staff are kind, thoughtful and approachable." (see area for improvement 1).

The atmosphere within each of the units was welcoming. People knew the staff team well and we witnessed strong and positive relationships, humour, fun and respectful interactions between people living there and the staff.

The activity team supported people to get involved in a wide range of activities and interests. This included regular trips out in the local community. The planner included options to maintain, develop and explore people's interests, strengths and skills. It supported people with both their physical and mental health. Key dates throughout the year were being celebrated with special events. One resident explained, "I enjoy the 'Fitbaw' that visit, it was good fun.", whilst another told us, "There is usually three activities on each day that you can go along to. I really like the yoga."

People benefited from access to a range of drinks, meals and snacks throughout the day. However, we received lots of feedback from people living in the care home and their families about a recent decline in the meals. On discussing this with the manager, they explained that they had had some turnover of chefs, however, the home was currently being supported by the provider's executive chef to resolve this until new chefs were familiar with the menus. The dining experience was calm, relaxed with plenty of staff available during this time.

People benefited from regular healthcare assessments, access to community healthcare and treatment from competent trained practitioners.

People's skin integrity was maintained because the service had a proactive and person-centred approach which was based on good practice recommendations and the assessment of risk. An appropriate prevention and management plan was in place which reflects this.

People's wellbeing, mobility and confidence were enhanced as the service promoted a person-centred approach to managing and preventing falls and fractures.

Areas for improvement

1.

The service should ensure that all concerns and complaints raised by people and/or their representatives are recorded, investigated and responded to in a timely manner and follows their complaints procedure where appropriate.

This should include, but not be limited to, concerns raised to care staff, nurses, during reviews or made directly to the management team. These should form part of the home's quality assurance and be welcomed and responded to in a spirit of partnership.

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

'My care and support meets my needs and is right for me.' (HSCS 1.19).

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, therefore we evaluated this key question as very good.

People benefited from a comfortable, warm and homely environment where residents were able to sit and chat to each other. They were supported by staff to choose where to spend their day.

The environment was clean and tidy with no evidence of intrusive smells.

The setting had been designed for high quality care and support. People benefited from the well-appointed cafes on each floor, the cinema room and their bedrooms having small kitchen areas with a fridge. We observed these to be well used by people and their visitors.

There were clear planned arrangements for the regular monitoring and maintenance of the premises and the equipment to ensure people were safe. However, whilst the environment was generally well maintained, there were some aspects that would benefit from some improvement to the décor, soft furnishings and equipment as they showed signs of wear and tear (see area for improvement 1).

People were encouraged to personalise their bedrooms to ensure that they were individual to their taste and home comforts including photographs and ornaments.

Staff were aware of environmental cleaning schedules and clear about their specific responsibilities. Staff carrying out housekeeping and cleaning in the service were familiar with required environmental and equipment decontamination.

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Areas for improvement

1. To ensure that people experience an environment that is well looked after, the service should carry out a room by room audit to enable them to devise an environmental action plan. This action plan should then be worked through until completed.

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)

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 provider should ensure that personal planning material is reviewed and improved to reflect people's current needs and expressed preferences. Individuals should be provided with opportunities to set their own outcomes/goals and recording should show how these are met. This includes developing life history information and embedding individual's choices into every aspect of their care and support plan. This information should be available to staff to support them to provide meaningful care that meets the person's personal preferences.

This is to ensure that 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 20 December 2023.

Action taken since then

Personal plans had a good level of detail to guide staff around how best to care and support each person. Work continued to explore developing life history information and embedding individuals' choices into every aspect of their care and support plan. Audits were part of the home's quality assurance systems and had identified areas in some plans that needed improved.

This area for improvement has been met.

Previous area for improvement 2

To promote improvement the provider should review the format of the service development plan. Information gathered from audits and feedback should be used in a reflective way to inform developments and improvements.

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

'I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve.' (HSCS 4.8).

This area for improvement was made on 20 December 2023.

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Action taken since then

A service improvement plan was in place. This was very detailed and identified actions from audits, surveys and other engagement.

This area for improvement has been met.

Previous area for improvement 3

The service should make sure information recorded about residents is consistent and accurate within care files. In doing so the use of the current paper 'skeleton' care plans should be reviewed and consideration made to developing a record of the most important information which is easily accessible for all staff.

This ensures care and support is consistent with the Health and Social Care Standard 1.15 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 22 May 2019.

This area for improvement was made on 22 May 2019.

Action taken since then

People could be assured that their 'skeleton' plans contained an up-to-date summary of their personal plan. Copies of any legal documents were also in this file.

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 setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good

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