

# Crosslet House Care Home Care Home Service

Argyll Avenue Dumbarton G82 3NS

Telephone: 01389 603 800

Type of inspection:

Unannounced

Completed on:

20 June 2025

Service provided by:

West Dunbartonshire Council

Service provider number:

SP2003003383

**Service no:** CS2016352864



#### About the service

The provider of Crosslet House Care Home is West Dunbartonshire Council. The service is registered to care for 58 older people. Within this registration the service is able to provide support to a smaller number of people aged between 50 and 65. Additionally, the service are able to offer some respite provision to people who require this.

The service is purpose-built and is in a residential area of Dumbarton. The building is on two levels with lift and stair access, although living spaces are all on the ground floor. The service is split into two houses with each sub-divided into flats of seven to make small group living. There are extensive well-maintained gardens and access to on-site facilities like a hairdresser and cinema room, and a variety of on and off-site activities. The local authority Crosslet House Day Service is in the same building. At time of our visit the service were supporting 51 people.

## About the inspection

This was an unannounced inspection, which took place on 16, 17 and 18 June 2025 between 09:45 and 20:45 hours. The inspection was carried out by one inspector from the Care Inspectorate and with the support of an inspection volunteer. 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 11 people using the service and seven of their family members
- reviewed survey results returned to us by five people using the service and 11 relatives
- spoke with 12 staff and management
- observed practice and daily life
- reviewed documents
- obtained feedback from seventeen external professionals

## Key messages

People, relatives and external health and social care professionals were overwhelmingly positive about the home.

Physical health and mental wellbeing was supported to an excellent standard with positive outcomes for people.

The setting of the home was well maintained and was influenced by the people who lived there. Routine cleaning, checks and audits maintained the high quality facilities that were available for people to use.

## 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?	6 - Excellent
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?

6 - Excellent

#### 1.3 People's health and wellbeing benefits from their care and support

We found sector leading strengths in aspects of the care provided and how these supported positive outcomes for people, therefore, we evaluated this key question as excellent.

Across both units of the home we met people and relatives who were very happy with the care and support that was being provided. Many were not able to suggest any improvements that could be made. Someone said, 'Lots of nice staff who do nice things for us,' and another told us, 'I love living here.' We witnessed many warm, positive and enabling interactions between staff and people living at the service. We found that the staff team worked well together and were proactive in their approaches to supporting people, using a holistic approach that considered physical health and mental wellbeing. Feedback from people included, 'I get a bit down but staff are here for me,' and 'Staff are very caring, there's plenty of staff.'

Family members told us that they felt very welcome and involved in shaping the support that was being delivered. People and their relatives knew the consistent staff team and made positive comments about the leadership and management of the home. One recent positive step was agency staff being able to access online care plans and recordings. Several people told us that agency staff were regulars and were familiar to them too. We found that leaders and care staff knew people and their needs well. One relative said, 'Activities are amazing,' and another, 'They talk her through what they are doing, staff are wonderful to her.' All interactions we witnessed showed dignity and respect for people whilst promoting their independence.

Nothing felt rushed and the atmosphere was nurturing and supportive to people living there. The staff team also told us how well supported they felt by colleagues and management. Management were compassionate and committed to their roles with an impressive overview, having positive outcomes for people at the forefront. This filtered down to the rest of the staff team via themed staff supervision and regular feedback on their practice. The service had an inclusive ethos with one relative commenting, 'Not an us and them, we're in it together.'

People's health was very effectively monitored and there were extensive professional relationships with community health professionals who regularly spent time at the home. Care plans were regularly reviewed and updated which showed clear understanding of people's needs and wishes. Six-monthly reviews routinely took place with people and their representatives. Effective strategies were in place for supporting people with stress and distress. Very thorough monitoring and audits captured every aspect of people's wellbeing and findings were disseminated to the staff team to review and action. Potential concerns were identified proactively to prevent hospital admissions as much as possible. Ongoing initiatives were in place for preventing weight loss and the service had won an award for the standard of the food that was on offer. We were impressed that 17 external professionals gave us entirely positive feedback about the home and it's approach.

Activities across the service were highly valued and a whole home approach fostered ongoing and innovative events. One man living at the home was thriving on being able to care for a pet cat that lived in the garden area and was loving the responsibility it brought. Others were taking part in a dementia choir or being involved in a variety of intergenerational projects with local nurseries, schools and youth groups. Care staff

were clear that they were also part of supporting people to remain active and engaged without relying solely on activities staff. Staff were able to facilitate excellent new ways for people to stay in touch with loved ones and we heard about so many events that involved families and the wider community. Meaningful connection was an ongoing theme which enhanced people's health and wellbeing.

The service were keen for continuous development and consistently sought feedback from people and families on how they could improve. People, relatives and staff felt listened to and valued with themes being added to the service improvement plan. The home clearly prioritised the wellbeing of the people who lived there and generated a culture that effectively promoted excellent standards.

How good is our setting?

5 - Very Good

#### 4.1 People experience high quality facilities

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.

The building was bright and airy with visitors welcomed. The layout had been designed to contain flats with seven people in each. This configuration was positive and homely for people living there. Lounge areas were personalised and people told us they chose what they liked in their rooms and shared spaces. Bedrooms were spacious with en-suites and demonstrated each person's own tastes. People had their names clearly displayed on doors and memory boxes to aid those living with dementia to recognise which room was theirs. Doors to flats were open and people were able to move freely around a variety of spaces in a safe way. The corridors had colourful reminiscence displays and ways to encourage keeping active. Information about activities, events and photographs were also on show. Access to healthy food was given importance across the home. A trolley visited the flats to allow people to buy themselves a treat and a new shop was in the planning stages.

The service had organised repainting to happen at night so as to minimise disruption to people and new flooring was being planned to maintain the high standards. Domestic staff were visible and were effective in their roles. We found everywhere to be clean and hygienic, with appropriate schedules which were signed off by senior staff. Equipment was routinely serviced and regular safety checks made. Health and safety audits clearly identified any defects that were quickly and effectively resolved. The service had completed an audit that considered how well the environment supported people living with dementia and the findings had been included in their current development plan.

Each flat had access to secure outdoor spaces and to the larger communal garden to the rear of the building. The external spaces were well-maintained and had outdoor gym equipment and opportunities to participate in gardening. We saw that people used the gardens to socialise with each other or spend time with their visitors. The outside area also had a summer house and an area for staff to utilise whilst watching the llamas and alpacas graze behind them.

Some relatives did mention problems with the Wi-Fi signal and we heard that the service had worked hard to improve this. Overall, we found that people were experiencing high quality surroundings.

## 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 consider the storage and administration of medicines in the privacy of people's own rooms. This would support people's privacy, dignity and respect.

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

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This area for improvement was made on 29 January 2024.

#### Action taken since then

The service were able to show that they had explored the topic of medication storage and administration with people and/or their representatives. People's preferences were recorded and we could see evidence of this within care plans that we sampled. We observed that staff who were administering medication did so in accordance with people's wishes.

This area for improvement has been met.

#### Previous area for improvement 2

The service should ensure that menus and activity timetables are in an accessible format for all and are available for people to see and use to make informed choices.

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

I receive and understand information and advice in a format or language that is right for me' (HSCS 2.9).

This area for improvement was made on 29 January 2024.

Action taken since then

The service had implemented weekly activity timetables which used text, graphics and photographs which meant the format was accessible for more people. These were on display across the service. There was also a simplified whiteboard showing activities for that day only. A new menu format was in place, which included photographs of food items, enhancing how people were able to make informed choices about their meals and snacks.

This area for improvement has been met.

#### Previous area for improvement 3

The service should introduce overviews of staff training and of any accidents or incidents that occur at the service. These overviews would allow the service to easily track training undertaken by the team and fully evidence how they analyse and action any incidents that do occur.

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

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality and assurance processes' (HSCS 4.19).

This area for improvement was made on 29 January 2024.

#### Action taken since then

The service had implemented an accident/incident overview system which showed health and safety input and assessed any new risks for people. The local authority, as the service provider, were now providing an effective overview of staff training and up to date percentages for completion rates.

This area for improvement has been met.

#### Previous area for improvement 4

The service should regularly and routinely complete and record staff competencies that cover areas such as medication administration, moving and assisting and dignity and respect.

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

'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 29 January 2024.

#### Action taken since then

We sampled thorough competency observations that had been put in place across the service. These had become embedded into routine practice amongst the staff team. The service were also utilising themed staff supervision, to discuss and develop practice across the home.

## Inspection report

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?	6 - Excellent
1.3 People's health and wellbeing benefits from their care and support	6 - Excellent

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

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