Preston Care Home
Care Home Service

Alburne Park
Glenrothes
KY7 5RB

Telephone: 01592 612 418

Type of inspection:
Unannounced

Completed on:
8 August 2025

Service provided by:
Holmes Care Group Scotland Ltd

Service provider number:
SP2020013480

Service no:
CS2023000072

About the service

Preston Care Home is a well established, purpose built care home for older people set in Glenrothes, Fife. Accommodation is provided on three levels. In addition there is an underground car park. An enclosed garden is accessible from the ground floor and contains a variety of seating areas.

Preston Care Home was re registered with the Care Inspectorate on 14 March 2023 to provide 24 hour care and support for up to 60 older people. There were 58 people living in the service at the time of the inspection.

The service is provided by Holmes Care Group Scotland Ltd. Their purpose is to enrich the lives of residents and their families.

About the inspection

This was an unannounced inspection which took place on 6 and 7 August 2025. The inspection was carried out by one inspector 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 six people using the service and two of their family
- spoke with twelve staff and management
- observed practice and daily life
- reviewed documents
- received considerable feedback from relatives, staff, people using the service and visiting professionals via a care service questionnaire.

Key messages

People were very well supported by the staff team.

Clinical care was robust, with strong oversight.

The environment was clean, attractive and of a very good standard.

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

The key question was evaluated as 'very good', reflecting major strengths in supporting positive outcomes for people.

We observed that people were supported by a staff team who knew them well. Individual preferences, including likes, dislikes, and routines were respected. People expressed that they were able to make choices and that these were upheld. One person described the service as "just like home" while another commented, "They are always there when you need them". Families shared their appreciation for the attention to detail shown by staff, with one family member stating, "It's things like that which make such a difference". This level of care gave families confidence in the service and reassurance that their loved ones were well cared for. Feedback gathered from a care service questionnaire issued prior to the inspection was overwhelmingly positive.

Throughout the week, two activity staff supported the care team to ensure that people had meaningful ways to spend their time. People living in the service spoke positively about events, trips, and activities they had enjoyed. The service maintained strong links with the local community and had recently welcomed intergenerational visits from the local nursery. Weekly and monthly activity schedules were displayed in the reception area and shared with families via the service's social media page, allowing them to plan visits or attend events as they preferred.

Clinical care was closely overseen by the leadership team. A monthly governance meeting provided an opportunity for staff from all departments to contribute ideas and share information to improve the care and support provided. Staff confirmed that their views were heard and valued.

People's nutritional needs were well considered. Staff worked hard to ensure a variety of meal options were available, and adapted diets were clearly identified at the point of service. For individuals at risk of weight loss, weekly weights were monitored and efforts were made to increase the calorie content of their meals. The manager maintained robust oversight of both individual weight concerns and broader service-wide trends, ensuring that any issues were identified and addressed promptly. Inspectors noted that further work to promote independence at mealtimes could help people maintain and develop their skills.

Medication management was observed to be robust. Quality assurance measures had significantly improved this area of practice, and people could be confident that they would receive the correct medication at the right time. A previously identified area for improvement had been successfully addressed.

How good is our setting? 5 - Very Good

The key question was evaluated as 'very good', indicating that performance demonstrated major strengths in supporting positive outcomes for people.

The service was observed to be very clean and well-presented throughout. Interior decoration had been developed with input from residents and appeared bright and attractive. Domestic staff worked systematically to maintain high standards of cleanliness and demonstrated a clear understanding of the importance of hygiene. One staff member commented, "I like Preston House to be immaculate; I take pride in my work". Staff across all departments contributed to maintaining cleanliness and were seen actively keeping communal areas clean and clear throughout the day.

Visiting professionals who completed a care service questionnaire prior to the inspection consistently reported high standards of cleanliness over time.

Maintenance issues were addressed promptly, and a daily environmental walkaround was conducted. This process provided assurance that any issues were identified and resolved in a timely manner.

Residents benefited from easy access to an enclosed garden, directly accessible from the ground floor dining room. A new café area was under development in the reception foyer to create a welcoming space for families to spend time with their loved ones. The layout and use of space were regularly reviewed, with a strong focus on meeting people's needs and enhancing outcomes.

The service had begun using an environmental assessment tool to explore further improvements for individuals with cognitive impairments. Additional development opportunities were identified during the inspection, particularly in promoting residents' independence and supporting the maintenance of their skills and abilities. We fed this back to the manager at the time of the inspection.

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 ensure good outcomes for people, the provider should ensure that people are supported to achieve a good standard of oral hygiene. This should include. but is not limited to, recording the support provided.

This is in order to comply with:

Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This area for improvement was made on 20 February 2025.

Action taken since then

Staff were very aware of the need to attend to oral hygiene, they completed a checklist of personal care in the mornings and were aware that these could be spot checked by seniors or the manager at any time. Staff spoke of encouraging people to be independent with their oral care and of assisting others. Training had been given via an online module and additional in house training had been received from the NHS.

This area for improvement is met.

Previous area for improvement 2

To promote responsive care and ensure that people have the right care at the right time, the service provider should ensure that people have person-centred care plans in place, that offer clear and up to date guidance to support staff.

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 26 May 2023.

Action taken since then

Care plans were detailed and had clearly involved people and their families. Information was presented in a clear way and was regularly updated. A monthly summary provided an overview of changes and progress towards goals. Some plans were highly detailed, for example those to guide care for specific health conditions. However, end of life care plans were of a mixed detail and could be enhanced.

This area for improvement is met.

Previous area for improvement 3

In order to ensure residents experience the safe and effective administration of medications, the service should continue to make improvements to safe medication systems and overall managerial oversight of practice. This should include enhanced staff training, systems of communication and auditing systems.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: '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 26 May 2023.

Action taken since then

There were no concerns with medication management. A variety of robust checks and audits were in place to ensure that both individual and collective aspects of medication management had strong oversight. Any errors or omissions were fully investigated and remedial action taken promptly. We were confident that previous issues had been addressed.

This area for improvement is met.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.