

Holmesview Care Home Service

2 Holmes Road
Broxburn
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Telephone: 01506 859 660

Type of inspection:
Unannounced

Completed on:
3 September 2025

Service provided by:
Randolph Hill Nursing Homes
(Scotland) Ltd

Service provider number:
SP2003002451

Service no:
CS2010270153

About the service

Holmesview is a care home providing care and support for up to 60 older people. The service is owned and managed by Randolph Hill Nursing Homes (Scotland) Ltd and has been registered since 2011. The service is situated on the main street in Broxburn and has some local shops, public transport, and amenities within walking distance.

Accommodation is provided over two floors, in six living units, each containing ten single en suite bedrooms, a lounge and dining area, and a communal bathroom. There is also a larger public lounge on the upper floor and an enclosed sensory garden with access from some bedrooms and one of the downstairs lounges. Kitchen and laundry facilities are situated on the ground floor.

There were 58 people living at Holmesview at the time of the inspection.

About the inspection

This was an unannounced inspection which took place on 2 September 2025 between 11:00 and 23:00 and 3 September 2025 between 09:30 and 16:30. 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:

- spoke with 20 people living at Homesview and received feedback from six people via our questionnaire
- spoke with five family members visiting the home and received feedback from 17 people via our questionnaire
- spoke with 14 staff and management and received feedback from six staff via our questionnaire
- spent time in the home with residents, observing practice and daily life
- reviewed documents
- received feedback from four visiting professionals via our questionnaire.

Key messages

- Care was very good and people's health and wellbeing was being prioritised.
- The service was committed to assessing quality across the service.
- Staffing arrangements were planned to ensure that people received the care and support they needed. Staff had time to talk with residents and offer a good quality care.
- The atmosphere in the home was warm and homely. It was well presented, with high quality décor and furnishings.
- Care plans held good clinical information. Improvements were planned to make them more personalised and include people's wishes around their future care.

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 leadership?	4 - Good
How good is our staff team?	5 - Very Good
How good is our setting?	5 - Very 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?

5 - Very Good

We found significant strengths in the care provided and how these supported positive outcomes for people. Therefore, we evaluated this key question as very good.

People looked well and care was delivered in a personalised way respecting people's needs and wishes. Staff were kind and compassionate in their interactions with people. We observed that residents appeared at ease and comfortable living at Holmesview.

There was a high level of satisfaction with the service. We received very good feedback from people who stayed at the home and their relatives. They told us that they felt well cared for and spoke with confidence in the care being offered. One resident told us, "I cannot fault the care and attention and I am extremely grateful for all that they do, thank you". While a family member talked of the care of their loved one, saying, "We cannot image how we would have coped without this superb level of care".

People were able to maintain relationships with people important to them. Family members were welcomed and involved in shaping the care that their loved one received. There was a clear understanding and value placed on how relationships can help to improve wellbeing.

The home was proactive in supporting people's health and wellbeing. Staff knew people well and had in depth knowledge of their needs and preferences. The team recognised changes in people's health needs, taking prompt action to seek further medical assistance when this was required. This included general health and wellbeing, skin integrity, and when people experienced stress and distress. People, and their family, were confident that their health and wellbeing needs were being prioritised.

People were eating well. Meals were nutritious and balanced. The home was monitoring people's weight and nutritional needs following the advice of supporting professionals. Dining rooms were nicely set and, where people chose to sit together, mealtimes were sociable and relaxed. Where people required assistance with eating and drinking, staff took their time chatting with the person and encouraging good nutrition. Most people told us that they enjoyed the food and, on the occasions when people were not enjoying their meals, different options were available and the home was exploring how this could be improved. This was helping support physical health and wellbeing.

Medication administration was safe and undertaken in line with good practice guidance. Audits of medication administration were being carried out and where the service had noted areas for improvement, these were acknowledged and managed well. This was enabling the home to learn and ensure good standards of medication administration are maintained.

How good is our leadership?

4 - Good

We evaluated this key questions as good. There were important strengths which impacted positively on outcomes for people and clearly outweighed areas for improvement.

The service was committed to assessing quality across the service. This extended across all aspects of the service, from the care provided to staffing and the environment. Regular audits were being completed identifying areas for improvement and the management team were taking action to address these. This

quality assurance activity was linked to good outcomes for residents living at Holmesview. People could be assured that the service was focussing on providing a good quality care.

The management team worked well together. There was good communication and support, with the registered and deputy managers focussing on areas of personal strength to manage and develop the service. We heard positive feedback from relatives about the management of the service: "We feel that the leadership within the care home is exceptional, communication is superb" and "Excellent leadership, well done".

At a previous inspection, many staff reported that they did not find the management team approachable or visible within the home. Although a small number of staff told us at this inspection that "The manager could be more available and supportive", many others reported improvement, with one staff member who said the manager was "Supportive and approachable". We did not find that this was having an impact on people receiving care. We were satisfied that the home and wider management team were working to improve this and promote positive team relationships across the whole staff team.

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the staffing arrangements and how these supported positive outcomes for people. Therefore, we evaluated this key question as very good.

People, and their relatives, spoke very highly of the staff team. Warm and caring relationships had been formed between people, their families, and staff. Residents, and their relatives, talked with appreciation and how much they liked the staff. They told us, "I think the staff are great and they can't do enough for me", "The care staff are brilliant", and "Staff are friendly, they work as a team and they care".

Staff were well trained. The management team were ensuring that staff undertook important training to undertake their caring role and that they kept up to date with refresher training. Training levels were high and included specialist training specific to the needs of people being supported. The service was supporting care staff to completed qualifications to promote good practice and meet registration requirements with the Scottish Social Services Council (SSSC). This meant that people could be confident that staff had the necessary skills and were competent.

The management team were monitoring service delivery and staffing arrangements, ensuring this was informed by assessments of people's needs. Staffing levels were very good and they had time to speak to residents, encourage them to participate in their care, and provide a good level of supervision. Staffing arrangements were planned to ensure that people received the care and support they needed. People could be confident that there were enough staff and their needs were being met.

How good is our setting?

5 - Very Good

We found significant strengths in the environment and how these supported positive outcomes for people. Therefore, we evaluated this key question as very good.

The atmosphere in the home was warm and homely. All areas of the home were well presented with communal areas decorated and furnished to a high standard. Residents were able to personalise their bedrooms with soft furnishings, photographs, pictures, and personal belongings. People told us that they were happy with the environment. We felt comfortable spending time in the home.

The homes were modern and well designed. The building was built ensuring it was accessible and people could freely move around. People benefitted from different areas to spend time in. There were a range of communal areas, including lounges, dining areas, and separate seating areas. The home had an enclosed well tended courtyard garden. People could spend time in the garden when they chose and the home planned outdoor events in the garden. There was ample space for people to move about easily and could choose whether to spend their time with others or alone. All bedrooms were spacious with en suite shower facilities.

The home was well maintained. Maintenance and health and safety checks were being carried out on a regular basis. The management team were quick to address home furnishings, repairs, and redecoration requirements. People could be confident in the safety of the building.

Standards of cleaning were good. The environment was clean, tidy, and clutter free. Cleaning of the home was unobtrusive and following good practice guidance. People living at the home told us how comfortable they felt with one resident saying, "The home is spotless". A relative also told us that Holmesview is "An excellent setting and extremely clean". People could be confident that home was not only comfortable but good infection prevention control was in place.

How well is our care and support planned?

4 - Good

We evaluated this key questions as good. There were important strengths which impacted positively on outcomes for people and clearly outweighed areas for improvement.

Everyone had detailed personal plan and risk assessments in place which reflected their care and support needs. Residents, and their representatives, were involved in sharing information to inform their personal plan and taking part in reviews to ensure that information was up to date. This meant that staff had the right information to support people.

The provider had invested in a new care planning system, with Holmesview as the first home for implementation. Plans provided good background information and set out clearly how to care for people well. The system had pre-set options that meant some of the information was not fully personalised or respectful of people's needs. We were reassured that Holmesview were reviewing care planning and were confident that these pre-set options would be improved.

There was an inconsistent approach to anticipatory care planning. Anticipatory care planning is an approach to recording someone's wishes should their health deteriorate or when they are nearing the end of their life. Some people's plans clearly detailed their wishes for their future care, while others lacked information. We acknowledged these are difficult conversations to have, however assessed that there was a risk that the staff team would not have sufficient understanding of people's wishes should their health deteriorate quickly or they are not able to express how they wished for their care needs to be met. We encouraged the home to use their relationships with people, and where appropriate their representatives, to understand and record residents' future care wishes.

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 leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very 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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