Randolph Hill Nursing Home
Care Home Service

Perth Road
Dunblane
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Telephone: 01786 825 362

Type of inspection:
Unannounced

Completed on:
4 November 2026

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

Service provider number:
SP2003002451

Service no:
CS2003011601

About the service

Randolph Hill is a care home for older people in Dunblane. The care home has 60 rooms across six suites which offer the opportunity for homely and small group living, with many opportunities for privacy or quiet space. The home has two floors with stair and lift access.

There are individual lounge and dining areas in each suite, with one larger shared lounge on the ground floor. The gardens are well-maintained with enclosed grounds, and there is car parking available at the front and side of the home.

There were 57 people living in Randolph Hill at the time of our inspection.

About the inspection

This was an unannounced inspection that took place on 2 and 4 November 2026 between 09:45 and 16:15. One inspector carried out the inspection.

To prepare for the inspection, we reviewed service information. This included previous inspection findings, details of registration and complaints, and information submitted by the service throughout the inspection year.

This was a core assurance inspection to provide assurance that better performing services continue to deliver care and support that meets people's needs. It is not a validation of previous evaluations, and no new evaluations (grades) have been awarded.

This inspection is called a core assurance inspection. This is because research tells us that these core assurances are the key areas that are essential to a service being safe. We report on them under the headings: legal assurances, wellbeing, leadership, staffing, the setting and planned care/support.

During this inspection, we confirmed that people continued to receive care that met their needs and protected their safety, wellbeing and rights. We knew this because we:

- spent time with 16 people using the service
- received feedback from two relatives, the manager and 15 staff
- spoke with visiting professionals
- observed practice and daily life
- sampled relevant documents.

Key messages

Legal assurances
The service was operating legally and had the appropriate insurance in place. The provider's policies and procedures gave good guidance to staff teams to keep people safe and protected from harm.

Wellbeing
The choices and preferences of people were supported by staff who were familiar with people's needs. People we spoke with consistently said that the staff were friendly and caring. People told us:

"The staff are great."

"Nothing is too much bother for the staff."

"Couldn't find nicer, kinder staff."

Staff had a good awareness of their role and responsibilities to safeguard people from harm. The service followed current best practice guidance. People told us they felt safe.

Medication was being managed safely and effectively to support people's healthcare needs. There were systems in place to ensure good standards were maintained and best practice guidance was being followed.

Staff had received training regarding infection prevention and control and followed best practice guidance. People could be confident that they were protected from the risk of infection.

Staff were following the provider's policies and procedures when managing people's money and valuables. This ensured that people's finances and their rights were safeguarded.

People were supported to maintain contact with their family and the people important to them. Visitors were welcomed into the home.

Leadership
The provider's quality assurance system was effectively monitoring and assessing the quality of service provision. People's views were being used to drive service improvement. This demonstrates a culture of continuous improvement and ensures that the needs and wishes of people living in the service are the primary drivers for change. There was a commitment to ongoing service improvement.

The processes used to report accidents and incidents ensured that the manager had a clear overview of concerns. This enabled them to take effective action to reduce risk and safeguard people.

People using the service and staff commented positively about the manager. They said that they felt listened to and actions would be taken for service improvement. People we spoke with were aware of how to raise concerns. They said that the manager was responsive and took appropriate action. There was evidence that lessons learned from the outcomes of adverse events were being used to improve the quality of care and support.

The manager had a clear vision about plans for improvement and development of the service. This resulted in a good quality service which promoted positive outcomes for people.

Staffing
Staff numbers and skill mix were determined using a recognised dependency tool, supplemented by managers' knowledge of individuals' needs and changes in health. Staff were visible throughout the day, well deployed and effectively led by nurses and senior staff. They responded promptly to requests for assistance and were attentive to people's needs. This ensured that people experienced timely support from enough skilled and knowledgeable staff, with staffing arrangements that adapted to need and promoted safety and positive outcomes.

People benefited from being supported by knowledgeable and competent staff who reflected on their practice. People commented positively about the skills and knowledge of staff. Training records were up-to-date indicating good compliance with the completion of essential training. Staff told us that they felt supported with their learning and development. They had access to regular formal supervision giving opportunities for discussions about learning and development. This assured that staff had the skills, training and competence to promote good outcomes for the people they supported.

Recruitment processes followed current best practice guidance. This ensured staff were recruited safely and people were safeguarded.

Setting
The service provided a clean, safe, tidy and welcoming homely environment, free from unnecessary noise and unpleasant smells. People had access to a range of communal spaces within the home, this offered people choices of where to spend their time.

People were encouraged to personalise their bedroom. Incorporating familiar items from home helps to create a welcoming and comfortable personal space for people. People commented positively about the environment of the home, saying it was clean, well maintained and comfortable.

People had access to well-maintained garden areas. They told us that they enjoy getting into the garden in good weather. Having access to outdoor space supports people's wellbeing.

The maintenance records were up-to-date to show that checks of the equipment and safety of the home were completed. This ensured that the home was safe, and people were protected from harm.

Planned care/support
People and their representatives had been involved in the development of personal plans. We found that personal plans contained detailed information to direct staff on how best to support people with their health and wellbeing needs. Plans were person-centred and reflected people's personal choices and preferences. This guided staff to ensure that people's choices and wishes were respected and supported good outcomes for people.

Care reviews were being carried out six monthly which ensured that people and their representatives had the opportunity to formally discuss current care and plan for future care.

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 that people are able to move around, whilst feeling safe and having opportunities to engage in meaningful activities, the service should undertake a review of the environment and, alongside those identified in their previous audit, develop a time limited action plan with clear responsibilities to make the improvements.

This should include, but is not limited to, making environmental improvements that could:

a) reduce isolation, agitation, and distress
b) encourage independence and social interaction
c) provide access to purposeful activities adapted to suit people with cognitive and/or sensory needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors' (HSCS 1.25) and 'I can use an appropriate mix of private and communal areas, including accessible outdoor space, because the premises have been designed or adapted for high quality care and support' (HSCS 5.1).

This area for improvement was made on 29 January 2026.

Action taken since then

People's views had informed the planned activities and events offered in the service. There was a weekly schedule of meaningful activities on display. There was good evidence that group and one to one meaningful activities were available for people to take part in. People we spoke with said that they enjoyed the activities. They said they were fun and helped them make friends.

People living in the home could move freely between all the units. This offered people choice about where they could spend their day, eat their meals or access outdoor space.

The home had two quiet sitting rooms and was planning to develop two more. These spaces offered a quieter and more relaxed space for people to spend time.

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.scot

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