

Kincairney House Care Home Service

Glover Street
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Perth
PH2 0JB

Telephone: 0141 333 1495

Type of inspection:
Unannounced

Completed on:
17 December 2025

Service provided by:
Perth Care Home Limited

Service provider number:
SP2021000064

Service no:
CS2021000102

About the service

Kincairney House is a care home for older people situated in a residential area of Perth. It is close to local transport links, shops and community services. The service provides nursing and residential care for up to 80 people.

Accommodation is arranged over three floors, in single bedrooms with ensuite shower facilities. There are eight lounge/dining areas, several other sitting/dining areas across the service, a cinema room, a games room and a self-service café area for people to use. The service also has a small accessible garden and balconies on the upper floors to provide outdoor space for people.

About the inspection

This was an unannounced inspection which took place on 17 December 2025. The inspection was carried out by three inspectors from the Care Inspectorate.

This inspection focussed on improvements required from the inspection completed on 3 September 2025 and upheld complaint completed on 24 October 2025. We have detailed the progress in these areas under the following section of this report:

'What the service has done to meet any requirements and areas for improvement we made at or since the last inspection'.

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. This report should be read in conjunction with the previous report dated 3 September 2025.

In making our evaluations of the service we:

- spoke with people using the service and two of their family/friends/representatives
- spoke with eight staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- Improvements to medication record keeping had been actioned.
- The care home was clean and there were sufficient housekeeping staff on duty.
- Ongoing reviewing of staffing levels and deployment of staff must continue in response to changes in people's needs, or new admissions to the service.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 1 December 2025, the provider must make proper provision for the safe and effective administration of medication. In particular, the provider must:

- ensure time critical medications are administered in accordance with the prescriber's instructions.

This is in order to comply with:

Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011(SSI 2011 / 210)

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This requirement was made on 3 September 2025.

Action taken on previous requirement

During the inspection we sampled medication records for people who live in Kincairney House. People who had specific times indicated for their medications to be administered were being consistently given their medication at those times. Recording of the specific times medication had been given assured us that people living in Kincairney House had received their medication as prescribed. We were confident that sufficient improvement had been made with time critical medication administration to support people's health, safety and wellbeing.

Met - within timescales

Requirement 2

By 30 June 2025, extended to 11 August 2025, extended to 1 December 2025, the provider must ensure that any complaint made under the complaints procedure is fully investigated. In order to achieve this the provider must:

- a) within 20 working days after the date on which the complaint is made, or such shorter period as may be reasonable in the circumstances, inform the complainant of the action (if any) that is to be taken
- b) ensure open and transparent communication with service users and their representatives, particularly where expressions of dissatisfaction are made
- c) undertake a review of the provision of care and support where expressions of dissatisfaction are made.

This is in order to comply with:

Regulation 18(3) of The Social Care and Social Work Improvement Scotland(Requirements for Care Services) Regulations 2011(SSI 2011 / 210)

This is to ensure care and support is consistent with Health and Social Care Standard 4.19: I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

This requirement was made on 7 May 2025.

Action taken on previous requirement

The service had a concerns and complaints folder to ensure information was stored securely. Information contained within the folder was relevant and, from those we sampled, information on the investigations was clear and the overall outcomes were stated and shared with the complainant. Staff we spoke to knew how to access the folder and how to implement the complaints procedure, should they need to.

Met - outwith timescales

Requirement 3

By 1 December 2025, for the health, wellbeing and safety of people, the provider must demonstrate that staff are working in the service in sufficient numbers each day to support the assessed needs of people experiencing care. In order to do this, the provider must, at a minimum, ensure:

- a) staffing levels in each unit on each floor of the home are adequate to meet people's assessed dependency needs
- b) advance planning for the effective deployment of staff on each shift, taking account of skill, experience and the use of agency staff
- c) staff are not included in the daily rota until they have completed their mandatory induction training
- d) each unit has a shift leader who will be responsible for the allocation of care tasks and communication of staff responsibilities.

To be completed by: 01 December 2025 This is in order to comply with: Section 7(1) of the Health and Care (Staffing) (Scotland) Act 2019

This is to ensure care and support is consistent with Health and Social Care Standard 3.15: My needs are met by the right number of people.

This requirement was made on 24 October 2025.

Action taken on previous requirement

People should expect their needs to be met by the right number of staff who have time to support and care for them and to speak with them.

We found that, although the recently appointed manager had completed a dependency analysis tool, it did not fully reflect the very high needs of people living in the care home. Staff were deployed to cover more than one unit, which meant that some areas of the home had insufficient staffing levels.

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Staff were seen to be very busy, particularly when two staff were required to assist someone with their care needs. This meant that there were not enough staff left in communal areas to effectively observe and support the remaining people.

Visitors we spoke with commented "you can never find staff" and "there's never any staff to be seen".

We spoke with staff who told us "it can be overwhelming at times" and "we routinely run short staffed".

There were no new staff on duty during our inspection to assess their induction training. This will be followed up at our next inspection.

The manager acknowledged that recruitment was ongoing. There remained staff vacancies at various levels, on both day and night shifts. The manager also confirmed that he was in the early stages of carrying out advance planning for the effective deployment of staff.

This requirement has not been met and has been extended to 8 March 2026.

Not met

Requirement 4

By 1 December 2025, for the health, wellbeing and safety of people, the provider must demonstrate that standards of housekeeping are being maintained to minimise the risk of infection, while promoting a positive living environment for people experiencing care. In order to do this, the provider must, at a minimum, ensure:

- a) there are sufficient numbers of housekeeping staff recruited and working on shift each day, to keep the home compliant with infection control standards, clean and odour free
- b) that all housekeeping staff have the training and knowledge to undertake effective Infection Protection Control measures within the service and demonstrate understanding of their responsibility to keep the premises clean and infection free
- c) care and housekeeping responsibilities are clearly defined to avoid misunderstandings between staff over responsibilities for certain tasks.

To be completed by: 01 December 2025

This is in order to comply with: Regulation 10(2)(d) of The Social Care and Social Work Improvement Scotland(Requirements for Care Services) Regulations 2011(SSI 2011 / 210)

This is to ensure care and support is consistent with Health and Social Care Standard 5.22: I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.

This requirement was made on 24 October 2025.

Action taken on previous requirement

Significant improvements in the home environment resulted in better experiences for people.

All areas of the home were visibly clean, and a schedule of checks and observations had been introduced to monitor this.

There were sufficient numbers of housekeeping staff on duty. Staff had been trained and were knowledgeable about infection prevention and control measures necessary within the home. Housekeeping staff's roles and responsibilities were clearly defined to ensure that all staff were aware of their responsibilities. This meant we could be assured that people were living within a clean and hygienic environment.

Met - within timescales

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

To ensure that people can have confidence in the daily operation of the service, the manager should demonstrate that effective systems are put in place to support clear and consistent communication between staff teams across different shifts and departments.

This is to ensure care and support is consistent with Health and Social Care Standard 3.19: My care and support is consistent and stable because people work together well.

This area for improvement was made on 24 October 2025.

Action taken since then

Daily flash meetings were routinely taking place with all departments represented, and staff meetings were held regularly. This meant that communication was effective within the service.

This area for improvement has been met.

Complaints

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

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