

Gibson House Care Home

Care Home Service

Gibson House
Wyntoun Road
St. Andrews
Fife
KY16 9FD

Type of inspection:
Unannounced

Completed on:
11 December 2025

Service provided by:
The Gibson House St Andrews SCIO

Service provider number:
SP2022000172

Service no:
CS2022000254

About the service

Gibson House Care Home is a well established service with well established links within the local community. Accommodation is provided in a two storey purpose-built building and within four living areas. The service moved to their new premises in October 2025. The provider, Gibson House St Andrews SCIOI, is registered to provide 24-hour care and support to a maximum of 40 older people. During our inspection there were 25 people living here and the manager was available to support our visit.

Gibson House Care Home aims to provide high standards of care reflecting the principles within the Health and Social Care Standards (HSCS).

About the inspection

This was an unannounced inspection which took place on 10 and 11 December 2025 and between 9:00 - 17:30. 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 three people using the service and seven of their family
- we received six care standards questionnaires
- spoke with nine staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- People enjoyed good care and support.
- Staff were knowledgeable, caring and respectful.
- Management had good oversight of all aspects of the service.
- People benefitted from high quality facilities.

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?	4 - Good
How good is our leadership?	4 - 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?

4 - Good

We evaluated this key question as 'good', where there are a number of important strengths which clearly outweigh areas for improvement.

It is important that people experience warm, nurturing relationships with the staff who support them. We observed numerous examples of kind, compassionate and warm interactions which meant people were treated with care and respect. People told us staff and residents mix well and one relative wrote that they were, "Very satisfied with the care and attention received".

The service aims and objectives clearly reflected the principles behind the Health and Social Care Standards and staff demonstrated their knowledge of how people were best supported even where they could not communicate their wishes directly. There was good oversight of people's likes and dislikes as well as health needs. From records, observations and discussions we found changes were made in response to changing care and support needs in order to keep people safe and maintain their health and wellbeing. Prompt referrals were usually made to health professionals meaning that people had the most appropriate health care at the correct time. This alongside the way staffing was arranged meant people experienced responsive care where possible.

It is important people benefit from prescribed treatments. We found good management and administration of medication. There was regular audit which provided oversight and assurance that any discrepancies could be easily identified and addressed. We observed safe administration, proper storage and good record keeping all of which meant medication was generally well managed and people were kept safe.

There were systems in place for recording and analysis of accidents and incidents, including appropriate actions taken to mitigate risk and keep people safe. Management used information about falls and other indicators to assess outcomes experienced by people, identify any themes or trends and take action in response to support treatments and result in improvements.

People should expect to be given help with eating and drinking in a dignified way and have their personal preferences respected. Mealtimes appeared to be a calm and pleasant part of the day which many people looked forward to. People chatted to each other and enjoyed their meals together. Providing room service for people who chose to remain in their own rooms was well organised. People were encouraged and enabled to eat their meals independently, with the just the right level of support from staff, where needed. People enjoyed good quality nutritious food which contributed to people's health and wellbeing.

There was good oversight of weights, evidence of access to special or modified diets and plenty of drinks on offer. Residents told us they enjoyed their meals and people praised kitchen staff. Comments from people using the service included, "the food is lovely".

We found people were supported to maintain contact with family and friends. Visiting was unrestricted and staff understood the benefits associated with maintaining relationships outside of the home. People held staff in high regard. Relatives said they were always made to feel welcome and that staff, key workers and management knew their loved ones well. This meant important connections with family and their involvement in decisions around care and support could be maintained.

Activities records provided evidence of a variety of group and individual activities that had taken place and had been thoroughly enjoyed. The activities coordinators were held in high regard and were keen to develop their expertise and further contribute to people's wellbeing.

We found care plans and supporting documentation well written, relevant and generally complete. This meant record keeping could guide and support staff to meet people's needs and wishes. Relatives confirmed their involvement in reviews and reported very good communication which meant they felt confident about their loved one's experience of care and support.

All areas within the home were clean, tidy and free from clutter, which ensured that cleaning tasks could be carried out effectively. Care equipment, such as bed mattresses, bed rails and shower chairs, were cleaned regularly. As a result, we could be confident that the risk of infection was being reduced and people were kept safe.

How good is our leadership?

4 - Good

We evaluated this key question as 'good', where there are a number of important strengths which clearly outweigh areas for improvement.

We found that the provider had in place a range of policies, audits and other quality assurance systems. These included infection prevention control, environmental checks, medication audits and monitoring of falls. There were systems in place for recording and analysis of complaints, accidents and incidents, including appropriate actions taken to improve people's experiences, mitigate risk and keep people safe. The move to new premises had interrupted audit while the process of 'settling in' following the move to new premises had taken priority. The management recognised the need to address the slippage in recording their oversight of standards and re-establish their quality assurance systems.

We were reassured by the capacity of senior care staff to manage any aspect of the service associated with their role and responsibilities. They demonstrated a commitment to ensuring standards were maintained and improving the quality of life for people living here.

Relatives reported having confidence in staff and that there was good communication. They said staff were visible and that they felt confident approaching management if needed. Although the service was subject to the same workforce pressures as experienced throughout the sector, there was continuity and staff were confident about their role and responsibilities.

How good is our staff team?

We evaluated this key question as 'good', where there are a number of important strengths which clearly outweigh areas for improvement.

Recruitment checks were undertaken to ensure staff were recruited safely and continued to remain suitable for working with people. We found the provider was continuing their efforts to recruit the right staff to provide care and support.

Inspection report

We observed staff in practice at different points of the day throughout the service. We saw examples of staff responding to people's needs promptly in a way that demonstrated positive values in line with the Health and Social Care Standards. People could feel confident they would be supported by staff who were kind and caring. Staff were held in high regard, with everyone we spoke to describing most staff as, "excellent" and that when communication was about their loved one, it was "very good".

Staffing arrangements should be right, and staff should work well together. The service was using a dependency tool, which was regularly reviewed. We found this was rooted in individual service user assessed need, took account of the layout of the home and was related to the planning and review of staff numbers and deployment. We were reassured by immediate action taken as part of the provider's clinical oversight to update individual assessments and the overall dependency tool. This meant good staffing was maintained.

Staff described working well together and we saw respectful and professional working relationships during the inspection. We were satisfied staffing levels were sufficient to maintain safety and provide people with necessary care and support.

How good is our setting?

5 - Very Good

We evaluated this key question as 'very good' as the service demonstrated major strengths in supporting positive outcomes for people.

The new premises provided very good facilities. People now benefitted from a modern, comfortable, welcoming environment with plenty of natural light and space. The home was clean, tidy and generally well looked after, with no evidence of intrusive noise or smells.

The home had a relaxed, welcoming atmosphere. People had a choice of where they wanted to spend their time. Some people enjoyed company in sitting areas, whilst others preferred to be in their own rooms. There was open visiting and pleasant areas for families to spend time out with their loved one's bedroom if they wish.

We found the home to be clean and uncluttered. Bedrooms were spacious and residents told us that they were encouraged to personalise them. Communal areas within the home were clean, tidy and free from clutter, which ensured that cleaning tasks could be carried out effectively. Equipment was maintained well, with safety checks being carried out at planned intervals. This helped to ensure people were safe and enjoyed a pleasant home environment.

Staff were clear about their responsibilities associated with their specific role, including food hygiene and Personal Protective Equipment (PPE). We found safe management of laundry, including bedding.

How well is our care and support planned?

4 - Good

We evaluated this key question as 'good', where there are a number of important strengths which, when taken together, outweigh areas for improvement.

We found reviews and risk assessments to assess residents' care needs and wishes were carried out regularly and then used to inform the care plan. Those we sampled showed that people were encouraged to give their views and people told us that they felt staff listened to them.

People benefitted from detailed assessments of their needs both prior to and on admission to the home. Full care plans were then developed in the immediate weeks following admission.

Recordings of care, specific support such as, skin care and health assessments were mostly in place. Where risks were identified, specific risk assessments and care plans were in place. This helped people to be supported safely by staff.

We found records were designed around activities of living which supported a systematic approach to assessment and delivery of care. We found care reviews were being carried out and that all appropriate people were involved. There were clearly efforts to ensure records were completed consistently and that person-centred care was being delivered. This meant that the majority of records sampled could guide staff in delivering and recording care and support that met people's wishes and assessed needs.

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 support the health and wellbeing of people using the service the provider should:

- a) Continue to consider the language used throughout documentation and care plans and ensure it is respectful at all times.
- b) Ensure that where people are on special or modified diets, support plans are up-dated and information is easily available to guide and care staff and catering team.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that:

'I experience care and support where all people are respected and valued' (HSCS 4.3); and

'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 17 June 2024.

Action taken since then

We found good record keeping in place to guide and support staff deliver care and support that was appropriate for people's assessed needs and wishes.

The language used throughout the records sampled, reflected the respectful interactions observed throughout the inspection.

We confirmed that where people were on special or modified diets, support plans were up-to-date and information was easily available to guide and care staff and catering team.

This area for improvement was met.

Previous area for improvement 2

In order to promote activity, orientation, independence and safety for people with dementia and other cognitive impairments, the provider should make appropriate changes to the internal environment. People living in the home and their representatives should be involved in consultation about the environment to ensure their needs and wishes are taken into account.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I can independently access the parts of the premises I use and the environment has been designed to promote this' (HSCS 5.11).

This area for improvement was made on 30 June 2023.

Action taken since then

The service had recently moved into new premises which provided high quality facilities that supported staff to deliver activities and entertainment. We found people living in the home and their representatives were highly satisfied with the new home and the activities on offer. Work to promote independence and orientation people with dementia and other cognitive impairments, had been started. Activities were very well supported by staff who had consulted people to ensure their needs and wishes are taken into account.

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?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	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 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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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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