

Randolph Hill Nursing Home

Care Home Service

Perth Road
Dunblane
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Telephone: 01786 825 362

Type of inspection:
Unannounced

Completed on:
13 January 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.

The service is provided by Randolph Hill Nursing Homes (Scotland) Ltd, and has been registered to provide care since 2002. There were 54 people living in Randolph Hill at the time of our inspection.

About the inspection

This was an unannounced inspection which took place on 12 & 13 January 2026. 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:

- received feedback from and spoke with 17 people using the service, and 13 of their family
- received feedback from 20 staff, and spoke with 14 staff and management
- observed practice and daily life
- reviewed documents
- received feedback from and spoke with three visiting professionals.

Key messages

People were happy in the service because they were supported respectfully by staff who knew them well.

The service had developed good relationships with other professionals, which meant people's health needs were referred and attended to quickly.

The care home was well maintained, and followed good practice guidance for cleaning and infection prevention and control.

To further improve outcomes for people, the service should consider how the environment could better support people with their individual needs.

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?	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 aspects of care and support, and how these supported positive outcomes for people, therefore we evaluated this key question overall as very good.

During our inspection we saw warm and compassionate interactions between staff and people living at Randolph Hill. Staff knew people well, and there were very positive relationships with families who were made to feel welcome in the home. One person said "I consider that my care team are fantastic, and I am getting five-star treatment," while a relative told us "my relative is well cared for, and there is a genuine concern to ensure they are comfortable and listened to."

People looked well presented, and were well supported with care needs, where staff paid particular attention, and took the time to attend to people's personal preferences.

The dining experience was relaxed and unhurried, and tables were nicely laid with condiments and menus available. Meals were nicely presented, choice given, and additional helpings offered. There was very good oversight of people's nutrition and dietary needs, and people could be confident of good hydration, as we saw staff regularly supporting people with jugs of water and juice, and offering drinks across their day.

Where people needed support with medication, there were safe systems in place and good oversight of medication practices, and we could see that people were regularly receiving topical medication as prescribed. When there were issues with skin integrity, there was a robust process for assessment and treatment, and this was well monitored across the nursing and leadership team.

People benefited from access to a range of specialist health professionals, and the service had developed close links with health and social care professionals, which meant that any health needs or further assessment was referred appropriately, and acted on swiftly.

How good is our setting?

4 - Good

We evaluated this key question overall as good, where several strengths impacted positively on outcomes for people, and clearly outweighed areas for improvement.

The environment was well maintained by the in-house team with support from external professionals where appropriate, and regular checks and monitoring occurred to ensure that standards were maintained, and people were kept safe. The home was clean and fresh, and the team followed best practice guidance to meet infection prevention and control standards. Generally, we found the home to be tidy and well organised, where people's personal spaces were nicely personalised, with their own belongings, photos, and mementos.

Most shared areas were clean and nicely laid out, but not well designed to support people who may have a sensory or cognitive impairment, and we found some areas overstimulating and cluttered. Some features installed to support people with choice and independence had been obscured by staff notices, and there were no points of interest, or talking points available for people in the long corridors. An environmental audit had been completed to identify improvements, but the service did not have a plan in place to make

these changes. Because this could impact on outcomes for people, we made an area for improvement about this. (See area for improvement 1).

Areas 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).

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 are supported well, and to reflect their individual needs, rights, choices, and wishes, the service should ensure that care planning takes account of good practice guidance. This should include, but is not limited to ensuring that:

- a) people's personal plans are regularly reviewed and changed where necessary, to direct care based on people's current situations
- b) all risk assessments are accurate and updated regularly, and
- c) supplementary charts are completed timely, then reviewed and evaluated by suitably experienced 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 3.07); and 'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty.' (HSCS 3.08).

This area for improvement was made on 22 June 2023.

Action taken since then

We reviewed this area for improvement at our inspection, and assessed that progress had been made in linking risk assessment outcomes to care plans. This was evidenced well, particularly in care plans where people had been identified at a higher risk of falls.

We assessed that this area for improvement was met, however, the service had planned developments around moving to electronic care planning, and we discussed the importance of maintaining this improved quality and continuity of recording, assessing, and care planning over the period of transition.

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 setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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