

# Murray House Care Home Service

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Kelso  
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**Type of inspection:**  
Unannounced

**Completed on:**  
23 January 2026

**Service provided by:**  
Queens House (Kelso) Ltd

**Service provider number:**  
SP2003001975

**Service no:**  
CS2018367397

## About the service

Murray House is situated in the outskirts of Kelso in the Scottish Borders. The home is set within its own well-maintained grounds with private parking.

The home is currently registered to provide care to a maximum of 27 adults. Within this maximum a service is offered to nine people with a physical disability and/or cognitive disability and 18 people (aged 50 years or over) living with dementia.

The home is split into three units: Murray House East, Murray House West and Evanthea House. Each unit has a sitting room, dining, kitchen, toilet, and bathing/facilities. Individual bedrooms are equipped with tracking hoists and have en-suite showers, toilets and wash-hand basins. There are other shared areas in the home including a quiet sitting room and a sensory area.

All accommodation is on ground floor level, with sitting rooms and bedrooms having access to the enclosed garden. There are reception, office accommodation, a café, laundry and kitchen facilities within the building.

At the time of the inspection, 26 people were living at Murray House.

## About the inspection

This was an unannounced inspection which took place on 20 and 21 January 2026 from 09:30 to 17:15. 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 12 people living in the home and their relatives
- spoke with 19 staff and management
- observed practice and daily life
- reviewed documentation
- spoke with visiting professionals
- considered questionnaire responses from eight people using the service

## Key messages

- Staff treated people using the service with genuine kindness and compassion.
- People were offered a variety of stimulating activities which were meaningful and benefitted their health and wellbeing.
- Management staff had good relationships with external health professionals, ensuring people had access to appropriate healthcare.
- Medication processes were safe and new audit processes were being developed to ensure all issues were identified and resolved promptly.
- Inconsistencies in essential health monitoring had been identified by the manager; however, improvements were still needed to ensure all actions were followed through to completion.
- The home provided a warm, homely, and welcoming environment which was well-maintained and enhanced individuals' comfort and wellbeing.

## 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 setting?	5 - Very 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 several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People experiencing care benefitted from warm, respectful, and compassionate interactions with staff. Staff knew people well and demonstrated genuine kindness and patience when offering support. People's preferred communication styles were understood and used consistently, helping individuals feel comfortable, listened to, and reassured. Relatives told us staff were "kind", "supportive", and "always take time with people", which contributed to a positive and trusting atmosphere within the home.

A wide range of meaningful activities was available, both in groups and on a one-to-one basis. These were planned by a dedicated activities team and included sensory sessions, community outings, and visits from external entertainers and therapy pets. People were able to choose how they spent their time, and this regular stimulation supported their emotional wellbeing and sense of connection with others.

Nursing staff were present in the home at all times. This gave reassurance that people could access prompt and appropriate healthcare. Staff worked well with external professionals, including GPs, dieticians, occupational therapists, and speech and language therapists. This supported people to receive the right care from the right person at the right time.

Personal plans contained relevant information about people's health needs and diagnoses, and the electronic care system enabled staff to access updates. However, there were some inconsistencies in the completion of essential health monitoring, including weight checks, oral care, fluid intake, and monthly clinical observations.

Although the manager had identified similar gaps, some issues persisted, creating potential for changes in people's health to go unnoticed. We spoke with the manager who acknowledged further improvements were needed to ensure actions were consistently followed through and completed.

Medication processes were generally well managed. Prescribed medicines were administered safely and accurate records were maintained. Protocols for 'as required' medicines, along with body maps for creams and medicated patches were in place and up to date. However, not all topical creams had been dated on opening. There had also been a few instances where medication orders were delayed; these had been identified through regular checks. The management team was reviewing its medication audit processes to reduce the likelihood of similar issues occurring.

People benefitted from regular access to drinks, meals, and snacks in a relaxed and welcoming environment. Food was well presented, and staff were knowledgeable about people's preferences and dietary requirements. People were offered meaningful choices and one-to-one support was provided when needed. This encouraged people to maintain a good nutritional intake and supported dignity and independence at mealtimes.

Overall, people experienced warm, person-centred care which supported their wellbeing. The ongoing development by management of clinical governance, health monitoring, and medication oversight will ensure people consistently receive safe and effective care.

## How good is our setting?

## 5 - Very Good

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

Murray House provided a warm, homely and welcoming environment which was well maintained and contributed positively to people's comfort and wellbeing. The layout supported a 'small group living' approach, with each unit offering comfortable, self-contained facilities which promoted a sense of familiarity and ease.

People's bedrooms offered privacy when they wanted it and were personalised to reflect individual preferences, helping create a homely and reassuring space. All bedrooms were equipped with en suite shower facilities, and tracking hoists were available for those with significant mobility needs, supporting safe and dignified care.

Everyone had access to open, bright communal areas where they could spend time socialising with others. The garden areas were well maintained and offered safe outdoor spaces for people to enjoy. People benefitted from having pleasant places where they could relax and spend time with others, helping them feel part of the community within the home.

The accommodation was very clean and in good order throughout. A dedicated housekeeping team worked well together to maintain the home to a high standard. Consequently, people experienced clean, tidy, and well-maintained premises, furnishings, and equipment.

We reviewed maintenance records and health and safety certificates, all of which were found to be in good order. This included evidence of regular checks of the full environment, including equipment and water quality. We identified one instance where outdoor furniture had been moved, potentially blocking a door to the garden. This was immediately rectified by the maintenance team.

Overall, there was a strong commitment to compliance and risk management, supporting a safe and well-maintained setting for people living, working, and visiting the home.

## 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 promote good health and wellbeing outcomes for people experiencing care, the provider should make improvements to their medication auditing processes. This should include, but is not limited to:

- a) Maintaining clear management oversight of controlled medication processes, to ensure accuracy and safe management of medicines; and
- b) Updating audit processes to ensure they are reflective of the new electronic medication system, which is still being rolled out and embedded within the service.

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

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24)

and

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

**This area for improvement was made on 10 September 2024.**

#### Action taken since then

Since the last inspection, the management of controlled medicines had improved, with records being accurately maintained. Controlled medicines were stored securely in line with current guidance, and regular checks helped ensure practice remained safe and effective.

Audit processes had been updated to reflect the introduction of the electronic medication system. Staff responsible for administering medicines were confident in using the system, which was now well embedded within the service and operating effectively.

Overall, people could be assured that managers had reliable processes in place for managing controlled medicines, supporting safe practice and promoting positive health and wellbeing outcomes.

**This area for improvement is met.**

#### Previous area for improvement 2

To ensure the service remains responsive to people's needs, the provider should review their staffing arrangements to ensure effective staff deployment at key times. The review should take into account factors including, but not limited to:

- a) The views of people using the service, their relatives and staff;

b) How the layout of the premises impacts on the deployment of staff at key times, when people might need additional support.

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

'My needs are met by the right number of people' (HSCS 3.15).

**This area for improvement was made on 10 September 2024.**

#### Action taken since then

The provider had made positive improvements to staffing arrangements since the last inspection. Staffing levels were safe and effective, with care staff delivering individual support during key periods such as personal care and mealtimes.

Staffing arrangements reflected the layout of the premises and busy times of day, to ensure each unit had sufficient cover to meet people's needs.

We observed staff communicating well with each other about individuals' support requirements and coordinating their movements effectively. This meant staff were clear about their responsibilities and were able to support each other appropriately.

Overall, staff remained responsive and delivered consistent, well organised care. Continued attention to maintaining these improvements will help ensure staffing arrangements remain robust and sustainable.

**This area for improvement is met.**

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

  

How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good



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