

Greyfriars Care Centre Care Home Service

2 Hamilton Road
Glasgow
G32 9QD

Telephone: 01417 783 132

Type of inspection:
Unannounced

Completed on:
29 January 2026

Service provided by:
Keane Premier Healthcare Glasgow
Limited

Service provider number:
SP2018013243

Service no:
CS2018371797

About the service

Greyfriars Care Centre is registered to provide a care service to a maximum of 30 older people. Inclusive is a maximum of 11 places for people under the age of 65 years. The provider is Keane Premier Healthcare Glasgow Limited.

The home is situated in a residential area in the east end of Glasgow, within easy reach of public transport and local shops. Accommodation comprises of single ensuite bedrooms over three floors, accessed by a lift and stairs. The ground floor has the main lounge and dining areas and access to garden areas, at the front and rear of the building. There is a car park at the front of the building and they have access to their own minibus for outings.

The registered manager is also the registered manager for Ashton Grange care home and is supported by a full time deputy manager in each home.

At the time of inspection there were 23 people living in the home.

About the inspection

This was an unannounced inspection which took place on 27 to 29 January 2026, between 7:00 and 19:00 hours. The inspection was carried out by one inspector and an inspection volunteer from the Care Inspectorate.

To prepare for the inspection we reviewed information about the 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 14 people using the service and observed interactions between people and staff
- spoke with five family members and reviewed feedback from our pre-inspection questionnaire from one family member
- spoke with ten staff including management
- observed staff practice and daily life
- reviewed relevant documents
- reviewed feedback from our pre-inspection questionnaire from two health professionals.

Key messages

- Feedback from people living in the home, their relatives and visiting health professionals was very positive.
- There was a lot of planning and work around providing people with opportunities for meaningful engagement.
- We observed very positive interactions between staff, people living in the home and their relatives.
- Quality assurance processes supported positive outcomes for people.
- Recent investment and refurbishment had improved facilities for people living in the home.

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?	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?

5 - Very Good

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

We observed very positive interactions between staff, people living in the home and their relatives. Staff were seen to be respectful, warm and caring in their approaches with people which promoted a relaxed and calming atmosphere throughout the home. The staff team were knowledgeable about people's needs and demonstrated positive values. Staff also showed awareness of maintaining people's privacy and dignity when dealing with personal care.

Feedback, we received, from people living in the home and their relatives was very positive. People told us that staff were really good, supported them with their care needs and spent time with them, doing what they enjoyed, 'I like chatting to people', 'staff are really good', 'a great team always kind and helpful', 'nothing but praise for the home, caring staff and communication very good', 'it's brilliant here, staff are great, they have a better social life than us'. One of the younger people was also happy to share that they were now ready to move on from the home into their own accommodation, 'whilst the home experience has been good, I'm ready to move on with my life'.

How people spend their day is important in maintaining people's physical and mental wellbeing. We could see that there was a lot of planning and work around providing people with opportunities for meaningful engagement. The wellbeing co-ordinator, provided weekly plans with regular activities such as, nursery visits, Come Sing café as well as entertainers and outings. They also celebrated annual special days including people's birthdays and staff retirements. Newsletters, social media, quarterly relative meetings and photos, displayed at the entrance to the home, kept families and friends informed. This helped people to maintain relationships that were important to them.

During the visit, we saw people taking part in activities, mostly in small groups or one to one, which promoted stimulation, movement and enjoyment for those involved. Staffing levels were seen to meet people's needs with people being appropriately supervised and supported. This helped to keep people safe.

We saw that people were involved in discussions about a variety of topics each month including the home's environment, activities, staffing and menus.

People had access to snacks and drinks out with mealtimes, including tea trolleys, with home baking and fresh fruit. People were seen to enjoy the meals served at mealtimes and were provided with relevant support to eat and drink, including being offered seconds, and 'show plates' used to provide people with a visual choice of meals. Modified and specialised diets were seen to be catered for. Menus, including an alternative menu, were on display in the corridor, however we suggested that table menus, with related pictures, were provided to help further inform people's choice. We also suggested they look to provide two hot options at lunchtime as well as at dinner time. These will help to enhance people's experience further.

Quality assurance processes in place reflected preventative measures in use, positive and improved outcomes in relation to falls, medication, stress and distress, incidents and skin care management. Feedback from health professionals was also very positive, 'staff take ownership and responsibility for their residents care needs and make appropriate referrals', 'residents are involved in decision making about their care and support'.

Management had completed a Service Improvement plan and Self-evaluations, which were linked to the quality framework and had action plans for any identified areas for improvements. We suggested that the self-evaluations could be further improved by adding more examples of practice within the home, as to how outcomes were being achieved.

We discussed the recent increase in places for people under 65 years of age and how management should ensure that current aims and objectives of the service and staff training are reflective of this. Management should also continue to ensure that any admissions are suitable for the people currently living in the home.

How good is our setting?

5 - Very Good

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

People who live in the home should experience a high quality environment. The home was found to be welcoming, clean, tidy and odour free.

There had been recent investment and refurbishment completed in the home. This had created a number of additional bedrooms, ensuite wet floor shower facilities and improved communal bathroom and wet floor shower facilities.

We saw that people had been involved in choosing colour schemes and a separate lounge space had been developed for those under 65 years of age living in the home, which allowed them to spend time with people of a similar age group.

Communal lounge and dining areas were on the ground floor, where the majority of people spent their day. A variety of seating was arranged to promote social engagement and a smaller 'sun' lounge area provided a quieter space for people, away from the noise of the larger lounge. All communal areas and furnishings were seen to be in very good condition, bedrooms were personalised to people's own tastes and the dining area was well presented, with a kitchenette stocked with tea and coffee facilities. We discussed, with management, about ensuring that there was adequate seating in lounge and dining areas for the home's increased capacity, and how this can be adapted to give people the choice of where to spend their day or eat their meal.

We also discussed, with management, about giving people the option to be able to lock their own bedroom door, allowing them to maintain their privacy and protect their belongings.

The home's rear and front garden areas were well set out with seating and tables, and provided outdoor spaces for people to access fresh air. We became aware that some people were accessing the rear garden for smoking but there did not appear to be a designated area or shelter for them to use. Management agreed to address this.

Staff were seen to practice appropriate infection prevention and control around the use of personal protective equipment (PPE), cleaning practices and management of laundry.

There were clear maintenance systems and servicing contracts in place to keep people safe. Quality assurance systems helped to highlight any areas for improvement as well as ongoing staff training and practice compliance. Management confirmed that the current use of an electronic system to sign in and out

of the building was not accessible to all staff, and we therefore asked that they revert to previous systems until all staff have full access to the information, especially in the event of an emergency.

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

The service should improve personal plans and associated care documentation to ensure that they are detailed, up to date and outcome focused. This will ensure that care and support is informed by plans that are person-centred and reflective of each person's current and future care needs, choices and wishes.

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 1.15).

This area for improvement was made on 25 July 2024.

Action taken since then

From the sample of personal plans viewed, we found care plans detailed with preferences and routines, including mental health, stress and distress and 'How I spend my day'. The majority of evaluations were detailed, more outcome focused and reflective of any changes. Risk assessments were also seen to be up to date and reviewed regularly.

Communication between relatives and relevant health professionals was clearly recorded. We also saw that six monthly care reviews were well planned and the majority carried out within the expected timescale, with relevant involvement from people and/or their next of kin.

Separate activity records were completed by the wellbeing co-ordinator, for each person, reflecting interactions, weekly evaluation and the benefit achieved. We suggested that the evaluations of 'How people spend their day' could be more reflective of the daily records completed.

We also noted that information contained within some records, for example, behaviour records and daily notes, could be used better to inform evaluations and changes in people's care.

Management agreed to review the areas highlighted.

Therefore 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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.