

Queens Quay House Care Home Service

Queens Quay Main Avenue
Clydebank
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Telephone: 01389 603 850

Type of inspection:
Unannounced

Completed on:
25 March 2026

Service provided by:
West Dunbartonshire Council

Service provider number:
SP2003003383

Service no:
CS2020380482

About the service

Queens Quay House is a care home for older people and is located next to Clydebank Health Service. There is a bus stop outside the home, which is approximately ten minutes walking distance to the nearest train station, and large shopping centre.

The service provides residential care for up to 84 people and there were 73 people living there at the time of this inspection.

The building is on two levels, with lift and stair access. The care home is divided into 8 small group living flats. Flats on the ground floor have access to their own secure garden area, while those living on the upper floor have access to a large balcony.

The home has its own cinema, bistro and hairdressing facility on the upper floor. There are a variety of activity rooms and quiet rooms.

The local authority Clydebank Day Service and Opportunities service, is in the same building on the ground floor.

About the inspection

This was an unannounced inspection which took place on 25 March 2026 between 10:15 and 12:15. The inspection was carried out by one inspector from the Care Inspectorate. This inspection was to follow up on one of two requirements and four areas for improvement made at the previous inspection on 14 January 2026.

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 management
- reviewed documents
- reviewed medication systems.

Key messages

- Improvements had been made and people could now be assured that they were being supported by staff to receive their medication as prescribed.
- Systems were in place for medication management to be monitored daily and for management to have an overview.
- Medication training reviews had been undertaken with staff by management to ensure that staff had the correct skills and knowledge.
- This requirement has been met.

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

Requirements

Requirement 1

By 23 March 26, the provider must ensure that people receive their medications as prescribed. To do this the provider must, as a minimum, ensure that:

- a) Staff have the knowledge and skills to use their electronic system.
- b) Systems are put in place to ensure that medications have been administered and where not given, a reason noted.
- c) There are robust audit trails to ensure that these systems are being adhered to.
- d) There is a clear note of actions taken following any anomalies.

This is to comply with Regulation 4(1)(a) and (b) (Welfare of users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me' (HSCS 1.19).

This requirement was made on 26 January 2026.

Action taken on previous requirement

Improvements had been made and people could now be assured that they were being supported by staff to receive their medication as prescribed.

Systems were in place for medication management to be monitored daily and for management to have an overview.

Medication training reviews had been undertaken with staff by management to ensure that staff had the correct skills and knowledge.

Met - within timescales

Requirement 2

By 16 April 2026, the provider must ensure that people's needs are met safely. To do this the provider must as a minimum:

- a) Use a suitable dependency tool to review the needs of people regularly and adjust staffing levels appropriately.
- b) Ensure that staff are deployed effectively, to ensure that people are safe and have sufficient support in

meeting their support outcomes.

This is 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) and Section 7 of the Health and Care (Staffing) (Scotland) Act 2019.

This is to ensure that 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) and 'People have time to support and care for me and speak with me'. (HSCS 3.16).

This requirement was made on 14 January 2026.

Action taken on previous requirement

Not assessed at this inspection.

Not assessed at this inspection

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 support people's health and wellbeing the provider should, at a minimum, ensure that actions are put in place for people identified as having a Malnutrition Universal Screening Tool (MUST) score of 1 or above. These should include, but not be limited to:

- a) MUST Step 5 to be initiated when a person's MUST initially increases from a score of zero.
- b) Food and fluid charts are completed to allow for further assessment and to provide evidence that first line interventions have been implemented.
- c) People identified as being at risk of malnutrition have a care plan in place that details clear actions to be taken to reduce the risk to them.
- d) There are robust audit trails to ensure that these actions are being adhered to.
- e) There is a clear note of actions taken following any anomalies.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My meals and snacks meet my cultural and dietary needs, beliefs and preferences (HSCS 1.37).

This area for improvement was made on 14 January 2026.

Action taken since then

Not assessed at this inspection.

Previous area for improvement 2

To promote good outcomes and to minimise the risk of poor outcomes, the service should ensure that governance and oversight systems in place to identify risks contain correct and up to date information. Leaders at all levels should have the skills, capacity and systems in place to identify risks, plan appropriate actions to address these and drive improvement.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes". (HSCS 4.19).

This area for improvement was made on 14 January 2026.

Action taken since then

Not assessed at this inspection.

Previous area for improvement 3

To support people's health and wellbeing the provider should, at a minimum, ensure that:

- a) staff have the knowledge and skills to use their electronic system
- b) relevant risk assessments are completed and used to inform the personal plan
- c) where a service user needs a specific aspect of their health monitored, that supporting documents are completed and that trained staff have an overview of these.
- d) There are robust audit trails to ensure that these actions are being adhered to.
- e) There is a clear note of actions taken following any anomalies.

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 14 January 2026.

Action taken since then

Not assessed at this inspection.

Previous area for improvement 4

To support people's health and wellbeing, the provider should, at a minimum, ensure that reviews are carried out, at least every six months.

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 14 January 2026.

Action taken since then

Not assessed at this inspection.

Complaints

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