

Olympia House Care Home Service

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Type of inspection:
Unannounced

Completed on:
4 March 2026

Service provided by:
Lanam HC Ltd

Service provider number:
SP2023000023

Service no:
CS2023000031

About the service

Olympia House is registered to provide a service to a maximum of 72 adults aged 55 years and above with assessed physical and/or dementia/memory impairment needs. The provider is Lanam HC Ltd.

The care home is situated in Bridgeton, Glasgow, and is near public transport facilities. The home is purpose-built with all accommodation at ground level and divided into three separate units, McQueen, Lindsay and Bruce. There is a car park to the front of the building.

Each unit provides communal lounge/dining rooms and single bedroom accommodation with en suite toilet facilities. Each unit has access to an enclosed garden area.

About the inspection

This was an unannounced inspection which took place on 3 and 4 March 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:

- spoke with 10 people using the service and seven of their families
- spoke with 18 staff members and two members of management
- observed practice and daily life
- reviewed documents
- obtained feedback from visiting professionals.

Key messages

- Care and support was provided in a dignified and personalised way and staff knew people very well.
- Relatives told us their loved ones were well cared for, happy and safe, and spoke highly of the staff team.
- People's bedrooms were comfortable and nicely personalised.
- Some areas of the home had been redecorated and work was ongoing, with a plan to address those areas which still needed to be improved.

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?	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. There were a number of important strengths which taken together clearly outweigh areas for improvement.

We received positive feedback about the service and carers. Relatives said people at Olympia House felt safe, settled and well cared for, giving families reassurance. Staff were repeatedly praised for being warm, attentive and approachable. People described a calm environment, and some people told us about how their relatives had benefited from becoming resident in the home, with apparent improvements to their wellbeing being supported. Relatives told us that they felt welcome in the home, and that communication with the service worked well. Important information about their relative was being shared. People were supported to keep up and maintain their relationships with important others.

People reported being happy with the care, and describing staff as caring, patient and considerate. We observed many kind, genuine interactions between staff and people. Staff took time to explain, support and reassure people which helped people feel supported and reassured.

The activity and events planner organised by the activities coordinator was displayed and events were available to all to attend if they wished. People and relatives spoke highly of the events organised which enhanced enjoyment and social connection. Some people were supported to spend their days meaningfully, doing things they enjoyed. However, this practise was not consistent. Some people seemed disengaged for long periods which reduced stimulation and positive daily experiences (see What the service has done to meet any areas for improvement we made at or since the last inspection).

A consistent senior team, supported by registered nurses, knew people's health and care needs well which ensured timely and effective responses to changes in their wellbeing. They built strong working relationships with visiting professionals, whose advice was implemented into people's care. Visiting professionals frequently highlighted staff's compassion, strong leadership and excellent communication. As a result, people received the healthcare support that was right for them.

Medication was generally managed carefully for people. There were regular checks in place, including daily counts being implemented. However, we identified inconsistencies in stock balances and the ordering of medication. There were some issues with documentation and protocols that created a risk of inconsistent support and medication not being administered as prescribed. These concerns were discussed with the manager (see area for improvement 1).

Medication with an 'as required' dose can treat many different conditions. People's plans should contain enough information to support staff to administer as required medication. Some existing protocols did not always give staff clear guidance on when medication should be administered. This created a risk that people may not receive their medication consistently to support their health and wellbeing. These concerns were discussed with the manager (see area for improvement 2).

People were very positive about the quality and choice of meals, which they enjoyed in a sociable and pleasant environment. They were regularly able to share their views with suggestions considered and acted upon.

The care planning system was not always used effectively, and some care plans did not reflect people's experiences or outcomes. We identified gaps in the documentation for pressure care, oral care and bowel monitoring. Strengthening record keeping in these areas would provide a fuller and more accurate picture of the support people receive. Documentation needed to improve to keep pace with changes in people's health and support needs (see area for improvement 3).

We shared some concerns with the management team about staff practice when supporting people to dine in their bedrooms. People were not always positioned in a suitable and safe manner which created a potential risk of aspiration or choking (see area for improvement 3).

Areas for improvement

1. To promote the health and wellbeing of people using the service, the provider should ensure people's medications are managed well.

To do this, the provider should:

- a) carry out regular medication counts to ensure prescribed medication is available and, where shortages are identified, ensure timely ordering and appropriate escalation so the person maintains an uninterrupted supply
- b) implement robust systems for checking in new medication and maintaining accurate stock balances
- c) ensure where additional medication requires to be stored for people, that stock control arrangements and regular checks must be in place to ensure people have access to their medication at the right time
- d) establish a process for notifying and investigating missed medication doses and ensure this is consistently followed.

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).

2. To support people's wellbeing and ensure they experience interventions that are safe and effective, if receiving as required medicines, the provider should:

- a) ensure that as required medicines are administered consistently and in line with assessed need
- b) ensure that protocols are in place for all as required medicines
- c) ensure that protocols give clear guidance on when the medicine should be administered, record the rationale for use, the outcome and effect and specify when further action is required
- d) ensure that protocols are clearly linked to people's personal plans.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "Any treatment or intervention that I experience is safe and effective" (HSCS 1.24).

3. To support positive outcomes for people and keep them safe, the provider should ensure people receive consistent support in line with their assessed care needs.

To do this the provider should:

- a) ensure people are supported with oral care as detailed in their personal plan
- b) ensure people are supported to reposition as detailed in their personal plan
- c) ensure care records are accurate and there is management oversight of this.

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

How good is our setting?

4 - Good

We evaluated this key question as good. There were a number of important strengths which taken together clearly outweigh areas for improvement.

The home was friendly and welcoming, and its clean, tidy, clutter free environment promoted people's comfort and wellbeing. Staff took pride in the service and valued that it was people's home. The units were homely with plenty of fresh air and natural light.

The service had undergone substantial refurbishment, and considerable effort had been made to create a homely environment through décor, furnishings and wall displays. People were encouraged to express their views and were involved in decisions such as choosing paint colours and activities, supporting their participation in shaping their living environment. There were, however, scuffs and chips to paintwork due to general wear and tear in the care environment, especially some handrails and skirting boards which required repair and redecoration.

Corridors and communal areas were free from clutter, enabling safe and unobstructed movement. People had access to equipment that supported their independence, and all aids and appliances were subject to regular maintenance checks, helping to ensure safety. The home offered a range of comfortable seating areas. Quiet spaces for privacy and larger communal areas for social interaction, supporting people's rights to choice, independence and privacy.

There was good oversight by the maintenance team with clear and well-kept records. Environmental safety checks and equipment maintenance checks were in place and up-to-date which supported people's safety and wellbeing. We saw completed records for fire safety, equipment checks and cleaning schedules.

Staff generally showed a good level of compliance with infection prevention and control training, but we observed some variable practice during the inspection. Some staff were wearing wristwatches or jewellery and were not bare below the elbows which can reduce the effectiveness of hand hygiene and increase the risk of infection transmission.

Although there was a good supply of personal protective equipment (PPE) within the service, staff did not always have access to it at the point of care. Safe disposal of PPE was also not consistently in line with the Care Home Infection Prevention and Control Manual, particularly within communal bathrooms (see area for improvement 1).

The external grounds were well-maintained, and people told us they could access the garden in suitable weather.

Areas for improvement

1. To support positive outcomes for people, the provider should ensure that all staff follow best practice regarding infection prevention and control and, in particular, the use and safe disposal of personal protective equipment.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that: "I have confidence in people because they are trained, competent and skilled, and able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).

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 ensure that people get the most out of life, management should ensure that people's interests, abilities, personal outcomes and participation are appropriately supported and recorded.

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 maintain and develop my interests, activities and what matters to me in the way that I like" (HSCS 2.22).

This area for improvement was made on 19 July 2023.

Action taken since then

People we spoke with, during this visit, highlighted the positive impact the new wellbeing co-ordinator had made to them, their relative and the home.

We observed, however, that some people seemed disengaged for long periods which reduced stimulation and positive daily experiences. There is a vacancy for a further co-ordinator and the provider concurred that this additional person would benefit the overall activity provision.

This area for improvement has not 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
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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