

Rosehall Manor Care Home Service

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Shotts
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Telephone: 01501 820 080

Type of inspection:
Unannounced

Completed on:
27 February 2026

Service provided by:
Third Life Care Limited

Service provider number:
SP2003000159

Service no:
CS2005089642

About the service

Rosehall Manor is a care home providing care and support for up to 64 older people, located in Shotts, North Lanarkshire. At the time of inspection there were 62 people living in the home.

The care home was registered with the Care Inspectorate on 1 July 2005, and the provider is Third Life Care Limited.

The service consists of three units, each unit has a large lounge, a small quiet lounge, and a dining room. All 64 bedrooms have en-suite facilities, and there are also additional bathing facilities and toilets. The home also has a hair salon, a large balcony, and two enclosed gardens.

About the inspection

This was an unannounced inspection which took place on 25 and 26 February 2026 between 07:00 and 15:30. Two inspectors carried out the inspection. To prepare for the inspection, we reviewed information about this service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

In making our evaluations of the service we:

- spoke with seven people using the service;
- spoke with eight staff;
- spoke to four relatives;
- considered 36 staff responses to our questionnaires;
- considered eight responses from residents' questionnaires;
- considered questionnaire responses from 15 relatives;
- observed practice and daily life;
- reviewed documents;
- spoke with two external professionals.

Key messages

- People were very happy with the care and support they received in the service.
- Positive and caring interactions were seen between staff and residents.
- Relatives were happy with the quality of care.
- The environment people lived in was of a very good quality with some more attention to detail in cleaning practices needed.
- Care planning documentation was of a very good standard with further attention needed in the completion of daily records.

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 leadership?	5 - Very Good
How good is our staff team?	5 - Very Good
How good is our setting?	5 - Very Good
How well is our care and support planned?	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 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.

During our visit, we observed that people experienced warm, respectful, and compassionate interactions with the staff team. Individuals told us they knew staff well and felt safe, supported, and treated with kindness. One person commented, "I am happy with the care and support I required." Relatives also expressed confidence in the quality of care delivered. Feedback included, "I believe my relative is looked after well and always appears clean and well-dressed when I visit," and "I am of the opinion that my relative's wellbeing is important to the staff." Another relative noted their family member had been "looked after very well since they went into Rosehall." This consistent positive feedback reflected trusting relationships and a strong ethos of person-centred care.

People's wellbeing benefited from comprehensive and current healthcare assessments. The service consulted appropriately with a range of external healthcare professionals, including GPs, podiatrists, and dietitians. Professionals interviewed at inspection spoke highly of the service, describing constructive working relationships where any concerns or emerging risks were promptly addressed.

Medication management was effective and safe. Staff demonstrated strong knowledge and competency, ensuring people received their prescribed medications correctly. We observed clear communication with external health professionals, and staff sought guidance appropriately to support individuals' health needs.

Activities played a significant role in enhancing people's quality of life. Regular exercise groups, planned events, and opportunities to engage with the local community were well received. People spoke enthusiastically about outings, with one person saying, "I am happy here and enjoyed the keep-fit classes." These opportunities supported mobility, confidence, and social connection.

People had continual access to varied meals, snacks, and drinks tailored to their dietary needs and preferences. Staff responded promptly to changes in eating or drinking patterns, ensuring nutritional needs were consistently met. Dining took place in a relaxed environment, with individuals choosing their preferred dining room. Although a hot trolley had been shared between units, management confirmed an additional food holder had been purchased to improve the mealtime experience.

Overall, people experienced warm, skilled, and responsive care that promoted wellbeing, independence, and positive outcomes at Rosehall.

Areas for improvement

1. To support people's health and well-being the provider should ensure recordings of daily health charts are fully completed.

This is to ensure care and support is consistent with Health and Social Care Standard (HSCS) which state that 'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27)

How good is our leadership?**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.

Feedback from people living in the service, their families, and staff highlighted consistently strong confidence in the management and senior leadership team. Families described management as highly visible, accessible, and actively engaged in day-to-day life within the home. Comments such as "the management team are always visible and available for a catch-up" and "effective and very approachable" reflected a strong culture of openness and trust. Families also emphasised that they "cannot fault any of the leadership in Rosehall," reinforcing the positive impact leadership has on the overall experience of care.

The service demonstrated a clear and effective participation strategy, supported by a comprehensive service improvement plan. Feedback from residents, relatives, friends, and staff was used meaningfully to shape ongoing developments. This was evident in the well publicised "you said - we did" displays, which provided transparent evidence of actions taken in response to suggestions or concerns.

People felt confident providing feedback because they trusted that management listened and responded promptly. One resident shared, "If I have any problems I just say to the staff and it's always dealt with," while a family member noted, "I believe the leadership have the welfare of the residents at heart."

The service maintained strong oversight of people's experiences through regular reviews, meetings, and established quality assurance processes. Audits of care practice, clinical oversight, and staff performance ensured that standards remained high and informed continuous improvement. Overall, the findings reflect a well-led service committed to delivering the right care at the right time for every individual.

How good is our staff team?**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.

Evidence gathered through staff interviews, survey analysis, training records and practice observations indicates that the service has a well-supported and committed staff team who work effectively to meet the needs of people experiencing care.

Staff consistently reported high levels of job satisfaction and confirmed they feel well supported by the management team. Regular supervision, reflective sessions and staff meetings were highlighted as beneficial in maintaining communication and supporting continuous development. Staff described positive team dynamics, noting a good balance of experience and skills within the workforce, which contributes to stable and consistent care delivery. Staff reported the team worked well together. Staff interviewed demonstrated awareness of Adult Support and Protection responsibilities and reported no concerns regarding unsafe or poor practice.

Survey data strongly reflects these findings. 97% of staff reported they were happy with the standard of care delivered within the service, and 91% felt they received sufficient supervision and appraisal to support their professional growth. A small number of staff noted that they occasionally felt rushed or had limited time with residents during busier periods. However, staff also highlighted that recent increases in staffing levels had improved capacity, and clearer allocation of duties by management had supported fairness and

efficiency across units. Feedback consistently demonstrated a strong commitment to person-centred care and supporting individuals' independence.

Practice observation records indicated robust oversight, with all but eight day and night staff having completed observations for the current year. This reflects effective monitoring of competency and quality of practice.

Staff reported that meetings occur, although some were unsure of the frequency. Records confirm four meetings took place in 2025, with documented action planning and follow-up. Encouraging more regular engagement with staff meetings would further strengthen reflective practice and workforce communication.

Overall, the evidence indicates that the service has a capable, well-supported staff team who work collaboratively to deliver safe and high-quality care.

How good is our setting?

5 - Very Good

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

The service demonstrated consistently high standards of cleanliness, organisation, and environmental quality. Throughout the walkaround, the environment appeared clean, welcoming, and thoughtfully arranged, creating a positive first impression. Communal areas were well-maintained, with décor that contributed to a warm, homely atmosphere. Attention to the layout and presentation of the service was evident, and efforts to maintain a calm, comfortable environment were successful.

Bedrooms were found to be well-presented, personalised, and reflective of residents' preferences and individuality. Furniture was arranged to promote safety, independence, and ease of movement. The overall standard of upkeep in private and communal spaces demonstrated strong commitment to residents' comfort and wellbeing.

A small number of issues were identified that required attention to ensure full compliance with safety and infection-control standards. During the early-morning tour, two sluice rooms were found to be left open, presenting a potential risk. Shared skin cleansers were also observed in one bathroom, contrary to best practice. Additionally, pull cords were not consistently reaching floor level, which could impact residents' ability to summon assistance promptly. The service was advised to audit these matters and implement remedial actions without delay.

Cleanliness standards were very good overall; however, some areas would benefit from more detailed cleaning. A bath chair and commode seat showed isolated patches of grime, although surrounding areas were clean. The undersides of dining room tables, where residents commonly place their hands, needed more consistent attention. An area for improvement was issued to support targeted enhancements in these specific areas (**see area for improvement 1**).

Wayfinding signage could be improved to better support residents, particularly those living with cognitive impairment. The service was encouraged to utilise the Kings Fund dementia-friendly environmental assessment tool to guide improvements that enhance independence and confidence.

Environmental checks were being completed regularly, and all required certification was current and compliant. Staff feedback, observations, and cleaning records confirmed that the home maintains a very

good cleaning regime. Recent refurbishments - such as replacing carpets with vinyl flooring - had further strengthened hygiene standards and overall presentation.

Areas for improvement

1. To ensure people experience high quality facilities the provider should make certain there are detailed cleaning routines for high-touch and less-visible surfaces.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.' (HSCS 5.22).

How well is our care and support planned?

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.

Care planning within the service was assessed and was found to be of a very good standard overall. Plans sampled were well completed, person-centred, and up to date, demonstrating that staff had maintained a clear understanding of each resident's assessed needs and preferred approaches to care. Records showed consistent updating following changes in health or following input from external professionals, reflecting strong communication and multi-disciplinary working.

A need for further improvement was identified within the oral care documentation. In a number of plans, entries in the oral care section were incomplete or absent, and in several cases oral hygiene records had not been fully maintained. Turning charts were generally completed in line with residents' plans, although a small number contained gaps. Although some improvements were evident regarding daily chart completion this had been raised previously, it was considered appropriate for this area for improvement to be repeated (**see area for improvement 1**).

Despite these issues, the overall quality of care planning was strong. Evidence of proactive referrals, regular involvement of external professionals, and detailed risk management demonstrated effective oversight and a responsive approach to residents' changing needs.

Residents spoken to felt their care needs were well met and praised the staff for their support. Relatives also reported high satisfaction, noting good communication, personalised care, and positive engagement aligned with residents' wishes.

Areas for improvement

1. To support people's health and well-being the provider should ensure recordings of daily health charts are fully completed.

This is to ensure care and support is consistent with Health and Social Care Standard (HSCS) which state that 'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27)

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 people can take part in activities they choose and have opportunities to be out in the community a person-centred activity plan should be developed.

This is to ensure care and support is consistent with Health and Social Care Standard (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)

This area for improvement was made on 10 April 2025.

Action taken since then

The service had taken positive and proactive action to enhance meaningful activity for residents. They were developing strong community partnerships and plan to bring external activity groups into the service, increasing inclusion for those unable to travel and supporting wider participation. Intergenerational work was well established, with active links to a local nursery and primary school. Care plans clearly reflect individuals' preferences and interests, ensuring activities were personalised and relevant. Residents spoke warmly about regular planned outings, demonstrating that social opportunities are valued and contribute positively to their wellbeing.

This area for improvement had been met.

Previous area for improvement 2

To support people's health and well-being the provider should ensure recordings of daily health charts are fully completed.

This is to ensure care and support is consistent with Health and Social Care Standard (HSCS) which state that 'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27)

This area for improvement was made on 10 April 2025.

Action taken since then

Charts reviewed remained incomplete, with several gaps still evident. Management acknowledged the issue and had already identified the need for improved daily recording practices. Although awareness was clear, consistent action had not yet fully addressed the deficiencies, indicating further reinforcement and monitoring were required to achieve reliable, accurate documentation.

This area for improvement has been repeated in this report.

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 leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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