

## Craigbank Care Home Care Home Service

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Glasgow  
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**Type of inspection:**  
Unannounced

**Completed on:**  
5 November 2025

**Service provided by:**  
Advinia Care Homes Limited

**Service provider number:**  
SP2017013002

**Service no:**  
CS2017361006

## About the service

Craigbank Care Home is registered to provide a care service for 61 older people who are living with dementia. The provider is Advinia Care Homes Ltd.

The home provides single accommodation, with ensuite toilet facilities, over two floors. Each unit has its own communal living and dining areas. The ground floor units offer residential care and the upper floor units offer nursing care.

The service is located close to local amenities and public transport. There is parking at the front and an enclosed garden to the rear of the building.

During this inspection there were 61 people living in the service.

## About the inspection

This was an unannounced inspection which took place on 3 to 5 November 2025, between 07:00 and 19:00. The inspection was carried out by two inspectors 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:

- received feedback from 20 people using the service and seven family members
- received feedback from 23 staff, including management
- reviewed relevant documentation
- observed practice and daily life
- received feedback from six visiting health professionals.

## Key messages

- The staff team were knowledgeable about people's needs and managed these well, leading to positive outcomes for people.
- How more people could access outdoor space, be involved in the local community and have their wishes meet, could be explored further.
- People living in the home, their relatives and staff were regularly involved in providing feedback.
- The home was maintained to a high standard and provided a relaxed and calming atmosphere.
- Housekeeping staff knowledge and practice, and laundry management should be reviewed and monitored, in line with best practice.

## 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 in each unit 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.

Relatives told us, 'he's happy and relaxed, it's such a relief that he is safe and happy', 'we are so lucky she is here, they are so caring', 'he is so calm and relaxed, they really care about the residents'.

How people spend their day is important in maintaining people's physical and mental wellbeing. Planned activities were evident and individual records reflected how people had been involved and the benefit gained. During the visit, we saw people being involved in activities, mostly in small groups or one to one, and we were aware of music playing constantly throughout the day, which added to the calm and pleasant atmosphere. Meaningful engagement was led by the wellbeing co-ordinator who planned group and individual time, including outings with staff and relative support.

The home operated a 'whole home approach', which meant that all staff were involved in spending time with people living in home. We saw that some people were out of the home regularly and we suggested that they look at how they could enable more people to access outdoor space and be involved in the local community. We also discussed how people's 'day to remember' wishes could be met. People told us, 'I like painting...that's the best day', 'more time out in the garden during the better weather, especially when living on the first floor', 'staff know he loves to wander and they support him', 'there's been a vast improvement in his overall wellbeing'.

People have the right to appropriate healthcare. We found staff handovers to be detailed and informative, and saw that there were systems in place to assess and monitor people's health and wellbeing needs. People's stress and distress, falls prevention, wounds and medication, including 'as required' and 'covert', were seen to be managed well and in line with best practice. All clinical issues were discussed at daily staff and clinical risk meetings and improvement was evident.

We saw that the home had been involved in a pilot using the Bradford Dementia wellbeing profile. This reflected positive outcomes for the individuals involved. We discussed how this could be beneficial for some people currently living in the home.

Referrals to and input from relevant healthcare professionals such as, care home liaison nurse, GP, community psychiatric nurse, dietitian and chiropodist was evident. The health professionals, spoken with during the inspection, confirmed appropriate referrals and knowledgeable staff who followed their advice, 'the staff consistently provide exceptional patient care, demonstrating empathy and commitment to resident well-being'. This helped to ensure that people were getting the right care for them.

We observed people's mealtime experiences and found these to be a positive and calm experience. People were provided with relevant support to eat and drink, including people who took meals in their bedroom.

Catering staff were aware of people's nutritional needs and preferences, and meals including textured diets were seen to be well presented. We saw that people had access to snacks and drinks out with mealtimes, including tea trolleys with home baking and milkshakes, in a texture that suited people's needs.

Regular and planned involvement from people living in the home, their relatives and staff was evident through meetings, surveys and care reviews. Care reviews were seen to be held six monthly and we suggested that staff continue to explore ways to use available monies especially those with substantial amounts. We were told that advocacy support was involved where necessary and relatives felt confident that staff would keep them informed, 'we are always made aware of any issues and kept well informed', 'I am kept up to date with any incidents and changes with my mothers care', 'all nursing and care staff ensure my relative is attended to and always keen to keep us informed of any situation'.

## 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 clean, tidy and odour free. All décor and furnishings were seen to be maintained to a high standard and there was clear evidence of investment in the home since the last inspection.

The home offered individual bedrooms, with ensuite toilet facilities, which were personalised to peoples' own tastes, and access to communal bathing and shower, which had been refurbished since the last inspection.

Each unit promoted small group living with their own lounge and dining areas. All communal areas were bright and comfortable with relevant pictures and themes. Corridors were well-lit with contrasting coloured handrails, helping people to move around safely. Throughout the home, we saw clocks which helped to orientate people and signage which helped to direct people to where they wanted to go. Seating areas were provided in the foyer area of each unit which allowed people to rest when walking around.

People had access to a hairdressers room, bar and quiet or activity room, which provided additional spaces for people to use and enjoy. The home's rear garden area provided an enclosed and safe outdoor space for people to access fresh air. The path provided a flat surface and handrails, allowing people to move around independently and safely. Seating areas were available throughout the garden including a smoking shelter. There were areas of interest within the garden, including sensory and planted areas which people had been involved in creating.

Staff were seen to practice appropriate infection prevention and control around the use of personal protective equipment (PPE) and management of laundry. We spoke with domestic staff who described the use of cleaning solutions and related equipment such as mops, buckets and disposable cloths. Staff were clear about the use of detergent and disposable cloths however were not able to fully describe the routine use of the chlorine solution or how often the bucket water should be changed.

We highlighted this to management and asked that they review and monitor housekeeping staff knowledge and practice, in line with best practice. We also discussed the amount of laundry building up and management committed to reviewing and addressing these.

There were clear maintenance systems and servicing contracts in place to keep people safe. Quality

assurance systems helped to highlight any areas for improvement, on an ongoing basis, and how these were addressed.

## 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 receive care and support which is personal to them, the manager should ensure that resident care planning is meaningfully evaluated, reflecting if the desired outcome has been achieved and the benefit to the resident. Care reviews should also review the use of people's monies and help to identify any future plans and goals.

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 30 March 2023.**

#### Action taken since then

The home used an electronic care planning system. The personal plans viewed, were person-centred and showed a very good level of information which reflected people's preferences. There was a clear overview of the planned and actual care which reflected the benefit to the individual.

Quality assurance systems, such as personal plan audits, helped to highlight any areas of change or improvement, on an ongoing basis, which need to be addressed.

Care reviews were seen to be held six monthly and involved people and their relatives. We suggested that staff continue to explore ways to use available monies especially those with substantial amounts. We were told that advocacy support was involved.

**This Area for Improvement has been met.**

#### Previous area for improvement 2

In order to ensure that staff learning and development continues to support positive outcomes for people they care for, the manager and provider should:

- include the outcome of staff observations of practice and competencies in supervision meetings
- clarify and develop the roles of champions in the service
- allow staff the opportunity to discuss best practice and reflect on their own practice.

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

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

**This area for improvement was made on 30 March 2023.**

## Action taken since then

We saw that staff supervision meetings were taking place every three months, either in a group or individually. Individual records reflected good discussions around staff performance, competency and wellbeing.

Staff competency and knowledge were also regularly checked through observations of practice and reflective accounts.

The manager planned to further develop staff champion roles and encourage staff to express an interest in their preferred area.

**This Area for Improvement has been met.**

## Previous area for improvement 3

To ensure the safety and wellbeing of people experiencing care, the provider should ensure staff liaise promptly with external health professionals as required when changes are reported.

This is to ensure care and support is consistent with Health and Social Care Standard 1.13: I am assessed by a qualified person, who involves other people and professionals as required.

**This area for improvement was made on 9 June 2023.**

## Action taken since then

Input from relevant health professionals was evident and the development of a multi-disciplinary team care plan helped to track any input and outcomes involving health professionals.

The health professionals, spoken with during the inspection, confirmed appropriate referrals and knowledgeable staff who followed their advice.

**This Area for Improvement has been met.**

## Previous area for improvement 4

For the dignity and respect of people experiencing care, the provider should ensure that personal plans are fully completed and contain detailed information about people's preferences for support with personal care and hygiene.

This is to ensure care and support is consistent with Health and Social Care Standard 1.4: If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected.

**This area for improvement was made on 9 June 2023.**

## Action taken since then

The personal plans viewed, were person-centred and showed a very good level of information which reflected people's preferences, including personal care and hygiene.

There was evidence of people having baths and showers at a time that suited them, including in the evening.

**This Area for Improvement has been met.**

#### Previous area for improvement 5

For the wellbeing of people experiencing care, the provider should ensure a person centred plan of activity is developed, recorded and delivered in line with people's assessed needs.

This is to ensure care and support is consistent with Health and Social Care Standard 1.25: 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.

**This area for improvement was made on 9 June 2023.**

#### Action taken since then

Planned activities were evident and individual records, on the electronic care planning system, reflected people's interests, how they had been involved and the benefit gained.

**This Area for Improvement has been met.**

#### Previous area for improvement 6

For the safety and wellbeing of people experiencing care, the provider should ensure regular maintenance checks are carried out and all issues are reported, recorded and actioned promptly.

This is to ensure care and support is consistent with Health and Social Care Standard 5.22: I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.

**This area for improvement was made on 9 June 2023.**

#### Action taken since then

There were clear maintenance systems and servicing contracts in place to keep people safe. Quality assurance systems helped to highlight any areas for improvement, on an ongoing basis, and how these were addressed.

All décor and furnishings were seen to be maintained to a high standard.

**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](http://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

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