

The Village Nursing Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
12 November 2025

Service provided by:
HC-One Limited

Service provider number:
SP2011011682

Service no:
CS2011300789

About the service

The Village Nursing Home is situated in a residential area of Cumbernauld, North Lanarkshire.

The provider is HC-One Limited and is registered to provide care and support for 48 older people. There were 44 people living there at the time of the inspection.

The home provides long-term nursing care as well as short-term respite breaks, to people with physical and cognitive impairment.

The home is purpose-built over three levels, with lounges and dining facilities on each of these.

All bedrooms have ensuite toilet and wash basin facilities and people are encouraged to bring in their own furnishings to personalise their rooms.

There is a secure garden area along with two decked seated areas for people to use.

About the inspection

This was an unannounced inspection which took place on 12 November 2025, between 09:20 and 17:00. The inspection was carried out by two inspectors from the Care Inspectorate. This inspection was to follow up on one requirement and one area for improvement made at a previous inspection on 19 June 2025.

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 11 residents and five visiting families
- Spoke with nine staff and management
- Observed practice and daily life
- Reviewed documents.

Key messages

- Improvements had been made around personal planning for people who lived in the care home and the requirement we evaluated as met.
- Whilst we found improvements in concerns and complaints management, record keeping could more as clear and concise. This area for improvement has been repeated.
- We found people to be clean, tidy and feedback from those we spoke with was generally positive.
- We have asked the provider to review staffing levels in Abronhill Unit to ensure that they can be confident that staffing is at the correct levels to allow staff to meet people's needs.

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

Requirements

Requirement 1

By 31 October 2025, the provider must ensure each service user has a personal plan in place which sets out how the service user's health, welfare and safety needs are to be met.

To do this the provider must, 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.

This is to comply with Regulation 5(1) and (2) (Personal Plans) 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 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 requirement was made on 19 June 2025.

Action taken on previous requirement

People could be assured that an individual personal plan was in place to direct staff on how best to care and support them throughout the day. Since the last inspection, the provider had introduced a new electronic system, which staff spoke positively about.

As this was a new system, then staff were still getting to terms with some aspects, which was to be expected.

Overall, the personal plans we sampled contained relevant risk assessments that had then be used to inform the care plan and reflected the current care and support needs of each person.

Met - within timescales

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 provider should ensure that when people or their representatives raise concerns about their care and support, effective action is taken to address their concerns in line with the service's complaint policy. This should include an outcome letter that has a 'Specific, Measurable, Achievable, Relevant, and Time-bound (SMART)' action plan, where appropriate. This should also clearly identify if the complaint will also be managed under 'Duty of Candour' legislation.

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 area for improvement was made on 19 June 2025.

Action taken since then

Whilst we found improvements in concerns and complaints management, record keeping could be more clear and concise. There were two systems in use and we suggested that the provider choose one to avoid confusion as information across both did not match. The actions taken to address any concerns raised needed expanded to show actions taken or agreed.

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.

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