

## Mossvale Care Home Care Home Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
13 November 2025

**Service provided by:**  
Mossvale Care Home Limited

**Service provider number:**  
SP2011981788

**Service no:**  
CS2011281824

## About the service

Mossvale Care Home provides a care home service to 61 older people. The provider is Mossvale Care Home Limited. The home is situated in the residential area of Craigend in Glasgow, close to local shops and transport links.

Mossvale Care Home is purpose-built with accommodation provided over two levels. There is capacity for 34 residents on the first floor and 27 residents on the ground floor. At the time of this inspection there were 57 residents living at the home.

Bedrooms are provided as single occupancy and have en suite facilities. Residents have access to communal bathrooms. There are communal lounges and dining areas on each floor and a café on the ground floor is available for resident and visitor use. The home also benefits from secure outdoor space. Visitor parking is available within the grounds of the home.

## About the inspection

This was an unannounced inspection which took place on 12 and 13 November 2025 between the hours of 7.30am and 5pm. 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 13 of their relatives
- reviewed the information in the 15 questionnaires we received from relatives
- reviewed the information in the one questionnaires we received from a resident
- spoke with 16 staff and management
- reviewed the information in the 12 questionnaires we received from staff
- observed practice and daily life
- reviewed documents
- spoke with one visiting professionals.

## Key messages

- People receive care and support from staff who demonstrate an understanding of their personal routines, preferences, and needs.
- People experience positive health outcomes because their health needs are effectively identified, monitored, and managed.
- Stimulation, meaningful engagement, and opportunities for social interaction are supported through a structured monthly activity programme and daily activities.
- Once completed, the environmental improvements identified will enhance the overall quality of the setting and contribute to promoting people's dignity, comfort, and wellbeing.

## 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?	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?

## 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.

People received care and support from staff who demonstrated a strong understanding of their individual routines, preferences, and needs. This ensured care was consistently responsive, respectful, and tailored to promote wellbeing. Throughout our visit, staff were observed engaging warmly and naturally with individuals, helping them feel valued, safe, and emotionally supported. Comments from residents included 'the staff are good to me' and 'the staff that look after me are first class'.

Whilst the majority of feedback from residents and relatives was positive, a few less favourable comments from relatives regarding aspects of service delivery were also shared with the manager. Overall, relatives expressed confidence in the care provided and appreciated the regular updates from the service and information on the home's social media page. Relatives said that they were made to feel welcome in the home and the introduction of a dementia café provided a space for relatives to connect, share experiences, and access peer support, reflecting the service's commitment to the involvement and wellbeing of family members.

We saw that people's health benefitted from robust clinical oversight, supported by systems including daily flash meetings and regular clinical oversight meetings. These forums enabled staff to share observations, discuss residents' wellbeing, and agree on appropriate responses, facilitating early intervention and ensuring care remained responsive to changing needs. Care staff also demonstrated a proactive approach in recognising and responding early to changes in individuals' health, mood, or behaviour, enabling timely and targeted interventions.

Sampled records indicated effective management of key clinical areas, including wound care, falls prevention, and nutrition and hydration support. Staff worked closely with visiting professionals to implement care plans, monitor health conditions, and respond promptly to any changes, contributing to improved health outcomes and enhancing the overall quality of care.

Staff demonstrated competence and confidence in their roles, supported by relevant training and ongoing supervision. We were encouraged to hear that focused supervision was being implemented, informed by direct observations, audit findings, and feedback from relatives. This approach supports reflective practice and continuous improvement, enabling staff to build on strengths and address areas for development.

The new manager recognised the importance of continuous professional development and had identified that further dementia specific training would enhance staff awareness and strengthen their ability to respond to the complex needs of individuals living with cognitive impairment. This commitment to learning and improvement reflects a proactive approach to maintaining high standards of care.

Meaningful activities were recognised as vital in promoting positive health and wellbeing. A varied activity programme was in place, designed to reflect the interests, abilities, and preferences of individuals living in the service. Care staff along with activity staff actively encouraged participation and created opportunities for both group and one-to-one engagement, supporting individuals to maintain independence, build relationships, and experience a sense of purpose and enjoyment in daily life. External support, such as intergenerational activities and pet therapy, helped residents feel connected to the wider community.

Where we had noted areas that could be further strengthened, these had already been identified by the manager, which was reassuring. During our visit the manager was observed spending time engaging directly with residents and staff. This helps build trust and fosters open communication. Residents, relatives, and staff spoke positively about the manager's visibility and supportive approach.

## How good is our setting?

### 4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

The quality of the environment plays a vital role in promoting people's wellbeing and sense of value. During the visit, the home was observed to be clean and well presented, with housekeeping staff working hard to maintain high standards. Cosmetic improvements had been identified with plans in place to address these. Some work had already been completed including replacing some bedroom carpets. Approval for a replacement corridor carpet was welcomed, as the existing one retained odours despite regular cleaning. Otherwise the home was free from intrusive odours.

An environmental audit had been undertaken prior to the new manager's appointment to consider how well the setting supported people living with dementia, this included giving consideration to the buzzer system used. During our visit, the buzzer noise was noted to be intrusive and potentially distressing for people who experience cognitive impairment, and it was suggested this be taken into account in future environmental improvements. As no corresponding action plan had been available, repeating the audit was recommended to ensure any identified improvements could be addressed.

Bedrooms were generally personalised with familiar objects and photographs, reflecting individuality and personal history. However, some rooms appeared quite plain, with limited visual features or items on the walls to provide focus or stimulation. Ensuite facilities were available, supporting privacy and dignity.

The café area on the ground floor continued to be used by residents and relatives, offering a welcoming and informal space for visits. Plans to repurpose upstairs space into a potential breakout area were encouraging, particularly given the limited shared space following the creation of two separate units. This could provide meaningful benefits for people living with cognitive impairment, helping to reduce distress and promote calm.

Outdoor spaces had been well maintained, with a gardener employed to ensure they were attractively presented throughout the year. Relatives had provided positive feedback about the gardener's contribution.

Overall, the environment was clean, welcoming, and supportive of wellbeing, with clear plans for improvement in identified areas.

## 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?	4 - Good
4.1 People experience high quality facilities	4 - Good

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