

Highgate Care Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
31 October 2025

Service provided by:
HC-One No. 1 Limited

Service provider number:
SP2016012770

Service no:
CS2016349804

About the service

Highgate Care Home is located in the North Lanarkshire area of Uddingston. The service is registered with the Care Inspectorate to provide a care service to 80 older people. The provider is HC-One No. 1 Limited.

Accommodation consists of four units over two floors which have communal lounges, dining rooms, quiet rooms, a café and a pub. All bedrooms within the service are single with en-suite toilet facilities and there are shared showers and bathrooms available on each floor. There is a large, well-tended garden which residents can access.

About the inspection

This was an unannounced inspection which took place on 28, 29, 30 and 31 October 2025. 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 16 people using the service and seven of their relatives
- spoke with 13 staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- People supported by the service experienced kind and compassionate care.
- Relatives reported being very happy with the care.
- Activities were supported to meet peoples preferences.
- Quality assurance systems were in place to monitor standards and support improvements.
- Food was to a high standard and people's nutritional needs were well met.
- Staff ratios were good, although night shift staff felt under pressure.

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 staff team?	4 - 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 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.

Interactions between staff and residents were consistently appropriate, compassionate, and respectful. Observational evidence highlighted numerous instances of meaningful engagement, with staff demonstrating attentiveness and kindness. Safer handling manoeuvres were carried out with dignity, as staff communicated each step clearly and reassuringly. In situations where residents experienced stress or distress, staff responded with notable patience and calmness, offering reassurance and emotional support.

Staff demonstrated a high level of responsiveness to residents' healthcare needs. Relatives reported timely referrals to GPs and other professionals, and we observed staff reacting promptly and efficiently to signs of deteriorating health or subtle changes in residents' wellbeing." Relatives spoke of significant outcomes stating, "The care home has been great for her. She used to lie crouched in bed all day in her last place. Here, she is sitting up and watching everyone from her prime spot," and "It's just great to see my mum smiling again."

Management oversight was evident through audits and reporting systems, which supported sustained, positive outcomes and ensured accountability.

Communication between the service and relatives was particularly effective. Feedback from families, alongside reviews of care plans, confirmed that updates were provided in a timely and efficient manner. This contributed to a keen sense of trust and transparency. One relative advised, "I have no complaints they've been fantastic," and another stated, "They are like family." Families of newly admitted residents also expressed satisfaction with the care and attention their loved ones received.

Feedback from residents and people experiencing care, as well as direct observation of mealtimes, indicated that food quality was consistently good. People appeared to enjoy their meals, and textured diets were well-presented and aligned with standard meals. The chef demonstrated good knowledge in dietary fortification, routinely offering fortified milk, cream, and milkshakes. Following our suggestion, the chef considered offering milkshakes in the morning to increase accessibility throughout the day. This ensured people were offered plenty opportunities to gain and maintain a healthy weight.

Although activities were not the primary focus of our inspection, we observed a variety of engagements across all units. Activity boards were prominently displayed, informing residents and families of daily and weekly events. The dedicated Facebook page was appreciated by relatives, though one family member expressed a desire to see more frequent updates featuring their loved one. Weekly outings were well-organized and tracked via a spreadsheet to ensure equality and fairness.

Four life stations were installed at the end of each corridor, featuring clothing, hats, and laundry items. These stations were designed to evoke familiar memories and hobbies, potentially reducing anxiety and agitation, particularly for residents who walk with purpose.

Medication administration was well-managed across all four units. Residents received their medications at the prescribed times, with any minor delays attributed to acceptable reasons such as late waking. This demonstrated a person-centred approach to care delivery.

How good is our staff team?

4 - Good

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

Most staff reported that daytime staffing levels were sufficient to meet the needs of individuals using the service. The care team was led by a balanced mix of registered nurses, assistant nurses, and unit managers, which contributed to a stable and well-structured leadership model. Staff demonstrated a joined and flexible approach, responding effectively to changing circumstances and supporting one another to maintain consistent care delivery throughout the day.

However, it was noted that one out the four units experienced challenges related to internal communication and team harmony. Staff within one unit expressed dissatisfaction about not feeling heard; this risked undermining team morale. These concerns should be addressed proactively through supervision and reflective practice to promote open dialogue, restore trust, and prevent wider impact on team dynamics.

Nightshift staff reported concerns regarding staffing levels, citing factors such as some people mobilising during the night and complex healthcare needs. We explored our concerns further with the management team, including a review of staffing assessments, supervision records and the manager and deputy's experiences of working the shifts themselves. We concluded that staffing levels appeared sufficient to support people's needs and outcomes. Focus should be given to how nightshift staff are supported and organised.

Additionally, this highlighted the need for open communication between night teams and management to ensure staff felt heard and supported. The views and wellbeing of staff are key factors when assessing staffing (see area for improvement 1).

Areas for improvement

1. To ensure that individuals receiving care have their health, safety, and wellbeing needs effectively met, the provider should actively involve staff in the assessment of staffing levels and maintain clear evidence of their participation in this process.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My needs are met by the right number of people' (HSCS 3.15).

How good is our setting?

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.

The care home is clean, bright, and welcoming, with thoughtfully decorated communal areas that promote comfort and familiarity. Residents were observed engaging happily with staff and each other, creating a homely and uplifting atmosphere.

The care home's layout is thoughtfully designed to support residents with dementia. Clear signage, contrasting colours, and visual cues help residents navigate independently and confidently. Corridors are

wide and uncluttered, with familiar landmarks and memory boxes outside rooms to aid recognition.

Maintenance folders show maintenance staff following providers' instructions in terms of regular, routine checks and tasks which are programmed across full year, with clear recordings by appropriate staff on areas requiring attention.

Effective measures are in place to protect individuals from the spread of infection. Cleaning schedules and regimes are aligned with recognised best practice guidance and are implemented consistently and at appropriate intervals. This is supported by adequate staffing levels within the domestic team and by ensuring staff receive the necessary support and resources to develop and maintain robust cleaning protocols.

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

People should be able to orientate themselves around their home, and in particular, be able to locate their own room with the help of personalised aids to support this. The home should utilise the Kings Fund environmental tool to support a dementia friendly living environment. (See www.kingsfund.org.uk)

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state 'I can independently access the parts of the premises I use and the environment has been designed to promote this.' (HSCS 5.11).

This area for improvement was made on 15 May 2023.

Action taken since then

The home benefits from clear and accessible signage for key areas such as toilets, lounges, the library, and dining rooms. These signs were generally easy to read and were supported by directional arrows, which aided navigation and orientation for individuals living with dementia. Some signs could not be seen until people walked round a corner, so additional signs on the walls would be effective. Some further focus on positioning signs at eye level could improve usability. Implementing these enhancements would align the environment more closely with best practices in dementia-friendly design.

Overall, the home had used the Kings Fund tool well and to people's advantage, and should be continually improved.

This area for improvement was 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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good

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