

Wheatlands Care Home Service

Larbert Road
Bonnybridge
FK4 1ED

Telephone: 01324 814 561

Type of inspection:
Unannounced

Completed on:
21 January 2026

Service provided by:
Balhousie Care Limited

Service provider number:
SP2010011109

Service no:
CS2010272088

About the service

Wheatlands is part of Balhousie Care Group, which owns a number of care homes throughout Scotland. The care home is situated in Bonnybridge, near Falkirk and provides care for older people. The service is registered for 59 older people and is close to local amenities and public transport.

The accommodation is provided in a large sandstone building, with two additional extensions. The bedrooms are all single with the majority having ensuite toilet facilities.

Wheatlands has been registered as a care home since October 2010.

About the inspection

This was an unannounced inspection which took place on 21 January 2026, to follow up on a requirement made at a previous inspection. The inspection was carried out by one inspector 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 three people using the service
- Spoke with staff and management
- Observed practice and daily life
- Reviewed documents
- Spoke with visiting professionals.

Key messages

- The service had made progress on the required environmental improvements.
- More improvements were required to support people's wellbeing.
- People were benefitting from new seating throughout the home.

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 good is our setting?	3 - Adequate
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Further details on the particular areas inspected are provided at the end of this report.

How good is our setting?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses. This was a re-evaluation following our inspection visit to review a requirement we made at a previous inspection.

There were outstanding areas for improvement identified in the service's environmental audit. The service had completed a lot of work but more was required so that people living in the service could enjoy private or communal spaces that are safe, well decorated and maintained. Please refer to 'Outstanding requirements' for more detail. These outstanding areas are now part of a new requirement (see requirement 1).

Requirements

1. By 30 July 2026, in order to promote the dignity and wellbeing of people living in the service, the provider must continue to work on their indoor and outdoor environmental audit and carry out any actions identified. This must include but is not limited to:

- a) Redecoration of all private and communal areas to a high standard.
- b) Replacement of any damaged flooring.
- c) Making the outdoor space safe and accessible to people living in the service.
- d) Continuing to include the views of people living in the service when planning the redecoration.

This is in order to comply with Regulation 4(1)(a) 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:

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.24).

This requirement was made on 22 January 2026.

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

Requirements

Requirement 1

By 5 January 2026, in order to promote the dignity and wellbeing of people living in the service, the provider must produce an indoor and outdoor environmental audit and carry out any actions identified. This must include but is not limited to:

- a) Redecoration of all private and communal areas.
- b) Replacement of any damaged flooring.
- c) Replacement of damaged or foul smelling chairs and sofas with new, matching furniture.
- d) Include the views of people living in the service when planning the refurbishment.

This is in order to comply with Regulation 4(1)(a) 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:

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.24).

This requirement was made on 30 May 2025.

Action taken on previous requirement

The provider had carried out an environmental audit and was making progress addressing the areas for improvement identified. The home had been painted however there were many new dirty marks and scores on the newly painted walls. The leadership team had organised for it to be repainted. We discussed the need to use paint that was wipeable and for staff to be careful when moving trolleys and beds so they did not mark the walls. The provider was having to replace or repair fire doors and estimated this work would take around two or three months. Given the repair works still to be completed, we asked the service to consider the timing of repainting the home, to minimise disruption to people living in the service. Many actions on the environmental action plan had still to be completed and the provider had scheduled some of these for later in the year to accommodate the fire door work.

No work had been completed to the outdoor area and the exits to the garden areas were locked. We discussed the need for people to have independent access to a safe, outdoor space. The leadership team said they had focused on the internal work and hoped to complete outdoor work in better weather.

Flooring had been replaced in the reception area and some ensuites in people's bedrooms. There was a need to replace flooring in other areas, which were identified on the service's environmental action plan. The service had also organised an environment audit to be carried out with a focus on how dementia friendly the setting was; this was completed by an external health professional. This audit identified a few

areas for improvement to make the home more dementia friendly, including ensuring consistency of colour of the flooring threshold strips between bedrooms and ensuite toilets. The service compiled an action plan to address the identified areas which we will review at a future inspection.

The service had replaced furniture in some areas with new matching furniture. A delivery of more furniture for a dining room and small lounge was scheduled for later in the week. A small amount of chairs and sofas, whilst offering a comfortable seat, were very low to the ground meaning there was not enough room at the base to accommodate moving and handling equipment. This limited who was able to use these seats.

The service had consulted with and considered the views of people living in the service, or their nominated representatives, for the redecoration of private and communal spaces.

As the provider had met parts of this requirement we decided to meet it and write a new requirement reflecting the outstanding areas for improvement identified in the service's environmental audit (see 'How good is our setting?' for more information).

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

In order to protect the health and wellbeing of people experiencing care, the service should ensure the labels on topical medicines are clearly readable and each medicine is signed and dated when opened.

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

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This area for improvement was made on 30 May 2025.

Action taken since then

Not assessed at this inspection. We will review this area for improvement at a future inspection.

Previous area for improvement 2

People should be assured they will be supported to the toilet as per their assessed needs, to ensure continence is promoted and their dignity is being maintained. The service should ensure staff are aware of people's continence management plan and how this is to be implemented.

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 29 October 2024.

Action taken since then

Not assessed at this inspection. We will review this area for improvement at a future inspection.

Previous area for improvement 3

To promote positive outcomes for people experiencing care, the provider should ensure that all staff experience regular, protected time with their line manager, or other appropriate person, to discuss the staff member's workload, support their wellbeing and promote their learning and development needs.

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 14 October 2025.

Action taken since then

Not assessed at this inspection. We will review this area for improvement at a future inspection.

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 good is our setting?	3 - Adequate
4.1 People experience high quality facilities	3 - Adequate

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