

Springboig Care Home

Care Home Service

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Springboig
Glasgow
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Type of inspection:
Unannounced

Completed on:
8 January 2026

Service provided by:
Care Homes (Scotland) Ltd

Service provider number:
SP2007008815

Service no:
CS2007142131

About the service

Springboig Care Home is a purpose-built building located in the East of Glasgow.

The building has three floors providing support to care groups for frail elderly, nursing and dementia. The service provides care and support for up to 70 older people and four adults under the age of 65. All bedrooms have en-suite shower facilities and there is a secured garden area easily accessible from the ground floor.

At the time of the inspection, the home had 61 people living in the service.

About the inspection

This was an unannounced inspection that took place 6, 7 and 8 January 2026 between the hours of 8:30 and 21:30. The inspection was carried out by two inspectors.

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 five people using the service and seven of their relatives
- spoke with 18 staff
- spoke with management and the directors of the service
- observed practice and daily life
- reviewed documents
- obtained feedback from 10 other relatives, four more people using the service, an additional six staff and eight external professionals through the online surveys.

Key messages

- People were well cared for and told us they were happy living at the home.
- People were supported by the right number of staff at the right time to meet their needs.
- Personal plans were personalised, outcome focused with good guidance to ensure people were well supported and safe.
- There were a range of audit tools used to inform management about how well the service was performing.
- Policies and procedures needed further development including reference to Scottish Legislation and best practice.
- Staff needed to utilise the space better across all units to ensure people could choose where they spent their time, particularly during mealtimes
- Staff needed to ensure they recorded food and fridge temperatures consistently.
- The provider needed to ensure each unit had access to a fully functioning bath.

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?	4 - 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?

4 - Good

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

We observed that people were relaxed in staff company and there was warmth, kindness and compassion being delivered. There was a core staff team in each unit who were knowledgeable of people's needs and demonstrated positive values. Families were complimentary about the quality of care their loved ones received. One relative told us, "We were happy with the care provided and the staff communicated regularly and well with us." A second person said, "I know all the staff and a number of the residents now, I have no concerns." One person using the service said, "Staff know what I like."

How people spend their day is important for maintaining physical and mental wellbeing. The dedicated activities team offered a varied programme of organised activities, encouraging participation at each person's level and choice. Additional opportunities included entertainers, a hairdresser, weekly church services, and support to access the local community. The home had a shop on the ground floor where people could purchase snacks and drinks. This space provided a relaxed seating area for visits with family and friends. In addition to the monthly newsletter, families could join a closed Facebook page where activities and events were shared. Photos were displayed throughout the home to showcase how people spent their time.

Presentation and quality of food were good and most people told us they enjoyed their meals. Staff were attentive, and those requiring assistance were supported appropriately. Menus encouraged choice, and alternatives were available to suit preferences or dietary needs. However, gaps were identified in recording food and fridge temperatures across all units. Consistent monitoring was essential to ensure compliance with food safety standards and protect residents' health. We have made this an Area for Improvement. (See Area for Improvement 1)

People have the right to appropriate healthcare. Assessments and systems were in place to assess and monitor people's health and wellbeing. There was evidence of referrals to and input from relevant healthcare teams. One external person told us, "Staff involve the appropriate professionals when required and take into consideration the residents or family when decisions are being made about care and support." These approaches helped keep people well and ensured their health needs were being met.

Staff had training and clear guidance, ensuring people received the right medication at the right time. We found gaps in some 'As Required' medication protocols, however these were corrected during the inspection and they would continue to be monitored closely by staff.

Staff were aware of individual needs and who required additional observations, such as monitoring mobility, stress and distress and food and fluid intake. Oral health care was managed well. Management maintained oversight of nutritional needs, with plans for those at risk of malnutrition. There were relevant assessments and evidence of weight monitoring. Falls management, including analysis and quality assurance, was robust, supporting a lessons-learned approach.

Access to a bath was an important aspect of personal care that promoted dignity, choice, and wellbeing. However, access was limited in one unit, reducing residents' ability to exercise choice and potentially impacting comfort and skin care. While we saw no evidence of harm, this did not align with best practice for autonomy and wellbeing. We have made this an Area for Improvement to ensure residents have equitable access to bathing facilities and that this choice is embedded in care planning. (See Area for Improvement 2)

People should have a personal plan aligned with best practice guidance that reflects their current needs and directs staff on how to meet those needs. A review of personal plans showed evidence that staff had good assessment skills with health and social needs documented and outcomes captured well.

Areas for improvement

1. To promote people's health and wellbeing, the provider should ensure that staff record food and fridge temperatures daily. Consistent monitoring is essential to ensure compliance with food safety standards and protect residents' health.

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

"I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables, and participate in menu planning (HSCS, 1.33)

And

"My meals and snacks meet my cultural and dietary needs, beliefs and preferences". (HSCS, 1.37).

2. To promote people's health and wellbeing, the provider should ensure there is a fully functioning bath in each unit of the home. Baths should be functional, safe, and accessible to protect residents' skin, dignity, and overall wellbeing.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected" (HSCS, 1.4)

And

"As an adult living in a care home, I have ensuite facilities with a shower and can choose to use a bath if I want." (HSCS, 5.30)

3. To promote people's health and wellbeing, the provider should ensure that all have relevant guidance to fulfil their role and responsibilities.

This should include updating policies and procedures that are in line with best practice guidance and Scottish legislation, include but not limited to, The Residents' Personal Finances and Valuables policy.

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

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11)

And

'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).

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 home was warm and welcoming and environment was generally clean and tidy. People's bedrooms were personalised with their pictures, furniture and technology which was good as this promoted comfort and familiarity. Each bedroom had their own radiators which is important so people can regulate the temperature to suit their own preference and needs.

The service had taken account of best practice guidance for people with dementia. The signage and visual markers, such as signs to show where the toilets were, enabled people to move easily and independently around the home. There was a sensory room located in the dementia unit offering additional space for people who required a calmer area to relax in. The environment was regularly assessed to ensure that it remained dementia friendly.

There was an enclosed garden which people could independently access, weather permitting. There was plenty of social space and people chose where to spend their time. We highlighted some additional maintenance in the garden throughout the year would ensure high standards of safety being maintained.

The communal areas were welcoming, spacious and tidy. The equipment used in the home were cleaned to a high standard and we confirmed they had been serviced recently. Maintenance records were in good order, with a clear process for highlighting any required work. Consequently, the general environment was safe and secure.

On each floor there was an open plan dining and lounge area, with television and comfortable seating, where people spent most of their time with others and participated in activities. On the two upper floors there was also a sunroom where some people preferred to spend their time. Previously there was an Area for Improvement around dining space, and people's dining and social experience had since been improved in one of the units. However, as improvements to provide more space for people to eat together, were still to be progressed in one other unit, this Area for Improvement remains in place.

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

To promote people's health and wellbeing, the provider should ensure that all staff are trained, competent, and have relevant guidance to fulfil their role and responsibilities.

This should include, but is not limited to, training in Moving and Handling procedures, and updated policies and procedures that are in line with best practice guidance and Scottish legislation.

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

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11)

And

'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 January 2025.

Action taken since then

The provider reported that all staff, including kitchen and housekeeping, are now up to date with Moving and Handling training.

However, policies still need work to align with Scottish legislation. Therefore, a new Area for Improvement has been implemented to allow management to continue updating their guidance and documentation.

This Area for Improvement has been met.

Previous area for improvement 2

To promote people's health and wellbeing, the provider should ensure that people have appropriate space and choice of seating during mealtimes.

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

'I can independently access the parts of the premises I use and the environment has been designed to promote this' (HSCS 5.11) and 'I have enough physical space to meet my needs and wishes' (HSCS 5.20).

Inspection report

This area for improvement was made on 30 January 2025.

Action taken since then

The dining environment in the Clyde unit has been expanded with seven round tables and additional seating, improving mealtime capacity and choice. These changes indicate tangible improvements, however the Area for Improvement remains in place because the work is not yet fully embedded across all units. However, the Service Improvement Plan shows that progress has been made toward addressing this issue.

This Area for Improvement has not been met.

Previous area for improvement 3

To provide reassurance that people's personal belongings are respected and valued, the provider should adopt a more robust system for laundry management. This should include, but is not limited to, providing safekeeping of personal property guidance for staff to follow.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This area for improvement was made on 28 April 2025.

Action taken since then

Following a complaint investigation, the provider was asked to adopt a more robust system for management to safeguard personal property.

The care home has since implemented a new labelling system (iron-on or button labels), introduced baskets with names and room numbers and the night staff are now returning laundry to bedrooms.

We saw evidence that the Residents' Personal Finances and Valuables policy mentions individual inventories, however all policies require a review and update which will be captured in the new Area for Improvement on Policies.

This Area for Improvement has been met.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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