

# Hawthorn House Care Home Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
5 February 2026

**Service provided by:**  
Glasgow City Council

**Service provider number:**  
SP2003003390

**Service no:**  
CS2003001025

## About the service

Hawthorn House is registered to provide a care service to a maximum of 120 older people. The provider is Glasgow City Council.

The care home consists of eight living units for 15 residents in each unit. There is one specialist dementia unit which supports 15 residents with a diagnosis of dementia. It is situated in the Possil area of Glasgow and is close to local amenities including shops, sports centres and music venues.

The service is a modern, purpose-built care home with single en suite accommodation over two floors. There is a range of sitting areas on the ground and upper floor, with residents opting to stay within their unit, if they wish to do so, or attend events in the communal areas of the care home. The home has a car park to the front and enclosed garden and patio areas that provided pleasant and private spaces for people.

## About the inspection

This was an unannounced inspection which took place on 3, 4 and 5 February 2026. The inspection was carried out by three 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 eight of their families
- spoke with staff and management
- observed practice and daily life
- reviewed documents
- obtained feedback from visiting professionals.

## Key messages

- People experienced positive engagement with staff, enjoying light-hearted banter and having fun together.
- People had the right support to maintain their physical and mental health and wellbeing.
- The management team had effective oversight of all aspects of the service, helping to ensure high standards across the home.
- Staffing arrangements enabled more than basic care tasks, allowing staff to support people to get the most out of life.
- Regular supervision gave staff opportunities to reflect on their practice and focus on achieving positive outcomes for people using the service.
- The home was well-maintained, warm, bright and welcoming enhancing people's comfort and wellbeing.
- Personal plans were individualised and contained a good level of detail, giving staff guidance to deliver care and support safely and in line with each person's wishes.

## 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 leadership?                | 5 - Very Good |
| How good is our staff team?                | 5 - Very Good |
| How good is our setting?                   | 5 - Very Good |
| How well is our care and support planned?  | 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 identified major strengths that had a clear, positive impact on people's experiences and outcomes. We evaluated this key question as very good.

People experiencing care expressed strong confidence in staff, describing support that met health and wellbeing needs safely and effectively. People told us they had positive, trusting relationships with staff. Throughout our visit, people benefited from regular and meaningful interactions with familiar staff who had time to engage with them beyond personal care tasks.

Staff promoted meaningful contact with loved ones and supported people to maintain relationships with those important to them. The environment was homely and welcoming, and staff engaged positively with visitors. Staff interactions were consistently kind and attentive, reflecting strong knowledge of people's preferences and needs.

People were supported to get the most out of life. People chose how to spend their days and set their own pace. Some people enjoyed relaxing in their rooms, spending time in the lounges or sitting where they chose watching the world go by. The activity programme balanced small group sessions with meaningful one-to-one time, ensuring people who preferred quieter contact were included. Activities supported people's sense of belonging and purpose. A family member told us: "There's always something for my mum to enjoy, but she's never pushed to join in if she doesn't want to." People therefore experienced days that felt purposeful.

People were supported to move and walk with confidence. Staff supported people to use mobility aids in ways that felt reassuring, taking time to walk alongside people and offer help when needed. People moved around the home at their own pace and appeared comfortable and settled. One person told us: "I go where I please." Falls were monitored and responded to appropriately, with oversight through incident recording and review. Support plans and assessments were updated when needs changed, and staff adjusted their approach to help people remain steady and confident. As a result, people felt supported and reassured when moving around their home.

People were supported to take their medication as prescribed. Systems were well-organised, with secure storage and accurate checks. Staff worked with health professionals to adjust treatment when people's wellbeing changed. Consequently, people benefited from medication that was regularly reviewed and tailored to their needs, supporting improved health and wellbeing.

Mealtimes supported people's physical wellbeing and social connection. Lunch was relaxed and sociable, and people appeared comfortable. Tables were laid thoughtfully, food was prepared and served hot, and staff offered support discreetly and respectfully where needed. People were given choice, and fluids were readily available. Staff knew people's individual dietary needs and preferences well, and clear, up-to-date information in the kitchen supported safe meal preparation. One person commented: "The food is lovely and we all sit and chat together." People experienced mealtimes that supported their nutrition and sense of companionship.

**How good is our leadership?****5 - Very Good**

We made an overall evaluation of very good for this key question, as the service demonstrated major strengths in supporting positive outcomes for people.

The management team had a high presence in the home and were familiar with people experiencing care and staff. People and their relatives felt supported by leaders who commented that the home was run for people's benefit and managers were "well-tuned into everything". We were assured that people were involved in influencing decisions which impacted on their care and support.

The manager maintained a comprehensive programme of quality audits and checks covering all aspects of the service. These were carried out regularly by different team members, promoting accountability and ownership in maintaining quality. Clear systems were in place to review actions and ensure improvements were implemented promptly. These robust processes provided the manager with effective oversight of performance and helped sustain consistently high standards across the home.

The service's improvement plan was well-structured and closely monitored, reflecting a proactive approach to continuous development. The plan showed that the manager had a clear view of what was working well and where further action was required. It highlighted the manager's capacity to drive change and follow through with identified improvements.

Staff supervision and appraisals were regular, which gave staff support and ensured the quality of care and support delivery was consistent and assured. Staff, without exception, found the management team to be supportive, accessible and approachable. They also told us the training they received improved their work performance.

Observation of staff practice was regularly carried out to ensure they were putting learning into practice. Staff were either registered or in the process of doing so with the Scottish Social Services Council (SSSC). This meant people could be confident they were being supported by the right people.

The service was very well led. People were supported in a person-centred way that recognised and respected their rights, wishes and needs.

**How good is our staff team?****5 - Very Good**

We found significant strengths in aspects of the service provided and how these supported positive outcomes for people. We therefore evaluated this key question as very good.

Staff were attentive to people's needs. Staff were visible in communal areas, noticed when people required support and responded promptly. Interactions were warm, respectful and unhurried, and people were not left waiting for assistance. Feedback from people and their relatives reflected this, with staff described as responsive and caring. As a result, people felt supported and confident that help was readily available when needed.

Staffing levels consistently met people's needs. The management team regularly reviewed rotas to identify and address any gaps in staffing. Enhanced oversight was in place, and staffing levels were increased and directed to where they were most needed, such as during periods of end-of-life care. Due to this, people experienced stable support from staff who understood them well.

Staff had a shared understanding of people's needs. Handovers were structured and clear, ensuring staff coming on shift understood the support people required. Staff working on the floor were able to confidently explain who required support, what was needed and why, demonstrating effective information flow across the team. This meant people experienced safe, coordinated care delivered by well-informed staff.

Staff were knowledgeable and skilled. They were appropriately trained for their roles and demonstrated a good understanding of people's individual needs. Training was ongoing and relevant which supported staff confidence and competence in delivering care. Strong teamwork contributed to a calm, well-organised environment for people living in the home.

## How good is our setting?

## 5 - Very Good

We evaluated this key question as very good, where performance demonstrated major strengths in supporting positive outcomes for people.

The service was well-presented throughout, with clean and pleasant communal areas. People could choose to spend time in lounge and dining areas which were attractive and homely. The dinette areas were clean and clear of clutter, allowing people access to drinks and snacks throughout the day. Although accommodation is provided in eight distinct units in the building; it was evident that people could choose to spend time outwith their home unit, in order to meet with friends, attend events or use the public areas.

People lived in a setting that felt homely, comfortable and respectful of their privacy and dignity. Bedrooms and en suite bathrooms were clean, well-maintained and personalised with people's own furniture, photographs and belongings, which helped people feel at home. Staff consistently knocked and checked consent before entering rooms, reinforcing respect for people's personal space. One person told us: "It really feels like home here." As a result, people felt comfortable, respected and secure in their personal living spaces.

The housekeeping team strived for high standards and was working throughout the service during the inspection. All bedrooms and private bathrooms were clean and well-presented, with high quality fixtures and fittings. One relative described the home as "spotless". Another said: "There is a lovely cosy feel to the home, it always smells clean and fresh." The home was clean, odour-free and well-maintained. Infection prevention and control practices were embedded in daily routines, and staff demonstrated good awareness of cleaning standards and when enhanced measures were required.

The environment was well-monitored through a regular audit and any issues or concerns were addressed promptly. A dedicated maintenance team was on hand to resolve domestic repairs, attend to redecoration and address all fire and safety checks. We found the service to be well-maintained and in a very good state of repair throughout.

We reviewed maintenance records and health and safety certificates, all of which were found to be in good order. This included evidence of regular checks of the full environment including equipment and water quality. These demonstrated a strong commitment to compliance and risk management, supporting a safe and well-maintained setting for people living, working and visiting the home. This meant people lived in a safe and hygienic environment where risks to their health and wellbeing were well-managed.

## How well is our care and support planned?

4 - Good

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

Each person had an individualised personal plan which gave staff the key information they needed to support people in achieving their desired outcomes. These plans included wide ranging details about each person, reflecting their unique needs and preferences. Care and support plans were detailed, however, there were some where information had not been updated in all sections. This had been highlighted as an ongoing focus by the management team and we supported them in their remedial approach to this area for improvement.

Guidance within the plans focused on promoting people's skills and strengths, particularly within the home. This reinforced an approach which supported independence rather than treating people as passive recipients of care.

Where people were not able to fully express their wishes and preferences, individuals with the legal authority were involved in helping shape and direct people's care and support. We were assured to see measures in place to maximise support to protect and uphold people's rights. Personal plans contained anticipatory care plans and people's wishes for resuscitation were noted, with DNACPRs (Do not attempt cardiopulmonary resuscitation) completed when this was people's chosen outcome.

Contacts for relevant health professionals and family members were noted in plans, meaning people could be quickly contacted when issues arose. Relatives were invited to take part in reviews of care which gave an opportunity for them to give feedback and be involved in a meaningful way, in support of their family member.

When people's health needs had changed, personal plans and risk assessments were promptly updated. Individuals' needs were regularly assessed and we saw good examples of people's involvement in regular review meetings. Discussions were rich in detail about what was important to the person, how they experienced their care and evidence of achieving positive outcomes. This ensured care and support delivered was responsive to people's changing needs.

## 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 ensure that people experience a service which is well led and managed, and which results in better outcomes for them, the manager should ensure that:

- a) the service's quality assurance system supports and demonstrates a culture of continuous improvement
- b) feedback from people who use and work within the service informs the identified improvements
- c) the achieved outcomes and benefits for people living in the home are evident.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19).

**This area for improvement was made on 28 November 2024.**

#### Action taken since then

We reviewed the quality assurance processes during this inspection and charted a marked improvement since the last visit.

**This area for improvement has been met.**

#### Previous area for improvement 2

To ensure that people have a personal plan which reflects the care that is right for them, the manager should ensure that:

- a) care plans and risk assessments are up-to-date and detailed with people's preferences and assessed needs
- b) meaningful participation, benefits and outcomes are detailed and reviewed on a regular basis
- c) any action or decisions taken in relation to people's assessed needs are clearly recorded
- d) people, or their nominated representative, have access to and are involved in creating and reviewing their personal plan.

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) and "My care and support meets my needs and is right for me" (HSCS 1.19).

**This area for improvement was made on 28 November 2024.**

**Action taken since then**

We noted improvement in the processes surrounding personal planning.

**This area for improvement has 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](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 leadership?  | 5 - Very Good |
| 2.2 Quality assurance and improvement is led well                          | 5 - Very Good |
| How good is our staff team?  | 5 - Very Good |
| 3.3 Staffing arrangements are right and staff work well together           | 5 - Very Good |
| How good is our setting?   | 5 - Very Good |
| 4.1 People experience high quality facilities                              | 5 - Very Good |
| How well is our care and support planned?                                  | 4 - Good      |
| 5.1 Assessment and personal planning reflects people's outcomes and wishes | 4 - Good      |

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