

Crudenlea Care Home Service

17 Cruden Terrace
Stonehaven
AB39 2LQ

Telephone: 01569 765 512

Type of inspection:
Unannounced

Completed on:
9 February 2026

Service provided by:
Cornerstone Community Care

Service provider number:
SP2003000013

Service no:
CS2003000275

About the service

Crudenlea is a care home that provides care and support to a maximum of 11 people with a learning disability and associated needs. At the time of this inspection, there were 10 people living in the home.

It is set in the North East coastal town of Stonehaven, which has good road and rail links to Aberdeen and Dundee.

The service states it aims "to enable people who require support to enjoy a valued life". In addition, the service's written statement of aims and objectives was developed from the provider's mission statement and takes into account the individual needs of the service users within the home.

About the inspection

This was an unannounced inspection which took place on 09 February 2026. 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 three people using the service
- spoke with five staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

This was a follow up inspection to evaluate the progress made to address a requirement made at our previous inspection in April 2025.

- We saw that quality assurance processes around medication management had been strengthened.
- Managers had good oversight of medication practices.
- Staff were confident that the new processes and practices had helped to bring about improvements.

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

Requirements

Requirement 1

By 10 July 2025 the provider must demonstrate that safe systems are in place for the management and administration of medication. In particular:

- the provider must ensure medication is administered at regular intervals as instructed by the prescriber and in line with the residents' lifestyle and daily routine. - the provider must ensure staff are appropriately trained and supported in medication management.
- the provider must ensure that in the event of errors, staff seek advice and guidance from the prescriber or other appropriately qualified practitioner.
- the provider must ensure that there is robust oversight of medication errors that highlight what improvements are required.

This is to comply with Regulation 4 (1)(a) welfare of users of the Social Work and Social Care 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: 'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24). This requirement was made on 10 April 2025.

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Action taken on previous requirement

This requirement was made on 10 April 2025 following a full inspection. We have completed two follow up inspections prior to this inspection on 09 February 2026 and each time have extended the deadline to enable improvements to be made to medication management processes. The most recent deadline was 16 January 2026.

At this inspection we saw that quality assurance processes had increased around the management of medication. A safer system of work had been introduced and staff were confident describing the practice they followed to help minimise the risk of any errors or to reduce the impact of any errors on people using the service.

Leaders in the service maintained a good oversight of processes which helped to ensure consistent practice.

Some staff had completed refresher medication training and new staff were being given more time to ensure that they are much more confident with the systems and processes before being signed off as competent.

There had been a significant reduction in medication errors and where discrepancies were seen, these had been identified quickly, information analysed and recorded appropriately. Together this contributes positively to safe medication management practice and supports good outcomes for people experiencing care.

This requirement had been met.

Met - outwith timescales

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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