

# Whitefield Lodge Care Home Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
10 December 2025

**Service provided by:**  
Glengall Care Group Whitefield  
Limited

**Service provider number:**  
SP2024000172

**Service no:**  
CS2024000160

## About the service

Whitefield Lodge care home is located in Lennoxton, East Dunbartonshire.

The service is registered with the Care Inspectorate to provide a care service to a maximum of 60 older people. At the time of our inspection 57 people were living in the home.

Accommodation consists of two separate units. The upstairs Glenmill unit supports people living with dementia. The Kincaid unit on the ground floor supports people who have been assessed as 'frail-elderly.'

All bedrooms within the service are single with en-suite toilet facilities. Each floor has a range of communal lounges and dining rooms. There are shared shower and bathrooms available on each floor.

There is access to a pleasant garden area at the rear of the home. The location of the home allows for good views onto the Campsie Hills.

## About the inspection

This was an unannounced inspection which took place on 09 - 10 December 2025 between 09:30 and 20:45. The inspection was carried out by two inspectors from the Care Inspectorate and an inspection volunteer assisted the inspection. 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:

- Spent time with people using the service and spoke with eight family members who were visiting. We also obtained feedback via a pre-inspection questionnaire or email from four residents and 16 families.
- Spoke with 21 staff and management, along with feedback via a pre-inspection questionnaire from 11 staff.
- Observed practice and daily life.
- Reviewed documents.
- Obtained feedback from five visiting professionals via a pre-inspection questionnaire.

**Key messages**

- The majority of people living in the care home and their families were happy with the care and support.
- People's health needs were escalated to other health professionals when needed.
- People enjoyed meals, drinks and snacks throughout the day, however, some aspects of the dining experience could be improved.
- We observed staff to work well together and this in turn created a warm atmosphere for people who lived at Whitefield Lodge.
- Refurbishment work had taken place throughout the year in Kincaid Unit, with works due to be completed soon before starting in Glenmill Unit. In the meantime, some areas within Glenmill Unit required attention to maintain a safe, clean, and comfortable environment for residents while they await the planned full refurbishment.
- Personal plans should be reviewed to ensure that they accurately reflect people's current care and support needs.
- The completion and oversight of supporting documents should be improved to make them meaningful.

**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     |
| How well is our care and support planned?  | 3 - Adequate |

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.

The majority of people living in the care home and their families were happy with the care and support. Overall, people were positive around the staff and management. A few residents felt that there could be more activities and many missed having a minibus. A few families felt that there could be better attention to detail, for example around ensuring that people's hearing aids were in and clothes cleaned after meals. One person told us, "I'm quite happy, everything is nice". Whilst another explained, "The food is good". Family comments included, "My relative is well looked after", "it would be comforting and reassuring to see staff sitting with those living at Whitefield and maybe chatting, or playing games with them" and "My relative is in the best health they have been for years."

Overall, we observed people to be clean, tidy, and well presented as staff had taken time to ensure that people maintained their dignity and sense of wellbeing.

The standard of care and support planning was inconsistent and did not always accurately reflect people's current care and support needs. This meant that staff did not always have the correct information to follow. See area for improvement under key question 5 "How well is our care and support planned?".

People enjoyed their meals in an unhurried, relaxed atmosphere at a place of their choosing. They were supported to select from a variety of meals, snacks, and drinks. Most people seemed to enjoy the meals, with alternatives available. We observed staff offering assistance to people as needed.

Some aspects of the dining experience could be improved, more so in Glenmill Unit. Tables were very basic with a lack of any table covers, placemats, napkins or wet wipes. This meant that people did not have the opportunity to wash their hands before eating and dry paper towels were used to wipe people's hands and face both during and after meals. Options for people who were awake overnight could be expanded to give more choice and nutritional content (see area for improvement 1).

People could be assured that the service liaised with external healthcare professionals as and when needed including GP, falls team and community mental health team.

People's wellbeing, mobility and confidence were enhanced as the service promoted a person-centred approach to managing and preventing falls and fractures. Equipment was in place to support people and staff were observant and responded quickly where needed.

People could be assured that they were supported to receive their medications as prescribed.

Since the last inspection, there had been some changes in care and nursing staff, with several staff still very new and some use of agency staff. Staff were still coming together as a team and getting to know the residents and routines.

## Areas for improvement

1. To ensure positive outcomes for people, the provider should review the dining experience to ensure that it is consistent across the home and supports people's dignity. They should also review access to options available overnight for those that are often awake.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My meals and snacks meet my cultural and dietary needs, beliefs and preferences' (HSCS 1.37).

## 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.

Since the provider had taken over the care home, they had put in place a refurbishment programme. Refurbishment work had taken place throughout the year in Kincaid Unit, with works due to be completed soon before starting in Glenmill Unit. Completed refurbishment was to a high standard, with the conservatory newly opened during our inspection.

In the meantime, some areas within Glenmill Unit required attention to maintain a safe, clean, and comfortable environment for residents while they await the planned full refurbishment. We found the shower room to be especially in need of attention as this was neither inviting or at an acceptable standard (see area for improvement 1).

The layout encouraged residents to sit and chat to each other. They were able to move around the care home as they wished and choose where to spend their day.

Overall, the environment was clean and tidy, with no evidence of intrusive smells with the exception of one bedroom that was awaiting new flooring. This had already been identified by the provider and we obtained confirmation that this had been ordered.

People could be assured that the care home supported the inclusion of families and friends and promoted and supported families to take their relatives out.

People were encouraged to personalise their bedrooms how they liked with photos, ornaments and other aspects that were familiar to them.

## Areas for improvement

1. To support people to live in a warm and homely environment the service should ensure that Glenmill Unit is kept safe, clean, and comfortable.

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).

## How well is our care and support planned?

## 3 - Adequate

We evaluated this key question as adequate, where although there were some strengths, these only just outweighed weaknesses.

Whilst people could be assured that they had an individualised care plan in place to guide staff, when we sampled these we found that care plans were inconsistent and did not always reflect the outcome of recent risk assessments and/or other changes for people since they had been originally written. Similarly, although the care plans were reviewed monthly, these were also inconsistent as staff had reviewed them as being up to date, even when they were not.

Improvement was needed, to ensure that personal plans were kept up to date and accurately reflected the care and support that each person should have provided by staff. This was a risk to people, especially as the service had recently had staff changes and some staff told us that they were still getting to know all aspects for people (see area for improvement 1).

Supporting legal documentation was in place to ensure people were protected and their rights were upheld.

We sampled daily supporting documents and found that where people needed a specific aspect of their health monitored, these supporting documents were inconsistently completed and that trained staff did not have an overview of these to make them meaningful. We accept that some of this may have been due to staff knowledge of the system, along with ongoing system issues (see area for improvement 2).

Six monthly care reviews had been carried out in line with legislation. This gave people and their families an opportunity to give feedback about living at Whitefield Lodge Care Home and discuss any suggestions or concerns that they may have.

### Areas for improvement

1. To support people's health and wellbeing, the provider should ensure sure that each service user has a personal plan in place, to guide staff on how to care and support them, and that completed risk assessments are used to inform each residents 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).

2.

To support people's health and wellbeing, the provider should ensure sure that where a service user needs a specific aspect of their health monitored, that supporting documents are completed and that trained staff have an overview of these. They should also ensure that staff have the knowledge and skills to use their electronic system.

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).



## 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 for people to experience a home which is adapted to meet their needs and outcomes, the provider should complete the Kings Fund Tool assessment. This should evidence and demonstrate how people's lives have been enhanced as a result.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that 'The premises have been adapted, equipped and furnished to meet my needs and wishes' (HSCS 5.16).

**This area for improvement was made on 2 December 2024.**

#### Action taken since then

As refurbishment remained in progress, we did not assess this area for improvement. However, some aspects to support people living with dementia and/or a visual impairment were in place.

This area for improvement is repeated.

#### Previous area for improvement 2

To support people's safety, the provider should ensure people are supported with appropriate moving, and handling equipment and techniques in line with best practice. This includes, but is not limited to, ensuring risk assessments and personal plans are completed detailing risks to people and risk reduction measures and provide guidance to staff on how people are to be supported with any moving and handling tasks.

This is to ensure care and support is consistent with 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).

**This area for improvement was made on 9 July 2025.**

#### Action taken since then

We sampled care plans around moving and handling and found that these provided a good level of information to guide staff. We did not observe any concerns around how staff supported people. Staff received training, including very new staff.

This area for improvement is met.

## Complaints

Please see Care Inspectorate website ([www.careinspectorate.com](http://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     |
| How well is our care and support planned?                                  | 3 - Adequate |
| 5.1 Assessment and personal planning reflects people's outcomes and wishes | 3 - Adequate |

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