

Carrickstone Care Home Care Home Service

1 Ratho Drive
Cumbernauld
Glasgow
G68 0GA

Telephone: 01236453480

Type of inspection:
Unannounced

Completed on:
20 March 2026

Service provided by:
Glengall Care Group Carrickstone
Limited

Service provider number:
SP2024000167

Service no:
CS2024000161

About the service

Carrickstone Care Home is a well-established nursing and residential home in a residential part of Cumbernauld, offering a warm and welcoming environment with good community links and access to local transport.

The home supports up to 80 residents across four modern units, each with its own lounge, dining area and access to outdoor garden space. Bedrooms include en-suite toilet and washing facilities for comfort and privacy.

Residents also enjoy a range of on-site facilities, including a cinema room, hairdressing salon, secure gardens, communal lounges, and access to a minibus for outings.

About the inspection

This was an unannounced inspection which took place on 17, 18, 19 and 20 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 16 people using the service and six of their family
- spoke with 15 staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- The service provided a good standard of care and support, with positive outcomes for people's health and wellbeing.
- Staff practice was respectful, compassionate, and attentive, and residents and relatives expressed high levels of satisfaction.
- Monitoring of incidents, infection control, nutrition, and skin health was effective, with clear evidence of responsive action.
- Improvements were underway across the environment, contributing positively to residents' comfort and wellbeing.
- Some care plan reviews required more detail to clearly show changes in people's needs and outcomes over time.
- Activity provision would benefit from stronger coordination, including better involvement of activity staff in daily updates.
- Transport issues had limited some people's opportunities to access the community, and communication about this needed to be improved.

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?	5 - Very 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

Overall, the service was achieving positive outcomes in promoting people's health and wellbeing. The strengths we saw were clear and meaningful; therefore, we evaluated this key question as good.

The inspection found a high standard of practice across the service, with clear evidence that people's health and wellbeing benefitted from the care and support provided. Most residents and relatives told us they were very happy with the home and had no complaints. They described staff as respectful, compassionate, and attentive. Feedback was consistently positive, with comments such as, "The staff are excellent, every one of them," and "My wife has come on so much the difference is night and day."

Feedback received from relatives was again largely positive, with several noting that the development of the new bowling green had been an exciting and welcome addition. Staff, nurses, and unit managers showed a particularly good understanding of each person's care plan. Staff knew people so well, they were able to respond quickly and appropriately when someone's health needs changed. The care plans and care review records we looked at showed regular monitoring, clear evaluation, and actions taken to support people's ongoing wellbeing.

When someone's health declined or changed, staff reacted promptly and contacted the right healthcare professionals. This included GPs, dietitians, speech and language therapists, and emergency services when needed. This proactive and well-coordinated approach meant people received the right care at the right time.

Relatives told us they had confidence in the care provided and felt reassured knowing their loved ones were well looked after. One comment was: "I can go home knowing my mum is being well looked after, it's such a relief."

All staff were trained in the International Dysphagia Diet Standardisation Initiative (IDDSI), ensuring residents received food and drink textures appropriate to their assessed needs and reducing choking risks. Further training was planned for new staff, demonstrating the service's continued commitment to safe and effective practice."

Nutritional care was also particularly good. Most people were happy with the meals, although a few said that some of the dish names were too fancy, making it harder to choose. People on texture modified diets were offered the same meals as others, unless modifying the food affected quality. Those who needed fortified diets or extra nutritional monitoring received this consistently, and the records clearly reflected this.

Communication about people's healthcare needs was mostly good across both day and night staff. Handover notes, care records, and staff discussions were mostly clear and consistent, helping to provide smooth handovers benefitting people's wellbeing.

Some six-monthly care plan reviews did not contain enough detail to show how individuals' lives and outcomes had changed over the previous six months. A few care plans had also not been updated to reflect people's current needs. As this issue had been identified at the previous inspection, we made it an area for improvement (see area for improvement 1).

There was a good range of activities offered to people within the home. People told us they enjoyed what

was on offer and they could join in if this was of interest. We saw musical entertainers during our inspection, and this was well attended. People's interests were taken into account.

Daily activities recorded for each person evidenced however the staff understood the need for this to be developed and more meaningful. The staff were awaiting training to input activities onto their digital system.

Some people and their relatives raised concerns regarding the care home transport, which had reportedly not been functioning, resulting in their loved ones having fewer opportunities to go out. This issue was discussed with the provider, who assured us that the matter was being actively addressed (see area for improvement 2).

A dedicated sensory therapy room had been newly created. This space was designed to promote relaxation and wellbeing for people living in the home, as well as for staff and visiting relatives. The room included a massage chair and a range of sensory features, providing a calm therapeutic environment that supported emotional and physical wellbeing.

We noted that a number of people were not always supported to arranged activities or encouraged to participate. This could be attributed to particular units and should be analysed with reasons recorded.

Furthermore, activity staff did not attend the daily update departmental meetings, as this took place during their activity sessions. As a result, they were not routinely involved in daily updates about people, which limited their ability to adapt and coordinate activities. With appropriate planning, it may be possible for one activity worker to attend these updates to improve communication and support more responsive activity provision.

Areas for improvement

1. In order for people to be assured their care plan outcomes were up to date, six-monthly reviews should be completed in full with effective detail. The provider should ensure that care plans clearly reflect any changes in people's needs, circumstances, and outcomes, and that all plans are updated to show each person's current position.

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); and 'My personal 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. In order for people to benefit more from accessing their community and other social activities in reliable and adapted transport, the provider should ensure the vehicle is kept in good working order, with no long gaps when it is out of commission. This will help people maintain community connections and participate in activities that are important to them.

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

'I am supported to participate fully and actively in my community' (HSCS 1.10); and 'My care and support meets my needs and is right for me' (HSCS 1.19).

How good is our setting?

5 - Very Good

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

The environment was clean, fresh, and welcoming with no malodours. People and their families spoke very positively about how clean the home was and how nice the surroundings felt. A refurbishment of the home had been underway, with parts of the communal areas and some units already completed. Work was ongoing in the remaining areas. These improvements supported and enhanced people's mental and emotional wellbeing.

One relative commented, "The physical setting is decent, and the domestic staff evidently worked hard to keep it clean. I feel it could be a little bit more homely with maybe jigsaw puzzles, cards, or dominoes for the people to play. Maybe even a few more plants that some of the patients could be encouraged to look after, anything we have taken in has withered and died."

The bedrooms and shared areas were inviting and contributed to a comfortable living environment. The dedicated cinema area, with its recliner seating had just been refurbished and enabled residents to enjoy social activities in a relaxed setting. Onsite hairdressing facilities supported residents' wellbeing and helped them maintain their preferred personal appearance.

People were able to choose between private and communal areas and had the right to privacy when they wished. This was supported by the building's layout, which included small, adapted spaces with seating and tables to create quiet, comfortable areas."

All relevant documents for equipment and services were completed and kept within the correct timescales. Safety checks were carried out regularly on items such as wheelchairs and profiling beds. Everyday maintenance was completed, and all records were kept up to date. These checks and routines helped keep people safe.

During our inspection, an emergency situation occurred in an outhouse which accommodated the heating system. There were clear contingency plans in place, and staff made temporary arrangements quickly so that people were not negatively affected. We observed strong teamwork, and the management team kept an incredibly good overview of the situation. Their response was well organised and of a high standard.

The management team, including the director and maintenance staff, immediately sourced a substantial number of additional heaters to make sure people remained warm. Activities staff and care staff stayed well beyond their scheduled hours and kept people engaged and reassured, particularly those who had to move from their usual living area.

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 support people's safety and wellbeing, the provider should ensure that the safe recruitment of staff procedures are followed and the checklist has been adhered to.

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

'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.23).

This area for improvement was made on 12 February 2025.

Action taken since then

Recruitment records we sampled contained the required information in accordance with safer recruitment guidelines. Appropriate identity checks, references, PVG membership, and employment histories were all in place, with no gaps or omissions identified. This demonstrated that the service followed safe and robust recruitment practices.

This area for improvement was met.

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 well do we support people's wellbeing?	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

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