

## Forthbank Nursing Home Care Home Service

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FK8 1RR

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**Type of inspection:**  
Unannounced

**Completed on:**  
25 July 2025

**Service provided by:**  
HC-One Limited

**Service provider number:**  
SP2011011682

**Service no:**  
CS2011300708

## About the service

Forthbank Nursing Home has been registered with the Care Inspectorate since October 2011 to provide a care service to a maximum of 68 older people. The provider is HC-One Limited.

The care home is a purpose built building with accommodation provided over two floors and has access to outside space. Forthbank is set within the heart of the community, close to facilities with easy access to transport links. The aims and objectives of the service state that Forthbank aims:

'To provide people with the highest quality of holistic care to allow them to enjoy their life to their fullest.'

## About the inspection

This was an unannounced inspection which took place on 23 July 2025 from 09:00 until 18:00 and 24 July 2025 from 06:30 until 14:00. The inspection was carried out by two inspectors from the Care Inspectorate, supported by an inspection volunteer. An inspection volunteer is a member of the public who volunteers to work alongside the inspectors. Inspection volunteers have a unique experience of either being a service user themselves or being a carer for someone who has used services. The inspection volunteer role is to speak with people using the service and their families and gather their views.

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 18 people using the service and five of their family representatives
- spoke with 16 staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

## Key messages

People experienced respectful and dignified care and support by staff who knew them well.

The management team knew people well and were up to date with people's current care needs.

The service needed to improve communication to better support peoples healthcare needs.

The service needed to make some changes to the environment to better support outcomes for people.

## 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 quality indicator 1.3 (People's health and wellbeing benefits from their care and support) as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People were cared for by staff who were kind, respectful and genuinely cared for them. There was enough staff to meet people's needs including supporting people's social and emotional wellbeing and people had plenty of options to occupy their time.

Mealtimes were relaxed and unhurried and people were offered additional food and drinks throughout the day. However during mealtime support, some staff were very task oriented and it was at these times that staff missed opportunities for important meaningful interaction with people.

We saw a good oversight of current health needs evidenced in the care that people received, however, this was not supported by robust care planning. Where people needed support with oral medication, we saw that there were safe systems in place and good oversight of medication practices. Protocols were in place however when people received medication on an 'as required' basis, care plans and protocols needed some updating to provide more information for staff on administration.

When we spoke to the leadership team about this we were confident that this would be addressed as their new care planning system was being implemented.

Supplementary charts were up to date throughout the day, and we could see that there was good oversight of food and fluid intake and repositioning, when required, was timely and well documented.

The service had developed good relationships with medical professionals to further support and enhance people's care. However, some people were at risk of poorer healthcare outcomes because information and communication gaps between staff meant that access to medical professionals or outcomes from professionals was not actioned timeously. Following a complaint investigation we had recently made an area for improvement about this ( See section: Outstanding areas for improvement) and we have updated this (See area for improvement 1).

### Areas for improvement

1. To keep people safe and promote their health and wellbeing, communication and recording in relation to health and wellbeing needs should be consistent across the service. This should include but not be limited to professional visits and outcomes logged detailing actions. Communication in relation to people's health and wellbeing should be effective both internally and externally.

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

"I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected." (4.18)

"I experience high quality care and support because people have the necessary information and resources." (4.27)

## How good is our setting?

## 4 - Good

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

Forthbank was a purpose built care home that had recently undergone some redecoration. The home was bright and spacious with access to a variety of communal spaces, where people could choose to be with others, or spend time on their own.

Cleaning records were all up to date and followed good practice guidance and the home appeared clean and tidy. Although the internal space was maintained, the outdoor areas needed some attention and repair to support people to enjoy outside space. People told us that they did not use the garden or balcony areas, and the communal areas were very warm and not well ventilated. This meant that people had little opportunity to enjoy fresh air. There were also limited opportunities to orientate people to time and place and we heard people asking about this. Some signage around the care home had been removed during re painting and bedrooms and toilets were not easily recognised .

We had made an area for improvement about this during our inspection in 2023. (See section: outstanding areas for improvement 1) Because this was not met and there were other environmental factors that could impact on outcomes for people, we made a new area for improvement about the environment. (See area for improvement 1).

## Areas for improvement

1. In order that people are able to move around and feel safe and secure in their surroundings, the service should undertake a review of the environment using good practice guidance.

This should include but is not limited to:

- a) easing decision-making and orientation
- b) encouraging independence and social interaction
- c) promoting easy access to outdoor space, fresh air and natural light.

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 'My environment has plenty of natural light and fresh air, and the lighting, ventilation and heating can be adjusted to meet my needs and wishes' (HSCS 5.21) .

## 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

So that people feel familiar and can orientate themselves within the home, the provider should ensure that clear signage is in place, taking account of good practice guidance.

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

**This area for improvement was made on 14 April 2023.**

#### Action taken since then

The service had just completed some refurbishing and painting. The signage had not been resolved and there were some issues about orientation and access to fresh air at this inspection. We made a new area for improvement to address this (See How good is our setting? Area for improvement 1).

#### Previous area for improvement 2

People's elimination care and support plan should have a focus of continence promotion and have details included as to the frequency people would require to be supported to the toilet.

This is in order to comply with:

Health and Social Care Standard 1.15: 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.

**This area for improvement was made on 16 July 2025.**

#### Action taken since then

This area for improvement was made in July 2025 following a complaint in April 2025. We did not review progress during this inspection as the service needed time to implement their action plan. We will review this at our next inspection.

#### Previous area for improvement 3

In addition to professional assessment, the provider should be ensuring staff are using the RESTORE 2 tool effectively and understand the purpose of its use. This will assist staff in making a decision when to contact the relevant professional to discuss people's health and wellbeing.

This is in order to comply with:

Health and Social Care Standard 3.14: 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.

**This area for improvement was made on 16 July 2025.**

#### Action taken since then

This area for improvement was made in July 2025 following a complaint in April 2025. Because we had additional concerns about communication when external healthcare professionals were involved, we reframed this area for improvement to include this (See section "How well do we support peoples wellbeing").

## 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



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