

## Victoria Gardens Care Home Care Home Service

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Glasgow  
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**Type of inspection:**  
Unannounced

**Completed on:**  
10 July 2025

**Service provided by:**  
Glasgow City Council

**Service provider number:**  
SP2003003390

**Service no:**  
CS2018371437

## About the service

Victoria Gardens Care Home is registered to provide care to a maximum of 70 older people. The service provider is Glasgow City Council.

The home consists of five units for older people, four of 15 beds and one with 10. The ground floor consists of Azalea, Crocus and Tulip units. The upper level consists of Lily and Rose units.

At the time of the inspection, the Tulip unit was at reduced capacity due to ongoing refurbishment work in some bedrooms.

Each bedroom has accessible en-suite toilet and shower facilities. People in the home have access to a range of communal areas including activity rooms, lounges, and dining areas. Other facilities throughout the home which people use include a cinema room and hairdressing facility. The home is bright and airy with well-maintained enclosed gardens for people to use.

## About the inspection

This was an unannounced inspection which took place on 9 and 10 July 2025 between the hours of 0700 and 1600 hrs. 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 12 people using the service and six of their families
- spoke with 12 members of staff and three of the management team
- spoke with one external professional
- observed practice and daily life
- reviewed documents.

## Key messages

- Peoples health was monitored and changes escalated to the relevant health professionals to promote wellbeing.
- People had access to a very good range of activities and local community links based on their preferences.
- Personal plans were person centred and directed staff on peoples needs and how they liked them to be met.
- The staff team worked well together to promote a positive experience for individuals.
- Quality assurance and improvement was well led.
- The environment was well maintained and presented, providing a choice of social spaces.

## 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 setting?	5 - Very Good
How well is our care and support planned?	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?

## 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.

People's health and wellbeing should benefit from their care and support. We observed a team of dedicated and compassionate staff who clearly cared for the people they supported. Interactions and engagements we witnessed and heard about, confirmed that staff treated people with compassion, dignity and respect. One person told us 'the staff spend time with me... they are just fantastic' whilst a relative commented 'they are great....they know her so well'. This helped to make people feel valued.

Staff responded to changes in health and wellbeing and liaised with external health professionals, when required. One external professional commented 'the staff take their time with people, they know people very well' with another comment 'to me, they (staff) are the true definition of care'. This collaborative approach helped keep people well.

People benefited from access to a varied and well-balanced diet. The menu was displayed and staff offered visual choices at the point of service. When individuals were unable to select what they would like, staff were patient in their approach and took the time with people. This helped ensure people got drinks, meals and snacks they liked. Meals were enjoyed in an unhurried, relaxed atmosphere with people choosing where they preferred to eat. When offering support at mealtimes, staff offered this discreetly, promoting dignity. One person told us 'the food is good, always a good choice available'. This promoted good nutritional intake. When required, appropriate monitoring of people's food and fluid intake was undertaken. Clear records of what individuals had been offered and what they had consumed meant that changes to planned care could be made where needed. This promoted health and wellbeing through improved nutrition and hydration.

Medication was managed effectively to support people to take the right medication at the right time. There was guidance available for staff on the administration of 'as required' medication. Staff followed recognised medication protocols to respond to individuals' needs. The service used a lessons learned approach when things did not go as expected with medication. This helped to keep people well.

The service had an established partnership with an external provider who offered reconditioning and exercise classes. This was available to all individuals, however an internal 'referral' process prioritised those who may be at risk of falls or reduced mobility who would benefit from this opportunity. This helped to reduce the risks associated with reduced movement. The service promoted a 'positive risk' approach by ensuring that any interventions were the least restrictive possible. This meant supporting individuals in taking reasonable risks to stay independent, while making sure support was as non-intrusive as possible.

A dedicated activity worker and a committed staff team worked hard to help people get the most out of life. People had opportunities to take part in a range of meaningful activities such as gardening, intergenerational activities with local schools and younger volunteers, pet therapy, arts & crafts, music activity, exercise classes and trips to the local and wider community with staff. We heard an example of the service trialling supported bike rides and the positive impact that this had on individuals' wellbeing. The service planned to expand this opportunity.

Links with the local community helped keep people connected. It was clear people enjoyed these activities. One relative told us 'there is always lots of different things going on and she (my relative) enjoys taking part', whilst an individual supported advised 'I am looking forward to digging up the potatoes'.

### How good is our leadership?

**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.

People spoke positively about the management team who were responsive, approachable and supportive. One person told us 'I would be able to speak with them and know that I would be listened to'. The management team worked well together and shared the same goals for the service.

Strong leadership and effective quality assurance processes supported a culture of continuous improvement. Quality assurance processes included the wider staff team, which contributed to the staff team striving to get things right for people. A range of quality audits had been completed, including personal planning, risk assessments, medication management, nutrition, adult support and protection and individuals experiences. This gave managers a good overview of key areas such as nutrition, medication, falls and tissue viability. The wider staff team were encouraged to participate by updating and reviewing the overview. Appropriate action plans had been developed where needed. Actions were delegated to specific members of staff. Action plans were regularly reviewed to monitor progress. This allowed managers and the staff team to measure what improvements had been made and what remained outstanding.

The service had an electronic overview of accident and incidents. This allowed reporting of events by the staff team and any corrective actions taken by the management team. The management team demonstrated a strong understanding of the system and how they used it to make improvements in the service. This lesson learned approach helped ensure learning was taken from unplanned incidents. Staff debriefing following adverse events demonstrated that staff had the opportunity to reflect on unplanned events.

An appropriate complaint policy and procedure was in place. This allowed the management team to evidence what actions had been taken should any complaints or concerns be received.

Meetings were used to gather the views of people using the service, those closest to them and the staff team. This allowed for individuals to share their experiences. These views were used to shape the ongoing service improvement plan which identified strengths and where improvement was required. A transparent self-evaluation of the service allowed the management team to assess what was working well. The evidence gathered was used to plan future developments. A new tool which would combine the self-evaluation and improvement process was being developed. This would enhance the current improvement model.

### 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 layout of the environment meant people could move around easily. This promoted individuals' independence. The environment was clean, tidy and clutter free. The staff team promoted a welcoming environment and atmosphere in the care home. Some staff had attended a local university to view examples of dementia best practice environments. The service planned to extend this opportunity to more staff. This

gave staff an understanding of the current best practice in dementia care.

One unit has experienced a leak during recent bad weather. The service responded to this appropriately by implementing robust contingency plans. This included effective communication with those living in the unit and those closest to them. This helped to keep people informed. Although external repairs had been undertaken this had not fully rectified the issue. Ongoing work was scheduled to repair the internal environment. There were a range of communal spaces available. This reduced the impact on people.

The service provided an additional family bedroom within the main area of the service. This was used for those closest to individuals living in the care home to be close to their relatives should this be required. This provided additional opportunities for meaningful connection for those living in the care home.

Bedrooms were single occupancy with ensuite shower facilities, and had been personalised when individuals wished for this. This promoted privacy and a sense of belonging. Bedrooms were equipped with a television that had the function for individuals to stream the main events from the cinema room. This allowed individuals to take part in different activities from the comfort of their bedroom should they choose not to attend. This helped to keep people connected.

The service benefited from a large accessible, well maintained garden. This provided individuals with a choice of areas where they could spend their time, with little assistance needed from the staff team. This included a pleasant garden room used for group activities and celebrating special events. We observed people enjoying the outdoor space, when the weather permitted. The garden was used by staff and people living in the service to grow their own vegetables. We heard examples of individuals being supported to harvest and cook them. It was clear that staff had worked hard to make the outside space an inviting and purposeful space for individual to spend their time.

Each unit had a system in place to report and request repairs. Repairs were followed up in a timely manner. Equipment checks were completed as expected. Maintenance arrangements helped to keep people safe and comfortable.

## How well is our care and support planned?

**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.

Personal plans help to direct staff about peoples support needs and their choices and wishes. Personal plans were written in a person-centred way and involved those living in the care home. There was evidence of people and/or those closest to them being involved in planning and reviewing care, when they wished. This helped ensure people were receiving the right care for them.

Detailed 'one-page profiles' provided a sense of the person and what was important to them. These supported new or temporary staff to get to know people and what was important to them.

It is important for services to keep clear and accurate records of care delivery and how this impacted on individuals. Clear and detailed accounts of care for individuals were written in a respectful manner and clearly evidenced outcomes for people. We shared examples with the management team of entries which demonstrated staff had evaluated the ongoing experiences for people. This helped ensure that people benefited from their planned care interventions.

Care plans were reviewed and updated regularly to account for people's changing needs. Quality assurance systems ensured that care was delivered in line with the information provided and that plans gave an accurate reflection of needs and wishes.

A review scheduled detailed six-monthly reviews that had taken place and those planned. This is important to give those living in the care home and those closest to them the opportunity to be involved in their care and support. When these had been delayed, we saw that the staff team were actively advocating for individuals by prompting external professionals to arrange these.

## 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 setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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