

Greencross Care Home Service

2 Tabernacle Street Cambuslang Glasgow G72 8JN

Telephone: 01416 411 266

Type of inspection:

Unannounced

Completed on:

8 August 2025

Service provided by:

Thistle Healthcare Limited

Service provider number:

SP2003002348

Service no: CS2003010440



About the service

Greencross is registered to provide nursing care to 76 adults and older people including people with alcohol related brain damage. The provider is Enhance Healthcare Limited.

The home is situated close to the town centre in Cambuslang, South Lanarkshire and is near to public transport routes and local amenities. The service is provided over two separate buildings.

The main building is a large traditional, Victorian stone building with 35 bedrooms housed over three floors. There is a passenger lift providing access to the upper floors. There are 19 bedrooms with en-suite facilities, six of which include shower facilities. Each floor has access to communal lounges/dining areas and shared showering and bathroom facilities. There is also smaller lounges available if people wish access to a quieter space.

There is an adjacent building termed The Lodge offering an additional 31 single rooms, all of which have ensuite showering facilities. There are two shared bathing facilities. The Lodge has a range of communal spaces including cinema room, quiet relaxation room, and a large lounge/dining room. There is also a kitchen that can be used by people who wish to prepare their own meals or tend to their laundry. There is a lift providing access to the upper floor.

The home benefits from an enclosed garden for people to use which offers pleasant places to sit. There is a parking area for visitors.

At the time of this inspection there were 58 people living at the home.

About the inspection

This was an unannounced inspection which took place on 5 and 6 August 2025 between 07:30 and 17:30 hours. Feedback was provided on 6 August 2025. Following this, further review and discussion with the provider took place about the environment and people outcomes which completed the inspection on 8 August 2025. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about the 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 21 people using the service and five relatives
- for people unable to express their views, we observed interactions with staff and how they spent their time
- spoke with 24 staff and management
- spoke with one visiting health professional
- received 22 completed questionnaires (This included relatives, staff and health professionals)
- · observed practice and daily life and
- · reviewed documents.

Key messages

- We saw warm and friendly interactions between staff and people who were being supported.
- People were supported and benefitted from a consistent management and staff team who knew them well.
- Staff felt supported by one another and the management team who had good oversight of the service.
- People were supported to thrive through a range of social and educational opportunities that helped them realise their full potential.
- The environment of the home should be improved to promote high quality facilities.
- The service had met one area for improvement made at a previous inspection.
- From the findings of this inspection, we have made two areas for improvement.

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 setting?	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?

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 were treated with compassion, kindness and respect. There were warm and pleasant interactions between staff and people supported which highlighted the positive relationships they had. People were supported by staff who knew them well, enabling people to form good relationships.

People and their relatives provided positive feedback about the service. Some people told us, "I am happy here and get on well with staff." Relatives told us, "We are really happy with the support. Staff know my mum very well and there is good communication between the staff and myself." and "Staff are brilliant. Well gelled team who have people at the forefront." One visiting professional told us, "This home has the best outcomes for people." This helped provide assurance that people were treated with compassion and support was person-centred to meet people's needs.

People were supported through an approach that promotes personal goals and meaningful engagement. The service had started a different approach to improve receiving feedback from people. Informal relaxed wellbeing reviews held at times with the presence of the home's pet rabbits contributed positively to people's sense of comfort and emotional wellbeing. This had supported people to identify preferences and aspirations, which were reflected in a wide range of personalised activities. People had taken part in educational programmes by learning new languages, attending wellbeing groups and music events. Staff spent quality 1:1 time with people, fostering strong relationships and good conversations. This ongoing support continues to deliver very good outcomes, helping people feel safe, valued, and fulfilled.

Medication was managed safely, with an emphasis on reducing the use of psychoactive drugs. The service took a proactive approach to understanding and responding to stress and distress, ensuring people received compassionate and tailored support. Robust oversight and regular reviews helped maintain minimal reliance on medication. Person-centred care plans provided clear guidance on how best to support individuals. This promoted emotional wellbeing and helped people feel safe, respected, and at ease.

Support around dietary choices had a positive impact on people's continence care needs and overall wellbeing. Through personalised guidance and small, manageable changes to dietary choices, people had experienced improvements in their physical health and independence. This had contributed to enhanced self-esteem and confidence in daily routines. Staff worked closely with individuals to understand their needs and preferences, ensuring that changes were both meaningful and sustainable. The approach continues to promote dignity, choice, and improved quality of life.

A focus had recently been introduced to support people's weight and overall wellbeing. The service had identified the need to improve how people's weight was monitored and how support was provided to address individual needs. A proactive and person-centred approach was being planned, aiming to identify personal goals and encourage small, achievable changes in diet and lifestyle. The promotion of healthy meals, snacks, and physical activity in ways that are meaningful and accessible to each person was expected to encourage participation. Regular reviews should be held to ensure the approach remains tailored and effective. This was intended to help people feel healthier, more confident, and supported in reaching their goals.

People's health had benefited from strong and consistent engagement with a range of external health professionals. Health and risk assessments were carried out regularly, and the management team maintained clear oversight of each person's healthcare needs. When changes in health were identified, timely referrals were made to appropriate services, including dietitians, psychiatry, and learning disability teams. This collaborative approach helped ensure people's health needs were met effectively and supported their overall wellbeing.

How good is our setting?

3 - Adequate

We evaluated this key question as adequate, where strengths just outweighed weaknesses. Whilst the strengths had a positive impact, key areas need to improve.

People benefitted from living in smaller group settings. Rooms were a good size, and the environment felt relaxed with options for privacy or social interaction. This supports people's comfort and choice in how they spend their time. There were varied lounge areas available for people to use. Examples included a cinema room, pool room, and quiet relaxation spaces. This helps promote meaningful activity and supports individual preferences. The needed refurbishment of the building and these rooms will ensure a warm and welcoming feel. Feedback was gathered through surveys about the service. As the environmental works progress the plans should include views on the living environment and communal spaces. This ensures people's voices shape how the setting meets their needs.

Dining experiences appeared relaxed, with people receiving timely and appropriate support where needed. The atmosphere during mealtimes was mostly calm and respectful, contributing positively to people's overall wellbeing. To enhance this further, the service should consider reviewing the dining environment, including the layout of tables, accessibility of condiments, and the availability of easy-to-read menus. These adjustments would help ensure that mealtimes remain inclusive, comfortable, and supportive of people's independence and choice. (See area for improvement 1)

The service had an environmental improvement plan in place. The registered manager had used the Care Inspectorate's self-evaluation tools to assess and inform the improvement plan. This recognised the building's age and the extensive work needed in the home. This shows they are reflective and aware of the environmental challenges.

Staff worked hard to uphold dignity and compassion in their daily practice, consistently demonstrating respectful and caring interactions with people. However, aspects of the physical environment could present challenges that may limit their ability to fully support these values. Poor lighting in some areas might affect mood and visibility, potentially reduce comfort and increase safety risks. Shared bathrooms with limited space could compromise privacy and personal dignity, making it harder for people to feel respected in their own home. These environmental factors may undermine the positive efforts of staff and impact the overall experience for people living in the service. (See area for improvement 2)

There was a dedicated housekeeping team who worked hard to maintain a clean environment for people living in the home. Worn or dated appliances and visible water damage were observed in parts of the home, which could detract from the sense of care and attention people should feel in their surroundings. The condition of fixtures and furnishings may also influence how valued and respected individuals feel. If the environment appears neglected, it could send a message that people's comfort and dignity are not a priority. Refurbishing these areas would help create a warmer, more welcoming setting that better reflects the principles of dignity, respect, and person-centred care. (See area for improvement 2)

Inspection report

A new provider had recently taken over and demonstrated a clear commitment to improving the environment. There was evidence that necessary refurbishment work had begun in some areas of the home. These improvements have the potential to create a safer, more comfortable setting that supports people's wellbeing. A well-maintained and thoughtfully designed environment would reinforce the care values that staff work hard to uphold and enhance the overall experience for people using the service.

Regular safety checks and maintenance records were in place. These checks were mostly completed, showing a commitment to maintaining a safe environment. The service should ensure there is clear recording and oversight of daily checks across the whole building when the maintenance officer is off duty. We saw evidence that fire drills had taken place several times throughout the year. Staff participation was recorded and showed high compliance. This is positive and demonstrates that the service actively engaged in fire safety preparedness. A recent Scottish Fire and Rescue Service report identified several areas for improvement. Given the change in provider, reviewing the associated action plan would be useful to ensure all recommendations were addressed. This would support continued improvement and help maintain a safe environment for people living in the service.

The service had garden areas for people to use. People could access the garden independently, and we observed individuals enjoying time outdoors. The garden included a variety of seating areas, allowing people to choose whether to relax alone or spend time with family and friends. This supported personal choice and social interaction. The garden was interactive and thoughtfully designed. It was acknowledged through inspection by the management team furniture refurbishment and upkeep was needed in areas. There were quiet areas for reflection, colourful planting, and spaces for activities. The presence of pet rabbits added interest and joy for people and visitors. These features helped support a stimulating and welcoming outdoor environment. People chose where to spend their time. The range of outdoor options supported wellbeing and encouraged meaningful engagement. This shows the importance of maintaining outdoor spaces that promote independence, comfort, and connection with others.

Areas for improvement

1. In order to enhance people's dining experiences, the provider should assess the dining environment to ensure it supports comfort, accessibility, and independence. This includes ensuring tables are set appropriately to meet people's needs, condiments are easily accessible, and menus are available in formats that are clear and easy to understand.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment. (HSCS 5.22) and 'I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables, and participate in menu planning.' HSCS 1.33)

2. In order to promote dignity and wellbeing, the provider should assess and address environmental issues within the home. This should include but is not limited to worn or dated equipment, visible water damage, and the condition of fixtures, fittings and furnishings throughout the home.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment. (HSCS 5.22) and I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices. (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

To ensure the setting meets the needs of people, the provider should consider specialist dementia design when planning any renovations or redecoration within the home. Best Practice guidance such as The Kings Fund Tool and the Care Homes Design Guide should be referred to.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state, "The premises have been adapted, equipped and furnished to meet my needs" (HSCS 5.18) and "I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment." (HSCS 5.24)

This area for improvement was made on 21 March 2024.

Action taken since then

The service had used the Kings Fund tool to assess the environment and had developed a plan based on its findings. Where possible, the service had taken steps to address identified areas for improvement - for example, wayfinding signage had been introduced. However, some signs were placed in locations that could cause confusion, and poor lighting remained in several areas of the home.

The service had considered specialist dementia design and best practice guidance, but some actions required provider-level decisions and could not be implemented locally. Despite these limitations, the manager had carried out a thorough environmental assessment, and improvement works had since begun under the new provider.

This area for improvement has been met. New areas for improvement have been made in relation to the environment.

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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our setting?	3 - Adequate
4.1 People experience high quality facilities	3 - Adequate

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