

Fairview Nursing Home Care Home Service

9 Cowie Road
Bannockburn
Stirling
FK7 8JW

Telephone: 01786 816 111

Type of inspection:
Unannounced

Completed on:
21 August 2025

Service provided by:
HC-One Limited

Service provider number:
SP2011011682

Service no:
CS2011300705

About the service

Fairview Nursing Home provides accommodation over two floors and is located in the Bannockburn area of Stirling. The service is registered to care for up to 60 people, who have a variety of health care needs including dementia. Thirty people can live on the ground floor and there is lift access to the upper floor which is a dementia care unit for 30 people. All bedrooms have an ensuite WC and wash hand basin. Each floor has a number of daily living spaces that includes lounges, dining areas, quiet rooms and hair salon. The home has pleasant gardens for people to enjoy. At the time of our inspection there were 60 people living in the home.

The provider, HC-One Limited, states: 'At HC-One our experienced home managers and members of staff ensure kindness is at the heart of everything we do.' This service has been registered with the Care Inspectorate since 31 October 2011.

About the inspection

This was an unannounced inspection which took place on 19 August and 20 August 2025. The inspection was carried out by two inspectors and on the second day three 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 20 people using the service and two of their families
- spoke with staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- People were supported in Fairview Nursing Home by staff that were kind and respectful.
- Improvement was needed in the analysis of falls within the home.
- Improvement was needed for people at end of life.
- Improvement was needed to enhance wayfinding and orientation for residents
- Improvement was required to improve teamworking, staff observation of practice, to develop a robust process for allocation of staff taking into account skill mix and experience.

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

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| How well do we support people's wellbeing? | 4 - Good |
| How good is our staff team? | 3 - Adequate |
| 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 this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Quality Indicator: 1.3 People's health and wellbeing benefits from their care and support

People were supported in Fairview nursing home by staff that were kind and respectful. People living in Fairview and their families were happy with the care and support. One person told us "staff are lovely" while a relative said "staff work hard to keep my mum happy and comfortable." All families feedback was positive, they felt involved and reassured that their loved one was cared for.

During our observation of the mealtime experience, we noted a distinct difference between the two days of our inspection, whilst the atmosphere was initially calm, it intensified, particularly dependent on which staff team and unit leaders were working. We found that people's experiences varied on the both days, yet those who needed assistance with eating and drinking received support in a caring and kind manner from staff. We discussion this further under key question 3. Special diets were catered for including fortified and modified diets and were presented nicely with choice and variety on offer.

People should be protected from harm and expect any health and wellbeing concerns to be responded to. We found that accidents and incidents were managed effectively, ensuring that individuals were protected from harm, however improvement was needed in the analysis of falls within the home, as those who experienced a fall, particularly within the recent increase, lacked detailed assessments and preventative actions related to environment factors, timings and weather conditions. **(See Area for Improvement 1)** Where there had been any health related concerns, healthcare professionals had been contacted quickly for advice. The service had developed good relationships with the healthcare teams and this meant that they knew who to contact when people needed additional healthcare assessment or support. One visiting professional told us "I have always found that Fairview make appropriate referrals to external services when necessary."

All residents had a support plan in place, which provided guidance for staff and staff knew people well. However, improvement was needed for people at end of life, as while their physical care was being attended to, there should be more detailed documentation and discussion in support plans to incorporate the spiritual and emotional needs of both the person and their relatives. **(See Area for Improvement 2)**

People could be confident that medication was administered safely as staff followed good practice guidance.

Areas for improvement

1. To support a culture of continuous improvement and learning regarding accidents and incidents where people have fallen. The service should review the current platform and develop a more robust system for analysing falls within the home, while also sharing insights and identifying patterns with managers and staff, considering factors such as the environment, weather, location and timings.

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

3.21 'I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm.'

4.19 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.'

2.

To ensure people at end of life receive holistic care and support that respects their wishes and those of their families. The service should review the current processes for identifying end of life people and ensure that these wishes are integrated into care plans, with a focus on supporting their emotional and spiritual wellbeing.

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

2.11 'My views will always be sought and my choices respected, including when I have reduced capacity to fully make my own decisions.'

How good is our staff team?

3 - Adequate

We evaluated this key question as adequate. An evaluation of adequate applies where there are some strengths, but these just outweigh weaknesses. Strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for people is reduced significantly because key areas of performance need to improve.

Quality Indicator: 3.3 Staffing arrangements are right and staff work well together

People should benefit from care and support that is consistent because staff work together as a team. We heard that where possible staff worked well together and help each other out whilst others spoke about team dynamics and poor collaboration. Many staff spoke of the leadership team within the home from the manager, deputy and unit leaders. Staff felt there was a divide within the management team work and felt some unit leaders didn't have the confidence or feel supported to address any concerns or issues identified. We saw management supported staff through staff supervision and regular team meetings. These meetings and supervisions are important to monitor staff's wellbeing and practice and to ensure people being supported experience a good quality of care and support from a competent workforce and concerns can be raised when needed. However we found there was a lack of staff observation of practice, a robust process for allocation of staff taking into account skill mix and experience. Therefore a requirement has been made. **(See Requirement 1)**

People who use services have the right to have their needs met by the right number of staff who have time to support and care for them. The service used a recognised tool to identify people's dependencies and this was used to inform the staffing levels throughout the home. The manager reports the home being fully staff but described a continuous recruitment process and an ongoing use of agency staff when needed.

We saw from training records that staff had completed a range of mandatory training both online and face-to-face in key areas, from moving and assisting, fall prevention and adult support and protection. Staff were clear about their roles.

Requirements

1. By 27 October 2025, the provider must ensure the service remains responsive to changes, develops a culture of continuous improvement and people's care needs are met by staff who work well together, have time, skills and knowledge to care and support them. To do this, the provider must, at a minimum:

- a) Review the current leadership within the units and assess the knowledge, skills and expectations of the leaders.
- b) Identify any training required for leaders to help assist them to be competent to fulfil their role.
- c) The manager to have oversight and regular meetings with leaders to ensure actions have been taken to drive improvement.
- d) The manager should carry out observation of practice to identify any training needs or areas for improvement.
- e) Review the home's service improvement plan by identifying specific improvements for individuals.
- f) Devise a process when deploying staff to units which considers skill mix, staff wellbeing and positive outcomes for people.
- g) Ensure staffing numbers meet people's needs by incorporating people's, staffs' and relatives' feedback.

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This ensures care and support is consistent with the Health and Social Care Standards, which state: 4.19 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.'

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.

Quality Indicator: 4.1. People experience high quality facilities

The home was on two levels with four units, all rooms had ensembles with wash hand basin and toilet. Each floor had access to a shower and bathroom. We observed people benefit from a comfortable, warm and homely environment. Overall the environment was clean and tidy, with no evidence of intrusive smells. People's bedrooms were comfortable and nicely personalised which helped to give people a sense of belonging. Feedback from people and staff on the environment was positive. One relative told us "its nice and homely, its nicer than other places I have seen."

People were supported with a choice of where to spend their time. People's choice to have privacy and spend time in their room was respected where possible. Improvement was needed to enhance wayfinding and orientation for residents. Whilst the home had some signage available for people to orientate to bedrooms. The long corridors lacked features to facilitate navigation and stimulate conversation which can contribute to the reduction of stress and distress for people living within the home. **(See Area for Improvement 1)**

People benefited from a maintenance person onsite, regular checks and records were being completed which meant people could be assured that they were living in a safe and well maintained environment as internal and external maintenance checks were carried out. Some areas of the home were in need of refurbishment and the home improvement plan did incorporate these areas identified.

Areas for improvement

1. To support an environment that enhances orientation, encourages conversation and minimises stress and distress. The service should review the home's current signage, engage with residents and their families to identify key talking points, that aid wayfinding, and assess levels of stress and distress, ensuring that the environment actively supports wellbeing.

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

5.11 'I can independently access the parts of the premises I use and the environment has been designed to promote this.'

5.1 'I can use an appropriate mix of private and communal areas, including accessible outdoor space, because the premises have been designed or adapted for high quality care and support.'

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

| | |
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| 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 staff team? | 3 - Adequate |
| 3.3 Staffing arrangements are right and staff work well together | 3 - Adequate |
| How good is our setting? | 4 - Good |
| 4.1 People experience high quality facilities | 4 - Good |

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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