

## Balhousie Coupar Angus Care Home Service

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Telephone: 01828 424930

**Type of inspection:**  
Unannounced

**Completed on:**  
30 January 2020

**Service provided by:**  
Balhousie Care Limited

**Service provider number:**  
SP2010011109

**Service no:**  
CS2010274577

## About the service

Balhousie Coupar Angus is a modern purpose-built care home and is registered to provide care and support to 41 older people. It is situated in the small town of Coupar Angus and has good access to local health services and other community facilities.

The home comprises of four separate units, one of which is a dedicated dementia unit providing accommodation for 10 people. There are two units located on the ground floor that have access to an enclosed and landscaped garden with its own summer house and seating area. There are a further two units located on the first floor. Each unit has a communal living and dining area and additional quiet spaces. Residents are encouraged to personalise their rooms and may, if they wish, bring small items of furniture with them. A passenger lift provides access to the first floor.

Balhousie Care Group describes their culture as "a culture based around personalisation, we create an environment that understands, supports and appreciates the individual needs of every single person. By doing this we have happy homes that people enjoy living and working in."

## What people told us

Prior to the inspection we issued a number of Care Service Questionnaires (CSQs) to the service for random distribution amongst residents, their relatives and members of staff. During the inspection we also spoke with residents, their relatives, members of staff and visiting health professionals. The feedback we received was varied, some people were very happy with their care, others felt that improvement was needed in a number of areas.

Comments included;

"Overall the staff are very good."

"I feel staff do act out of care and the food is very good."

"I feel staff are good and do their best."

"Communication isn't great."

"The food is poor."

"People are well cared for."

"The manager is very approachable."

"We are very happy with the care."

"I feel staff are run off their feet, run ragged, they don't seem to get a break."

"The communication between shift handovers could be better."

"I am very happy here."

"I would like to get out more."

"There is a lack of staff, particularly at weekends."

"When you phone they take a long time to answer."

"It is a very caring home."

"The activities are excellent."

"Staff are thin on the ground."

"There is not enough knowledge or training on dementia."

## 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 leadership?	not assessed
How good is our staff team?	not assessed
How good is our setting?	not assessed
How well is our care and support planned?	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

People should be able to choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors.

We spent time observing staff practice and the daily experience of people living in the home. Staff were friendly and supportive when assisting people, their interactions were compassionate and most staff showed a good understanding of the person's care and support needs.

The activities coordinator was passionate and committed to her role and people had access to a wide range of meaningful activities. The service had developed strong links with the community, and we saw examples of intergenerational activities that helped promote a sense of well being for all concerned. We were told that people unable to join in group activities or those who chose not to, did not have the same opportunity for social stimulation. We asked the manager to give consideration as to how the service could facilitate one-to-one time for residents who are unable, or choose not to access the opportunities on offer.

People should have their needs met by the right number of staff as this will impact on people's experience of living in the home. We observed that staff were very busy and buzzers could ring for some time, causing a delay in people's needs being responded to. Staff told us that they wanted to provide a high level of care but this was impacted by workload and staffing numbers. We were advised that there was a hold on admissions and the service was looking at the utilisation of staff across the home. This has been highlighted as an area for improvement.

We observed that some staff who, although committed to their individual roles, had difficulty working together as a team. There were also concerns raised regarding the conduct of some staff members and issues around confidentiality. This had the potential to impact negatively on residents and their care. We were reassured that staff culture and team building had been highlighted as an area for improvement in the service's own development plan and are hopeful that the input of training and supervision will bring about the cultural change that is required. This will be followed up at the next inspection.

During the inspection we spent time looking at people's personal plans and the service's quality assurance processes. We came across some instances where the management of falls, accidents and incidents had not been dealt with appropriately or notified as per regulatory guidance. This increases the chances of accidents and incidents recurring and puts people at risk. The service should address this through improved recording and analysis for patterns and trends. This would help inform the actions needed to manage risks for individuals and ensure that the service follows the requirement to notify and keep good records. This is an area for improvement.

### Areas for improvement

1. In order to ensure that service users' needs are met by the right number of people, the provider should ensure that staffing numbers are appropriate for the health, welfare and safety of service users.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state "my needs are met by the right number of people" (HSCS 3.15) and "my care and support meets my needs and is right for me" (HSCS 1.19), and in order to comply with Regulations 15 (Staffing) and 4 (Welfare of users) of the Social Care and Social Work Improvement (Requirements for Care Services) Regulations 2011

2. The provider must ensure that effective quality assurance and audit processes are completed regularly. Where areas of concern are identified risk assessments must be updated and where appropriate preventative action taken.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that "I use a service and organisation that are well led and managed" (HSCS 4.23)

## How good is our leadership?

This key question was not assessed.

## How good is our staff team?

This key question was not assessed.

## How good is our setting?

This key question was not assessed.

## How well is our care and support planned?

**4 - Good**

People should expect that their personal plan (sometimes referred to as a care plan) is right for them because it sets out how their needs will be met, as well as their wishes and choices.

People's plans had a good level of person-centred information about what the person could do for themselves, their likes and dislikes and the support they required from staff. They were written in a respectful manner and provided guidance for staff on how people wished to be cared for.

We felt that in some instances the information for people who experience stress and distress and the management of same could be strengthened. We were advised that the service intended to carry out further training for all staff, in particular for staff working in the Abby unit around the management of stress and distress.

Six monthly reviews of people's care provide an opportunity for people and their relatives to give their views and comments on the quality of the care provided. We found that reviews were not always up to date and it was not always clear how person-centred and effective these were in identifying people's goals or how individual outcomes were being achieved. Reviews could be strengthened by incorporating the Health and Social Care Standards into the review process and a greater focus on what the resident or their representative would like to achieve going forward. developing a more person focussed record of peoples needs and wishes. This would help ensure that people get the most out of life and are supported to achieve their potential

## 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?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	4 - Good
1.3 People's health benefits from their care and support	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and care planning reflects people's planning needs and wishes	4 - Good

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