

## Inch View Care Home Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
26 August 2025

**Service provided by:**  
City of Edinburgh Council

**Service provider number:**  
SP2003002576

**Service no:**  
CS2009233011

## About the service

Inch View is a 60-bed care home for older people, based in the Gilmerton area of Edinburgh. The service is provided by the City of Edinburgh Council and has been registered by the Care Inspectorate since 01 April 2011.

At the time of inspection, the care home was providing care for 55 people.

## About the inspection

This was an unannounced inspection which took place on between 13 and 25 August 2025. The inspection was carried out by 2 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 12 of their family
- Spoke with 21 staff and management
- Observed practice and daily life
- Reviewed documents
- Spoke with visiting professionals

## Key messages

- People's health and wellbeing had benefitted from their care and support
- People generally described their experiences of living within the care home as positive
- Staff were being supported well by their peers and managers
- Relatives were happy with the care and support received by their relatives
- The setting of the care home was clean, tidy and well maintained

## 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?	4 - Good
How good is our staff team?	4 - Good
How good is our setting?	4 - Good
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

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

We observed friendly compassionate and warm interactions between staff and people using the service. Established staff clearly knew people well, having developed trusting relationships with them. These relationships and the knowledge the staff had about people, helped to identify if there were any changes in people's health and wellbeing.

Staff could access information related to people's health and wellbeing within a range of formats, including the person's personal plan. This detailed people's health conditions and care needs, including their weight and dietary needs, falls risks and continence care needs. This ensured that staff had the right information to support people well.

The service had good relationships with local and specialist healthcare services, which enhanced the care and support of the teams. Staff were confident in their roles and referred people to external services when appropriate. This meant that people were receiving the right level of care from the right people at the right time.

Medication was being managed well, with minimal errors. We discussed with the managers how this could be improved especially in terms of topical medications. The managers agreed to consider different processes, to support medication recording. We'll follow this up at our next inspection.

People's wellbeing was being supported with a range of in-house and community based activities and social opportunities. One member of staff commented that many activities were more focused on the preferences of women and less orientated on men. We observed only a limited number of one to one activities during the inspection. We discussed this with the managers, who agreed to consider how these areas could be improved. We'll follow this up at our next inspection.

Food and drinks were being managed very well, with drinks, fruit, cakes, biscuits and other snacks available throughout the day, for people to help themselves to. During hot weather, drinks were available throughout the care home, in all communal areas including corridors, which people could access when needed.

Menus were varied and feedback on the food was generally very positive. Tasting sessions had supported the development of the menu to ensure people had influence on what was included. This all meant that people were content with the food and drink on offer, which was nutritionally balanced.

Meal times were relaxed and unhurried, with staff frequently checking if people were happy with their choices. We discussed with the managers how these times could be improved, with the addition of more social opportunities to support conversations and connections to be developed. The managers agreed to consider different approaches to support this.

**How good is our leadership?****4 - Good**

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

The service used a variety of quality assurance processes to ensure staff practice and documentation was being used well. This included: care plan audits, medication audits, mealtime audits and, health and safety processes. Each audit had an action plan, that supported the staff and managers to focus on tasks and processes that required to be improved. We spoke with the managers about how combining these actions plans into a dynamic improvement plan, would allow an improved overview of the service and how it could be developed further. The managers agreed to consider this.

Staff were supported to develop their skills and knowledge through the use of practice observations, where managers would observe their work and give feedback. This allowed staff to develop their knowledge and gain additional guidance on how they could improve their skills and practice.

People, staff and relatives were actively encouraged to give feedback on the service, through surveys and questionnaires. This had helped people to feel that their voice was heard and see that this influenced changes in how care and support was delivered.

Complaints had been dealt with well, generally with action taken to ensure the service developed through lessons learnt. Managers were open to improvement and had taken an approach to ensure fundamental processes were in place, before introducing new systems. This had ensured a steady improvement in the care and support, and positive change in the culture of the service.

## How good is our staff team?

4 - Good

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

Staffing arrangements appeared to be being managed well, with enough staff available throughout the day to support people. The service used a staff dependency tool and professional judgement to manage staffing numbers dependent on the changing care needs of people. This ensured that people were supported well and did not wait long for a response to their requests of support.

Staff appeared to have enough time to support people with care and support, but some people mentioned that staff had limited time to sit and chat, which had impacted on people's abilities to socially interact. This was evident during some mealtimes, which lacked social connections and meaningful conversations.

Staff worked well within their teams, and described feeling supported by their peers. There was generally a warm atmosphere, generated by close working relationships. Communication between staff and managers had improved since the last inspection, which staff commented had been welcome. This had supported better continuity of care and personal outcomes for people.

Staff who were not involved in providing direct care and support to people understood their contribution was valued, and worked well as part of the overall team. This ensured a consistent approach to ensuring positive outcomes for people.

**How good is our setting?****4 - Good**

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

People benefited from a warm, comfortable, welcoming environment with plenty of fresh air, natural light and sufficient space. The environment was relaxed, clean, tidy and well looked-after.

The care home had a welcoming entrance hall, with direct access to the well-tended courtyard gardens. During fine weather, these were being used well by people, staff and relatives, with some activities taking place in the outside spaces. This enabled people to have access to a range of communal places to enjoy the fresh air.

Some people's rooms were very personalised, with colourful decoration, family photos and personal items. Some were less personalised and limited in decoration, making the rooms feel and appear characterless. We discussed with the managers how some additional art or décor could make these spaces more welcoming and pleasant spaces for people. The managers agreed to consider how they could enable a more pleasant environment within people's bedrooms.

Each of the 4 flats within the care home had a large and small communal lounge, along with a dining kitchen, where we observed mealtimes. Dining tables were set with table cloths, flowers, menus and condiments. This all ensured that people could enjoy their meals in a pleasant environment.

The maintenance and cleanliness of the care home, was managed well, with regular spot checks completed and ongoing activity to ensure the home was safe, clean, tidy and generally free from malodours. We discussed with the managers issues related to an isolated incident of malodour, which was managed effectively and quickly with a positive outcome.

## How well is our care and support planned?

4 - Good

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

Personal plans were detailed and contained a great deal of information related to people's health, wellbeing and personal preferences. These were updated regularly and appeared to be appropriately reviewed within regulatory timescales, with people and their relatives involved in their development. This ensured that people's information was up to date and easily accessible for staff, as and when they needed it.

Personal plans included legal documentation, falls risk assessments, food and fluid charts, continence care plans, along with daily notes and formats to gather daily information on people's health and wellbeing. This helped to ensure that information was passed on to staff about any changes to a person's health conditions or their changing needs.

Personal plan audits had taken place, which highlighted areas for improvement for staff.

Some language within care plans was not in keeping with the language the person would identify with or understand. We discussed this with the managers who agreed to ensure that personal plans were accessible for people and used language that the person would understand and relate to.



## 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

People who are experiencing weight loss should be confident their nutritional status is being monitored.

Food intake records should be used to give a good overview of people's nutritional intake.

This area for improvement was made on 23 January 2025.

#### Action taken since then

Processes were implemented by the service to record and monitor people's food and fluid intake.

### 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 leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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