

Queens Manor Care Home Care Home Service

565 Queensferry Road
Edinburgh
EH4 8DU

Telephone: 01313 399 653

Type of inspection:
Unannounced

Completed on:
12 January 2026

Service provided by:
Barchester Healthcare Homes Limited

Service provider number:
SP2018013174

Service no:
CS2018369186

About the service

Queens Manor Care Home is a purpose-built residential home providing care for up to 60 older people. The service provider is Barchester Healthcare Ltd.

It is a detached building set in its own grounds on Queensferry Road, Edinburgh with car parking facilities to the front of the building. There are pleasant enclosed gardens to the rear of the property.

Accommodation is provided over two floors with stairs and a lift to the first floor. There are four units named Gameskeeper's Burn; Almond Mains Gardens; Pipers Walk; and Barnton Grove. All residents have their own rooms which have en-suite facilities. Each floor has a large dining room, a lounge with a dining area, smaller quieter sitting rooms and communal bathrooms and toilet facilities.

There is a café area downstairs. All meals are provided by the kitchen team led by the chef and the home has its own laundry facilities.

At the time of our inspection there were 51 people living at Queens Manor.

About the inspection

This was an unannounced inspection which took place between the six and seventh of January 2026. We met with residents, relatives, care staff, auxiliary staff and management. We provided feedback to the manager on 12 January 2026.

The inspection was carried out by one inspector 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:

- Met with 12 residents and eight relatives.
- Received feedback from a further 23 relatives via our online questionnaires.
- Spoke with 13 care staff, auxiliary staff and management.
- Met with two external health professionals who visit the home on a regular basis.
- Observed staff practice and daily life.

Key messages

- Staff displayed a strong sense of duty of care towards people.
- People praised the quality of the staff who supported them.
- Relatives spoke very positively about the staff team. Describing them as very caring and showing genuine warmth and interest in those they supported.
- People enjoyed participating in the variety of activities available, either in groups or on a one-to-one basis.
- People's care plans were of a very good quality and person centred to guide care staff to meet their needs.
- There was effective management oversight in place, supported by a variety of robust quality assurance systems.
- As part of this inspection, we assessed the service's self-evaluation of key areas. We found the service had made positive progress in completing their self-evaluation. The service should continue to develop this approach to support 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 leadership?	4 - Good
How good is our setting?	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 made an evaluation of very good for this key question. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes.

People experienced compassionate care and support because staff built warm, encouraging, and positive relationships with the people living in the home. These relationships helped individuals work towards and achieve their personal outcomes. One relative shared:

"My mother's well-being has been at the forefront of her care at Queens Manor. Watching the interaction of the staff with my mother has highlighted just how much they really care about the people they look after".

Staff showed a strong understanding of each person's care needs. This was supported by comprehensive and up to date personal plans which accurately reflected individuals' health and wellbeing requirements. As a result, people could feel confident staff were well informed and worked consistently to help them achieve the outcomes which mattered to them. One relative told us:

"Both myself and our family have huge confidence in the care our mother receives. All employees are fantastic and we are assured that our mother is in great hands".

Many people were vulnerable to falls, and person centred risk assessments provided clear guidance to staff, on how best to support individuals with a risk enablement supportive approach. The manager demonstrated strong oversight of fall related incidents, analysing trends and patterns to identify opportunities to reduce the likelihood of them occurring.

There was very good clinical oversight of people's care. Staff responded appropriately to changes in health and worked closely with external professionals when needed. One relative commented:

"Staff are attentive and address any care needs - liaising with health professionals if needed".

We identified several areas for improvement during our previous inspection in April 2024, particularly relating to how care delivered to people was documented. Evidence reviewed during this inspection, including the introduction of a new online care documenting system, which demonstrated improvements had been made. Further detail is provided in the section titled 'What the service has done to meet any areas for improvement, we made at or since the last inspection' of this report.

A small number of people chose to spend long periods of time in their bedrooms or in bed. Staff were observed offering gentle encouragement to get dressed and engage in meaningful interactions or activities. While it was positive staff respected each person's choice, ongoing encouragement should continue in ways which reflect what motivates each individual. Care staff should identify personalised approaches to help people feel ready to participate, ensuring a consistent and person-centred approach across the team.

The activities team offered a varied programme of events and activities, shaped by residents' preferences gathered through regular resident meetings. The programme included opportunities for physical movement, supporting people to make the most of life and pursue their interests. Special occasions like birthdays were also celebrated.

Overall, people were happy with the quality of care they received from the service. Comments from residents we spoke with included:

"The staff are very nice and I feel very well looked after".

Another said to us:

"I have started to settle in very well and that's due to the staff and the lovely homely environment".

How good is our leadership?

4 - Good

We evaluated this key question as good. While strengths had a significant positive impact, improvements are needed to ensure people consistently have experiences and outcomes which are as positive as possible.

Leadership was supportive, responsive, and visible, enabling staff to raise concerns, share ideas, and explore ways to build resilience. Staff felt their contributions were valued and recognised by the management team, which helped maintain motivation, adaptability, and a strong focus on delivering high quality care and support.

The management team used a broad range of robust quality assurance processes, providing strong oversight of people's care. These included regular clinical oversight meetings, detailed audits of medication management and care planning, and routine opportunities for residents and relatives to share their views. The service also maintained ongoing improvement and development action plans, ensuring identified areas for enhancement were monitored, reviewed, and progressed. This comprehensive approach supported a culture of continuous learning and the delivery of high quality care.

At our last inspection, we identified the need to strengthen staff observations of practice, to help maintain high standards of care and for staff to reflect on their work and identify further training needs. Although elements of reflective practice and informal observation were evident, the approach still required greater formalisation. We suggested incorporating structured observations into staff supervisions and provided practical examples of how this could be implemented. As this work has not yet been fully developed, we have repeated the area for improvement. Please see area for improvement one.

Areas for improvement

1. The manager should formalise the approach to observing staff practice, ideally through regular one-to-one supervision. This would support staff to reflect on their work, identify training and development needs, and strengthen management oversight in ensuring people's care needs continue to be met.

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

How good is our setting?

5 - Very Good

We made an evaluation of very good for this key question. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes.

People benefited from a warm, comfortable, and welcoming environment with plenty of fresh air, natural light, and space to meet their needs. The home was maintained to a very high standard, clean, tidy, relaxed, and free from intrusive noise or odours. Several residents told us the setting felt more like a hotel than a care home.

The environment had been designed or adapted to support high-quality care, drawing on good practice guidance such as the King's Fund tool for dementia friendly design, Living in the Community, and Building Better Care Homes.

People could choose between private and communal areas and were supported to enjoy privacy whenever they wished. Bedrooms were personalised with residents' own belongings and decorated to their preferences, reflecting the support offered to help people choose furnishings, layout, and even bring their own furniture.

Residents were actively involved in giving feedback about the environment, including what worked well and what could be improved. They felt listened to and able to influence changes and upgrades.

There were clear arrangements for the regular monitoring and maintenance of the premises and equipment to ensure safety. Staff received training and competency assessments to use and maintain equipment safely. All staff understood cleaning schedules and their specific responsibilities. Housekeeping and cleaning staff were knowledgeable about environmental and equipment decontamination, including the safe management of linens, uniforms, and waste.

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

The service should ensure all people have the opportunity to get the most from life and staff fully document interactions and support provided in order to facilitate this.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential". (HSCS 1.6)

This area for improvement was made on 19 April 2024.

Action taken since then

Evidence sampled at this inspection informed us improvements have been made and this has been clearly documented, through the introduction of a new online system used by the service.

Previous area for improvement 2

The service should ensure they fully document all care delivery around topical medication administration and the repositioning of people at risk of skin breakdown.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I experience high quality care and support based on relevant evidence, guidance and best practice. (HSCS 4.11)

This area for improvement was made on 19 April 2024.

Action taken since then

Evidence sampled at this inspection informed us improvements have been made and this has been clearly documented through the introduction of a new online system used by the service.

Previous area for improvement 3

The service should ensure all staff understand best practice guidance around providing care after a person has a fall.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I experience high quality care and support based on relevant evidence, guidance and best practice. (HSCS 4.11)

This area for improvement was made on 19 April 2024.

Action taken since then

Evidence gathered during this inspection showed improvements had been made. These developments were supported by staff training, a positive culture of continuous improvement, and regular reflective practice discussions. We were satisfied documentation relating to falls prevention had improved, and staff demonstrated increased awareness in supporting people safely.

Previous area for improvement 4

In order to establish staff competency, observations of practice should be undertaken early in any new member of staff's probationary period. The observations could be used in reflective discussion during supervision. Observations of staff practice should be developed and have a broader focus, which addresses all key aspects of staff practice and care delivery.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes". (HSCS 4.19)

This area for improvement was made on 19 April 2024.

Action taken since then

As highlighted in the body of this report under Key Question 2, although elements of reflective practice and informal observation were evident, the approach still required greater formalisation. We have therefore repeated this area for improvement.

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 leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

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