

Garden View Care Home Service

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Tweedbank
Galashiels
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Telephone: 01896 753 300

Type of inspection:
Unannounced

Completed on:
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Service provided by:
Scottish Borders Council

Service provider number:
SP2003001976

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CS2019378025

About the service

Garden View intermediate care provides short term reablement and assessment which is intended to help as a bridge from hospital back to people's own homes.

Intermediate care at Garden View is aimed at facilitating reablement goals which are better achieved in a more homely setting, and whilst people continue to require some support from staff.

The care home is set in an established residential area in Tweedbank, in the Scottish Borders. The building is a single storey facility, with a central accessible garden area. The building offers three well-appointed group living settings with communal dining and lounge areas for up to 23 people.

People have access to a modern single room with en-suite toilet facilities. Each bedroom has a TV point, and all areas of the service have free Wi-Fi.

People can choose from a wide selection of meals and snacks with tea and coffee making facilities available at all times. If people's reablement plan includes meal preparation this is supported in fully accessible kitchen areas.

At the time of inspection 22 people were using the service.

About the inspection

This was an unannounced inspection of the service which took place between 20 and 22 January 2026. The inspection was carried out by one inspector 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 seven people using the service. We also gave the opportunity for family/friends, health professionals and staff to complete an electronic questionnaire.
- we talked with six members of staff and the management team
- observed staff practice and daily life
- reviewed a range of documents

Key messages

- People experienced warm, compassionate, person-centred care and support
- Medication management was safe and effective
- Wider staff practice observations are needed to ensure consistent, safe care across all support tasks.
- People benefit from a clean, welcoming environment with personalised rooms and a safe, well maintained garden.

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 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 overall where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

The service had a warm, relaxed and homely atmosphere. Staff knew people well, and interactions were consistently friendly and positive. People told us, 'The staff have been so kind, they look after us well', and 'The staff have been wonderful and have been very supportive'. Feedback showed people felt reassured and confident they were being cared for in a supportive, compassionate environment.

The manager and staff actively encouraged meaningful contact between people and their families and friends. The staff team understood how important these relationships were and supported people to maintain them. One person told us, 'My family visits regularly; they can come at any time.' People were able to come and go from the service in line with their abilities, including accessing local community facilities. Staff also supported people to use digital technology to stay in touch with relatives and friends who could not visit in person. The provider ensured that electronic devices were available and offered assistance so people could use them confidently.

The mealtime experience across the service was calm, well-organised and person-centred. Staff offered people meaningful choice, provided support sensitively and consistently promoted independence, creating a relaxed and sociable atmosphere. People who had been assessed as able to prepare their own meals were supported to do so as part of the reablement approach. Staff supported this very well, offering appropriate guidance whilst promoting confidence, independence and the development of daily living skills.

People's health and wellbeing benefitted from safe and effective medication management practices. Where people were assessed as able to manage their own medication, staff prompted this and supported them to retain as much control as possible. Individuals were supported to take the correct medication at the right time, providing reassurance that people's medication needs were met safely and in line with prescribed instructions.

Staff medication competency checks were carried out thoroughly and supported by clear performance criteria, offering strong assurance of safe practice in this area. However, current competency observations focused solely on medication-related tasks, which limits oversight of staff skills across other essential aspects of care, including moving and positioning, personal care, and general care delivery. To ensure people experience safe, consistent care the manager should consider introducing a wider, structured programme of practice observations. This would strengthen oversight, consistency and safe practice, and support continuous improvement across the service.

There was a previous area for improvement made in relation to staff supervision and competency checks. This area for improvement has been partially met. We have revised this area for improvement to ensure sustained improvements of staff practice observations. (See area for improvement one).

Care plans were informed by a range of recognised assessment tools which, helped to maintain and improve people's health and wellbeing. Information within plans was monitored regularly and we saw that appropriate referrals had been made to other health professionals when required. Their advice and guidance were incorporated into relevant care plans. Health professionals highlighted their confidence in the staff

team's ability to communicate information promptly, which supported effective and well-coordinated discharge planning.

Reviews of care took place through weekly multidisciplinary meetings. Prior to these meetings staff held individual review discussions with supported people ensuring their views and preferences were captured. This meant people were fully involved in decisions about their care and support.

Areas for improvement

1. To ensure people experience high-quality, safe and consistent care, the provider should strengthen its approach to assessing and assuring staff competence. This should include:

- Implementing a structured programme of competency checks that covers all key areas of care practice, not limited to medication administration.
- Ensuring competency assessments are clearly recorded, regularly reviewed, and meaningfully linked to training, supervision, and ongoing professional development.
- Using competency findings to support reflective practice and continuous improvement across the staff team.

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

"I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes." (HSCS 3.14)

How good is our setting?

4 - Good

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

People benefitted from a warm, comfortable, welcoming environment with plenty of fresh air, natural light and sufficient space to meet their needs and wishes. The service was relaxed, clean, tidy and generally well-maintained, with no intrusive noise or unpleasant odours. Bedrooms were personalised with items that reflected their preferences and identity.

People living in the service were able to access different areas freely. A large, safe and easily accessible central garden area provided valuable outdoor space. The garden was wheelchair friendly and included raised beds, planters and a range of garden furnishings. During our visits, we observed people using this space, and it was evident that the garden was a significant asset to the overall environment.

There was clear, planned arrangements for the regular monitoring and maintenance of the premises and equipment, helping to ensure people's safety.

Housekeeping and cleaning staff were knowledgeable about environmental and equipment decontamination procedures, including the safe management of linens and waste.

The provider was in the process of agreeing new building plans with the Care Inspectorate for the future relocation of the current service. Progress with this work will be reviewed at the next inspection.

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 people experience high quality care, the provider should enable opportunities for staff to reflect on their practice by ensuring:

- staff have regular opportunities to meet as a team and through one-to-one supervision, with discussions held formally recorded
- that the competency of carers, in particular but not limited to medication support and moving and positioning, is checked, recorded and linked into training, one to one supervision and personal development;

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

"I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).

This area for improvement was made on 14 November 2024.

Action taken since then

Staff supervision is now well-established, consistently documented, and reflective in nature. Records show clear actions and timescales that promote staff development, accountability, and the delivery of safe, effective care.

Medication competency checks are carried out thoroughly and supported by clear performance criteria, offering strong assurance of safe practice in this area. However, competency observations remain limited to medication tasks. The absence of broader observational checks reduces oversight of staff skills across other essential areas of care, such as moving and positioning or general care delivery.

Introducing a wider, structured programme of practice observations would enhance quality assurance, provide a fuller picture of staff competence, and support continuous improvement across the service.

Elements of this area for improvement have been met. However, we have revised the area for improvement to ensure sustained improvements under staff competency checks. See detail under Key Question One.

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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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