

Balhousie Coupar Angus Care Home Service

Station Road
Coupar Angus
Blairgowrie
PH13 9FB

Telephone: 01828 424 930

Type of inspection:
Unannounced

Completed on:
11 February 2026

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 for 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 is comprised of four separate units, each accommodating up to 10 people. One unit is dedicated to people living with dementia. There are two units located on the ground floor that have access to an enclosed and landscaped garden, with a 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. There were 38 people living in the home at the time of inspection.

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 states that: "The prime focus for the entire team is creating a caring environment based on respect and dignity, and providing a holistic approach to the care of our residents."

About the inspection

This was an unannounced inspection which took place on 11 February 2026, between the hours of 09:15 and 15:30 hours. The inspection was carried out by two inspectors from the Care Inspectorate.

This was a follow up inspection to evaluate progress made since our last inspection, dated 20 October 2025.

To prepare for the inspection we reviewed information about the service. This included information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- Discussed care practice and support provided with people and their relatives, and staff members.
- Spoke with two people using the service.
- Spoke with two family members/representatives of people using the service.
- Spoke with eight staff and management.
- Reviewed documents.

The people we spoke with indicated that they were happy with the care and support provided, and were positive about the staff and management of the service. Some people identified that more time could be made available for staff to engage with people in social interaction and physical exercise.

Key messages

- Staff were kind and caring, and knew people well.
- There had been continued improvements in staff cover and deployment since the last inspection. This helped improve the standard of care in the home.
- A previous requirement had been made in relation to staffing. We saw that activities and time for interaction between staff and people had improved and had no significant concerns about people's welfare.
- Further developments around staff deployment and activities would benefit people's physical and mental wellbeing. An area for improvement has been made in respect of this.

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 good is our staff team?	3 - Adequate
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Further details on the particular areas inspected are provided at the end of this report.

How good is our staff team?

3 – Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

This key question only examines our evaluation of a previous requirement related to staffing.

Staff worked well as a team. They were kind and caring, and knew people's individual needs. There had been continued improvements in staff cover and deployment since the last inspection. These had a positive impact on levels of observation and the ability of staff to interact with people. The hours allocated for a 'floating' staff member, who worked across all four units in the home, had been increased to cover between 08:00 and 20:00 hours, seven days a week. This helped improve the standard of care in the home as staff had more time to spend with people when supporting them.

The service used the 'Depensys' staffing tool to assess staffing requirements. The manager also assessed broader needs, which were informed by their professional judgement and the views of staff attending daily management 'flash meetings'. This had resulted in the allocation of additional 'floating' staff hours. The service managers agreed to give consideration to involving people and their representatives in assessing staffing needs, as this would help ensure that their views and expectations were captured.

Staff had access to online and face-to-face training, which was appropriate to their roles and responsibilities. This is important in ensuring that staff have the necessary knowledge and skills to deliver high quality care.

A previous requirement had been made in relation to staffing, as detailed under requirement 1 in the section of this report titled 'What the service has done to meet any requirements we made at or since the last inspection'. We saw that activities and time for interaction between staff and people had improved and had no significant concerns about people's welfare.

Nevertheless, further developments around staff deployment and activities would benefit people's physical and mental wellbeing. We heard that direct care needs could impact on staff members' availability to interact with people during peak care times, such as early and mid-morning.

The service employed an activities coordinator, who mainly worked weekdays between 09:00 and 17:00 hours. They were keen to develop opportunities for people to be involved in a variety of social events and physical exercise; however, they were not able to involve everyone in activities. Access to regular activity helps maintain and improve people's mental and physical health. The service should therefore give ongoing consideration to wider care staff deployment and their availability to engage with people, especially at weekends.

It will be important for the service to ensure that further improvements are made and sustained going forward. This should include support provided for people; the provision of activities and promotion of people's interests; levels of observation; and interaction between staff and people living in the service.

In order to maintain focus on the above, an area for improvement has been made as detailed in Area for improvement 1 under Key Question 3: 'How good is our staff team?'

Areas for improvement

1. The service provider should give ongoing consideration to staff deployment and their availability to engage with people. This should include support provided for people; the provision of activities and promotion of people's interests; levels of observation; and interaction between staff and people living in the service.

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

'I can 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.' (HSCS 1.25);

'My needs are met by the right number of people.' (HSCS 3.15); and

'People have time to support and care for me and to speak with me.' (HSCS 3.16)

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 1 August 2024 the provider must, having regard for the size and nature of the care service, the statement of aims and objectives and the number and needs of the service users:

- a) ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety of service users.

This in order to comply with section 7 of the Health and Care (Staffing) (Scotland) Act 2019 (as substituted for regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210)).

This is to ensure care and support is consistent with Health and Social Care Standard 3.15: My needs are met by the right number of people.

This requirement was made on 6 June 2024.

Action taken on previous requirement

The home continued to make improvements around staffing and the provision of care and support for people living in the service. We saw that activities and time for interaction between staff and people had improved since the last inspection, and had no significant concerns about people's welfare. We therefore assessed that this requirement had been met.

Further discussion regarding this requirement, and our findings at inspection, is provided under Key Question 3: 'How good is our staff team?'.

Met - outwith timescales

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 good is our staff team?	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate

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