

Braeburn Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
21 January 2026

Service provided by:
Braeburn Home

Service provider number:
SP2008009800

Service no:
CS2008176891

About the service

Braeburn Home is in a quiet residential area of Edinburgh close to the Royal Botanical Gardens and the amenities of nearby Stockbridge. The home provides care and support for up to 17 older adults.

The home is a large Victorian three storey house with a lift. Each person living in Braeburn Home has their own bedroom with an en-suite toilet and access to a bathroom. There are lounges on both the ground and first floors, a dining room and a spacious hall set out with seating and fireplaces. There is a large, sheltered garden with a summer house.

At the time of the inspection, 17 people were living in Braeburn Home.

About the inspection

We carried out an unannounced inspection on 15 -16 January 2026 from 0900-1700 hours. The inspection was carried out by two 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 10 people experiencing care and four of their family representatives.

We spoke with staff and management, observed practice and daily life, reviewed a wide range of documentation and spoke with two external professionals as well as sampling questionnaire responses.

Key messages

- The care home environment was welcoming, clean and well maintained.
- People said staff were caring, kind, thoughtful and supported them well.
- We observed kind and compassionate interactions and engagement between people and staff who knew them well - this supported person-centred care.
- The service was proactive at seeking involvement from healthcare professionals as people's needs changed.
- The service needs to improve accessibility, privacy and security for the outdoor spaces.
- The manager and staff need to improve consistent provision of social and recreational opportunities, especially for those who choose to stay in or are unable to leave their rooms or people who wish to participate in regular outdoor activities.
- The service needs to improve the quality of information within peoples six monthly reviews and support better participation of people in the process.
- The service needs to improve compliance with staff training and observations of practice.

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

We observed good interactions and engagement between people and staff who knew them well. People receiving care described staff as warm, kind and thoughtful and this contributed to a positive and respectful atmosphere. Feedback from relatives was positive "I feel that Braeburn is a wonderful place. I have no concerns regarding the level of care or attention provided to my relative."

We reviewed peoples' personal plans. These were detailed and gave a good sense of the individual, their needs and how best staff could support them. Formal reviews took place every six months. Improvements were needed to ensure that people could meaningfully participate and contribute to decisions about their support. This had been an area for improvement at a previous inspection. We were not assured the necessary improvements had been made, therefore the area for improvement remains in place. For further information, please see the section: 'What the service has done to meet any areas for improvement we made at or since the last inspection.'

There were nursing staff in the home morning and night and we saw evidence of engagement with external professionals, such as GP, chiropodist, and care home support team. This gave people experiencing care, reassurance about having responsive healthcare from the right person.

Medication was stored appropriately, and staff maintained safe and effective systems for stock management, auditing and administering medication in line with prescribers' guidance. 'As required' medication protocols were in place, and support plans outlined alternative approaches for managing stress and distressed behaviours; these would benefit from further detail. Overall, people could be confident that robust systems and support were in place to help them take their prescribed medication safely.

There were forums in place for staff feedback with recorded actions and good systems in place for staff supervision. Uptake of refresher training varied, and the manager has included training and supervision actions on the improvement plan to ensure staff are trained, competent and skilled.

We observed the dining experience for people living at Braeburn, noting that seating arrangements respected individual preferences. Staff offered choices from the menu of freshly prepared meals on the day, which suited a range of dietary needs. People said the food was good and plentiful in portion size and staff offered snacks and drinks regularly throughout the day, with fresh water in all rooms. This meant people could be assured their dietary and nutritional outcomes were met.

People and their relatives told us there were no restrictions on visiting and they felt welcomed into the home. This helped ensure people could connect with those who were important to them.

Braeburn care home offered a structured activity programme twice daily, five days per week alongside a weekly sensory stimulation group and links with community services, such as singing groups, local church, and nursery.

Some relatives and residents expressed a desire for more one to one time with staff or additional activities outside the home. Our review of social and recreational records showed inconsistent engagement,

particularly for people who spend more time in their rooms or are less likely to join the daily programme. As this issue was identified at the previous inspection and we were not assured that sufficient progress had been made, the area for improvement will remain. Further details can be found in the section, 'What the service has done to meet any areas for improvement we made at or since the last inspection.'

The new manager demonstrated clear insight into what was working well and what needed improvement through effective self evaluation and improvement planning. They responded constructively to inspection feedback and showed a strong commitment to improving the service and outcomes for people. This will ensure people benefit from a culture of continuous improvement.

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.

Braeburn Home was welcoming, homely, clean, and free of any malodour. There were well provisioned and homely furnishings and fixtures, with people commenting on feeling comfortable "It's a lovely house we are in, my room is lovely."

The hallways were clear of trip hazards and safe for people to walk freely to use the accommodation. We saw people using the lounge areas for their visitors and activities allowing for social interactions and meaningful engagement.

We observed a peaceful atmosphere with regular drink and snacks served throughout the day. There were no lengthy unanswered alarm calls, which demonstrated responsive care and contributed to a calm mood.

Bedrooms were personalised and tastefully decorated. They were clean, bright, and airy and with en-suite toilet facilities giving people privacy.

The dedicated housekeeping team maintained a high standard of cleanliness throughout the accommodation, evidenced by monitored cleaning schedules. Therefore, people experienced good infection prevention outcomes from clean, tidy, and well-maintained premises, furnishings, and equipment.

We reviewed maintenance records and health and safety certificates and found all records in good order. There were regular facilities-based checks including equipment and water quality. This demonstrated a commitment to compliance, proactive risk management and meant people could be assured of a safe and well-maintained environment.

There was an on-going programme of refurbishment within the home. There were garden areas to the front and sides of the home and previous plans to develop these outdoor spaces had not been actioned. The service's improvement plan recognised this, and funding has been secured to ensure a more accessible and secure outdoor space for people as a priority.

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 that people have access to a consistent provision of social and recreational opportunities. This should extend to; people who are unable to leave their rooms, people who prefer spending time in their rooms and people who wish to participate in regular outdoor activities.

Health and Social Care Standards-1.25 '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.'

This area for improvement was made on 28 February 2025.

Action taken since then

The service had set up monthly audits to evaluate recording of activities alongside gathering feedback from staff and people experiencing care. The manager could further develop the action plans for this and seek wider feedback.

While some progress has been made, the service needs to improve how it records meaningful connections and strengthen management oversight. This will contribute to ensuring people can consistently access social and recreational opportunities, especially for those who remain in their rooms or wish to take part in regular outdoor activities.

This area for improvement is NOT met and will be repeated.

Previous area for improvement 2

To ensure personal planning reflects people's outcomes and wishes, the provider should ensure people are fully involved in review meetings in a way that is meaningful to them. This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that 'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

This area for improvement was made on 6 October 2023.

Action taken since then

A new six-month review template was introduced to capture people's outcomes and wishes; however, completion was inconsistent and the quality of meaningful information varied. The service had introduced an audit system to ensure timely reviews but participation of people in their review process was limited.

Whilst recognising some progress, to ensure the best outcomes for people during the review process, the service needs to improve consistency and quality of information and how the person is supported to be

involved.

This area for improvement is NOT met and will be repeated.

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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